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700-333
15 April 1993

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METCO DIVISION
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Subject: **OZONE DEPLETING SUBSTANCES LABELING**

Enclosure:
(1) Federal Register Vol 58, No 27, Pages 8164 thru 8169
(2) Listing of Class I and II Ozone Controlled Substances
(3) Class I Ozone Depleting Substance

On 11 February 1993, the Environmental Protection Agency published a final rule requiring the labeling of products processed, containing or manufactured with Class I Ozone Depleting Substances (ODS). The rule also requires all containers in which a Class I or II ODS is stored or transported to be labeled. This rule was effective 15 March 1993, with compliance initiating on 15 May 1993. A copy of the final rule is included as Encl (1). A listing of the Class I and II Ozone Controlled Substances is included as Encl (2). Encl (3) list the names of the chemical formulas for the Class I Ozone Depleting Substance. While the rule lists requirements for manufacturers, importers, wholesalers, distributors, and retailers, MDA would like to coordinate the label format among its supplier community.

MDA requests the appropriate warning statement be provided in the text of the shipping papers. This will assure uniformity and maintain our quality standards. This request is made and conditioned on there being no increase in contract price. Please note that section 82.106 indicates the warning statements requirements, and section 82.110 provides further detail and format information. The rule is somewhat complex and should be read in its entirety.

We hope to eliminate our use of these ODS in the future, but in the interim we must comply with the warning label. MDA has implemented a plan for elimination of Class I ODS and encourages you in your efforts as well. If you have any questions concerning the request provided in this letter or would like to receive additional information concerning MDA's ODS elimination plan, please contact the MDA buyer assigned to your account. If there is no MDA buyer assigned, contact Mr. Paul Rempes of our Environmental Assurance Organization at (314) 233-1541.

Wm L. Stowers

William L. Stowers - Vice President
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Ozone Layer: UNEP/OzL.Pro.3/L.4/Add.4 (Nairobi, 19–21 June, 1991).

United States Department of Commerce, National Bureau of Standards. The Development of Effective Symbol Signs (1982).

United States Department of Health and Human Service, Food and Drug Administration. Compliance Costs of Food Labeling Regulations (1991).

United States Environmental Protection Agency. Manual of Practices to Reduce and Eliminate CFC–113 Use in the Electronics Industry (March, 1990).

List of Subjects in 40 CFR Part 82

Administrative practice and procedure

Air pollution control, Chemicals, Chloroflourocarbons, Exports, Imports, Interstate commerce, Pass-through requirement, Reporting and recordkeeping requirements, Stratospheric ozone layer.

Dated: January 19, 1993.

William K. Reilly,

Administrator.

Title 40, Code of Federal Regulations, part 82, is amended to read as follows:

PART 82—PROTECTION OF STRATOSPHERIC OZONE

1.The authority citation for part 82 continues to read as follows:

Authority: 42 U.S.C. 7414, 7601, 7671–7671(q).

2.A new subpart E is added to read as follows:

Subpart E—The Labeling of Products Using Ozone-Depleting Substances

Sec.

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Subpart E—The Labeling of Products Using Ozone-Depleting Substances

§ 82.100 Purpose.

The purpose of this subpart is to require warning statements on containers of, and products containing or manufactured with, certain ozone-depleting substances, pursuant to section 611 of the Clean Air Act, as amended.

§ 82.102 Applicability.

(a) In the case of substances designated as class I or class II substances as of February 11, 1993, the requirements in this paragraph are applicable beginning on May 15, 1993. In the case of any substance designated as a class I or class II substance after February 11, 1993, the requirements in this paragraph of this section are applicable beginning either one year after the effective date of such designation or the date provided in the rulemaking designating such substance as a class I or class II substance, whichever comes first. On the applicability date indicated above, the requirements of this subpart shall apply to the following containers and products except as exempted under paragraph (c) of this section:

(1) All containers in which a class I or class II substance is stored or transported.

(2) All products containing a class I substance.

(3) All products directly manufactured with a process that uses a class I substance, unless otherwise exempted by this subpart or, unless the Administrator determines for a particular product that there are no substitute products or manufacturing processes for such product that do not rely on the use of a class I substance, that reduce overall risk to human health and the environment, and that are currently or potentially available. If the Administrator makes such a determination for a particular product, then the requirements of this subpart are applicable for such product no later than January 1, 2015.

(b) Beginning on January 1, 2015 in any case, or one year after any determination between May 15, 1993 and January 1, 2015, by the Administrator for a particular product that there are substitute products or manufacturing processes for such product that do not rely on the use of a class I or class II substance, that reduce the overall risk to human health and the environment, and that are currently or potentially available, the requirements of this subpart shall apply to the following:

(1) All products containing a class II substance.

(2) All products manufactured with a process that uses a class II substance.

(c) The requirements of this subpart shall not apply to products manufactured prior to May 15, 1993, provided that the manufacturer submits documentation to EPA upon request showing that the product was manufactured prior to that date.

§ 82.104 Definitions.

(a) *Class I substance* means any substance designated as class I in 40 CFR part 82, appendix A to subpart A, including chlorofluorocarbons, halons, carbon tetrachloride and methyl chloroform and any other substance so designated by the Agency at a later date.

(b) *Class II substance* means any substance designated as class II in 40 CFR part 82, appendix A to subpart A, including hydrochlorofluorocarbons and any other substance so designated by the Agency at a later date.

(c) *Consumer* means a commercial or non-commercial purchaser of a product or container that has been introduced into interstate commerce.

(d) *Container* means the immediate vessel in which a controlled substance is stored or transported.

(e) *Container containing* means a container that physically holds a controlled substance within its structure that is intended to be transferred to another container, vessel or piece of equipment in order to realize its intended use.

(f) *Controlled substance* means a class I or class II ozone-depleting substance.

(g) *Distributor* means a person to whom a product is delivered or sold for purposes of subsequent resale, delivery or export.

(h) *Export* means the transport of virgin, used, or recycled class I or class II substances or products manufactured or containing class I or class II substances from inside the United States or its territories to persons outside the United States or its territories, excluding United States military bases and ships for on-board use.

(i) *Exporter* means the person who contracts to sell class I or class II substances or products manufactured with or containing class I or class II substances for export or transfers such substances or products to his affiliate in another country.

(j) *Import* means to land on, bring into, or introduce into, or attempt to land on, bring into, or introduce into any place subject to the jurisdiction of the United States whether or not such landing, bringing, or introduction constitutes an importation within the meaning of the customs laws of the United States, with the following exceptions:

(1) Temporary off-loading of products manufactured with or containers containing class I or class II substances

from a ship are used for servicing of that ship, and

(2) Bringing containers of class I or class II substances or products containing or manufactured with class I or class II substances into the U.S. from Mexico where the class I or class II substance or container or product had been admitted into Mexico in bond and is of U.S. origin.

(k) *Importer* means any person who imports a controlled substance, a product containing a controlled substance, or any other chemical substance (including a chemical substance shipped as part of a mixture or article), into the United States. "Importer" includes the person primarily liable for the payment of any duties on the merchandise or an authorized agent acting on his or her behalf. The term also includes, as appropriate:

(1) The consignee,

(2) The importer of record listed on U.S. Customs Service forms for the import,

(3) The actual owner if an actual owner's declaration and superseding bond has been filed; or

(4) The transferee, if the right to draw merchandise in a bonded warehouse has been transferred.

(l) *Interstate commerce* means the distribution or transportation of any product between one state, territory, possession or the District of Columbia, and another state, territory, possession or the District of Columbia, or the sale, use or manufacture of any product in more than one state, territory, possession or District of Columbia. The entry points for which a product is introduced into interstate commerce are the release of a product from the facility in which the product was manufactured, the entry into a warehouse from which the domestic manufacturer releases the product for sale or distribution, and at the site of United States Customs clearance.

(m) *Manufactured with a controlled substance* means that the manufacturer of the product itself used a controlled substance directly in the product's manufacturing, but the product itself does not contain the controlled substance at the point of introduction into interstate commerce. The following situations are excluded from the meaning of the phrase "manufactured with" a controlled substance:

(1) Where a product has not had physical contact with the controlled substance; or

(2) Where the manufacturing equipment has had physical contact with a controlled substance in an intermittent manner, not as a routine part of the direct manufacturing process; or

(3) Where the controlled substance has been transformed, except for trace quantities.

(n) *Potentially available* means that adequate information exists to make a determination that the substitute is technologically feasible, environmentally acceptable and economically viable.

(o) *Principal display panel (PDP)* means the entire portion of the surface of a product, container or its outer packaging that is most likely to be displayed, shown, presented, or examined under customary conditions of retail sale. The area of the PDP is not limited to the portion of the surface covered with existing labeling; rather it includes the entire surface, excluding flanges, shoulders, handles, or necks.

(p) *Product* means an item or category of items manufactured from raw or recycled materials, or other products, which is used to perform a function or task.

(q) *Product containing* means a product including, but not limited to, containers, vessels, or pieces of equipment, that physically holds a controlled substance at the point of sale to the ultimate consumer which remains within the product.

(r) *Promotional printed material* means any informational or advertising material (including, but not limited to, written advertisements, brochures, circulars, desk references and fact sheets) that is prepared by the manufacturer for display or promotion concerning a product or container, and that does not accompany the product to the consumer.

(s) *Retailer* means a person to whom a product is delivered or sold, if such delivery or sale is for purposes of sale or distribution in commerce to consumers who buy such product for purposes other than resale.

(t) *Supplemental printed material* means any informational material (including, but not limited to, package inserts, fact sheets, invoices, material safety data sheets, procurement and specification sheets, or other material) which accompanies a product or container to the consumer at the time of purchase.

(u) *Transform* means to use and entirely consume a class I or class II substance, except for trace quantities, by changing it into one or more substances not subject to this subpart in the manufacturing process of a product or chemical.

(v) *Type size* means the actual height of the printed image of each capital letter as it appears on a label.

(w) *Ultimate consumer* means the first commercial or non-commercial purchaser of a container or product that is not intended for re-introduction into interstate commerce as a final product or as part of another product.

(x) *Warning label* means the warning statement required by section 611 of the Act. The term warning statement shall be synonymous with warning label for purposes of this subpart.

(y) *Wholesaler* means a person to whom a product is delivered or sold, if such delivery or sale is for purposes of sale or distribution to retailers who buy such product for purposes of resale.

§ 82.106 Warning statement requirements.

(a) *Required warning statements.* Unless otherwise exempted by this subpart, each container or product identified in § 82.102(a) or (b) shall bear the following warning statement, meeting the requirements of this subpart for placement and form:

WARNING: Contains [or Manufactured with, if applicable] [*insert name of substance*], a substance which harms public health and environment by destroying ozone in the upper atmosphere.

(b) *Exemptions from warning label requirement.* The following products need not bear a warning label:

(1) Products in which trace quantities of a controlled substance remain as a residue or impurity due to a chemical reaction, and where the controlled substance serves no useful purpose in or for the product itself.

(2) Products manufactured using methyl chloroform or CFC–113 by persons who can demonstrate and certify a 95% reduction in overall usage from their 1990 calendar year usage of methyl chloroform or CFC–113 as solvents during a twelve (12) month period ending within sixty (60) days of such certification or during the most recently completed calendar year. In calculating such reduction, persons may subtract from quantities used those quantities for which they possess accessible data that establishes the amount of methyl chloroform or CFC–113 transformed. Such subtraction must be performed for both the applicable twelve month period and the 1990 calendar year. If at any time future usage exceeds the 95% reduction, all products manufactured with methyl chloroform or CFC–113 as solvents by that person must be labeled immediately. No person may qualify for this exemption after May 15, 1994.

(3) Products intended only for export outside of the United States shall not be considered "products introduced into interstate commerce" provided such

products are clearly designated as intended for export only.

(4) Products that are otherwise not subject to the requirements of this subpart that are being repaired, using a process that uses a controlled substance.

(5) Products, processes, or substitute chemicals undergoing research and development, by which a controlled substance is used. Such products must be labeled when they are introduced into interstate commerce.

(c) *Interference with other required labeling information.* The warning statement shall not interfere with, detract from, or mar any labeling information required on the labeling by federal or state law.

§ 82.108 Placement of warning statement.

The warning statement shall be placed so as to satisfy the requirement of the Act that the warning statement be "clearly legible and conspicuous." The warning statement is clearly legible and conspicuous if it appears with such prominence and conspicuousness as to render it likely to be read and understood by consumers under normal conditions of purchase. Such placement includes, but is not limited to, the following:

(a) *Display panel placement.* For any affected product or container that has a display panel that is normally viewed by the purchaser at the time of the purchase, the warning statement described in § 82.106 may appear on any such display panel of the affected product or container such that it is "clearly legible and conspicuous" at the time of the purchase. If the warning statement appears on the principal display panel or outer packaging of any such affected product or container, the warning statement shall qualify as "clearly legible and conspicuous," as long as the label also fulfills all other requirements of this subpart and is not obscured by any outer packaging, as required by paragraph (b) of this section. The warning statement need not appear on such display panel if either:

(1) The warning statement appears on the outer packaging of the product or container, consistent with paragraph (b) of this section, and is clearly legible and conspicuous; or

(2) The warning statement is placed in a manner consistent with paragraph (c) of this section.

(b) *Outer packaging.* If the product or container is normally packaged, wrapped, or otherwise covered when viewed by the purchaser at the time of the purchase the warning statement described in § 82.106 shall appear on any outer packaging, wrapping or other covering used in the retail display of the product or container, such that the warning statement is clearly legible and conspicuous at the time of the purchase. If the outer packaging has a display panel that is normally viewed by the purchaser at the time of the purchase, the warning statement shall appear on such display panel. If the warning statement so appears on such product's or container's outer packaging, it need not appear on the surface of the product or container, as long as the statement also fulfills all other requirements of this subpart. The warning statement need not appear on such outer packaging if either:

(1) The warning statement appears on the surface of the product or container, consistent with paragraph (a) of this section, and is clearly legible and conspicuous through any outer packaging, wrapping or other covering used in display; or

(2) The warning statement is placed in a manner consistent with paragraph (c) of this section.

(c) *Alternative placement.* The warning statement may be placed on a hang tag, tape, card, sticker, invoice, bill of lading, supplemental printed material, or similar overlabeling that is securely attached to the container, product, outer packaging or display case, or accompanies the product containing or manufactured with a controlled substance or a container containing class I or class II substances larger than a 55 gallon drum through its sale to the consumer or ultimate consumer. For prescription medical products that have been found to be essential for patient health by the Food and Drug Administration, the warning statement may be placed in supplemental printed material intended to be read by the prescribing physician, as long as the following statement is placed on the product, its packaging, or supplemental printed material intended to be read by the patient: "This product contains [insert name of substance], a substance which harms the environment by depleting ozone in the upper atmosphere." In any case, the warning statement must be clearly legible and conspicuous at the time of the purchase.

(d) *Products not viewed by the purchaser at the time of purchase.* Where the purchaser of a product cannot view a product, its packaging or alternative labeling such that the warning statement is clearly legible and conspicuous at the time of purchase, as specified under paragraphs (a), (b), or (c) of this section, the warning statement may be placed in the following manner:

(1) Where promotional printed material is prepared for display or distribution, the warning statement may be placed on such promotional printed material such that it is clearly legible and conspicuous at the time of purchase; or

(2) The warning statement may be placed on the product, on its outer packaging, or on alternative labeling, consistent with paragraphs (a), (b), or (c of this section, such that the warning statement is clearly legible and conspicuous at the time of product delivery, if the product may be returned by the purchaser at or after the time of delivery or if the purchase is not complete until the time of delivery (e.g., products delivered C.O.D.).

§ 82.110 Form of label bearing warning statement.

(a) *Conspicuousness and contrast.* (1) The warning statement shall appear in conspicuous and legible type by typography, layout, and color with other printed matter on the label. (2) The warning statement shall appear in sharp contrast to any background upon which it appears. Examples of combinations of colors which may not satisfy the proposed requirement for sharp contrast are: black letters on a dark blue or dark green background, dark red letters on a light red background, light red letters on a reflective silver background, and white letters on a light gray or tan background.

(b) *Name of substance.* The name of the class I or class II substance to be inserted into the warning statement shall be the standard chemical name of the substance as listed in 40 CFR part 82, appendix A to subpart A, except that:

(1) The acronym "CFC" may be substituted for "chlorofluorocarbon."

(2) The acronym "HCFC" may be substituted for "hydrochlorofluorocarbon."

(3) The term "1,1,1-trichloroethane" may be substituted for "methyl chloroform."

(c) *Combined statement for multiple class I substances.* If a container containing or a product contains or is manufactured with, more than one class I or class II substance, the warning statement may include the names of all of the substances in a single warning statement, provided that the combined statement clearly distinguishes which substances the container or product contains and which were used in the manufacturing process.

(d) *Format.* (1) The warning statement shall be blocked within a square or rectangular area, with or without a border.

(2) The warning statement shall appear in lines that are parallel to the surrounding text on the product's PDP,

display panel, supplemental printed material or promotional printed material.

(e) *Type style.* (1) The ratio of the height of a capital letter to its width shall be such that the height of the letter is no more than 3 times its width.

(2) The signal word "WARNING" shall appear in all capital letters.

(f) *Type size.* The warning statement shall appear at least as large as the type sizes prescribed by this paragraph. The type size refers to the height of the capital letters. A larger type size materially enhances the legibility of the statement and is desirable.

(1) Display panel or outer packaging. Minimum type size requirements for the warning statement are given in Table 1 and are based upon the area of the display panel of the product or container. Where the statement is on outer packaging, as well as the display panel area, the statement shall appear in the same minimum type size as on the display panel.

TABLE 1

Area of display panel (sq.in.)	0–2	>2–5	>5–10	>10–15	>15–30	>30
Type size (in.)[1]:						
Signal word	3/64	1/16	3/32	7/64	1/8	5/32
Statement	3/64	3/64	1/16	3/32	3/32	7/64

> means greater than
[1] minimum height of printed image of letters

(2) Alternative placement. The minimum type size for the warning statement on any alternative placement which meets the requirements of § 82.108(c) is 3/32 inches for the signal word and 1/16 of an inch for the statement.

(3) Promotional printed material. The minimum type size for the warning statement on promotional printed material is 3/32 inches for the signal word and 1/16 of an inch for the statement, or the type size of any surrounding text, whichever is larger.

§ 82.112 Removal of label bearing warning statement.

(a) *Prohibition on removal.* Except as described in paragraph (b) or (c) of this section, any warning statement that accompanies a product or container introduced into interstate commerce, as required by this subpart, must remain with the product or container and any product incorporating such product or container, up to and including the point of sale to the ultimate consumer.

(b) *Incorporation of warning statement by subsequent manufacturers.* A manufacturer of a product that incorporates a product that is accompanied by a label bearing the warning statement may remove such label from the incorporated product if the information on such label is incorporated into a warning statement accompanying the manufacturer's product, or if, pursuant to paragraph (c) of this section, the manufacturer of the product is not required to pass through the information contained on or incorporated in the product's label.

(c) *Manufacturers that incorporate products manufactured with controlled substances.* A manufacturer that incorporates into its own product a component product that:

(1) Was purchased from another manufacturer;

(2) Was manufactured with a process that uses a controlled substance(s); but

(3) Does not contain such substance(s), may remove such label from the incorporated product and need not apply a warning statement to its own product, if the manufacturer does not use a controlled substance in its own manufacturing process.

A manufacturer that uses controlled substances in its own manufacturing process, and is otherwise subject to the regulations of this subpart, must label pursuant to § 82.106, but need not include information regrading the incorporated product on the required label.

§ 82.114 Compliance by manufacturers and importers with requirements for labeling of containers of controlled substances, or products containing controlled substances.

(a) *Compliance by manufacturers and importers with requirements for labeling of containers of controlled substances, or products containing controlled substances.* Each manufacturer of a product incorporating another product or container containing a controlled substance, to which § 82.102 (a)(1), or, (a)(2) or (b)(1) applies, that is purchased or obtained from another manufacturer or supplier, is required to pass through and incorporate the labeling information that accompanies such incorporated product in a warning statement accompanying the manufacturer's finished product. Each importer of a product, or container containing a controlled substance, to which § 82.102 (a)(1), (a)(2), or (b)(1) applies, including a component product or container incorporated into the product, that is purchased from a foreign manufacturer or supplier, is required to apply a label, or to ensure that a label has been properly applied, at the site of U.S. Customs clearance.

(b) *Reliance on reasonable belief.* The manufacturer or importer of a product that incorporates another product containing from another manufacturer or supplier may rely on the labeling information (or lack thereof) that it receives with the product, and is not required to independently investigate whether the requirements of this subpart are applicable to such purchased product or container, as long as the manufacturer reasonably believes that the supplier or foreign manufacturer is reliably and accurately complying with the requirements of this subpart.

(c) *Contractual obligations.* A manufacturer's or importer's contractual relationship with its supplier under which the supplier is required to accurately label, consistent with the requirements of this subpart, any products containing a controlled substance or containers of a controlled substance that are supplied to the manufacturer or importer, is evidence of reasonable belief.

§ 82.116 Compliance by manufacturers or importers incorporating products manufactured with controlled substances.

(a) *Compliance by manufacturers or importers incorporating products manufactured with controlled substances, or importing products manufactured with controlled substances.* Each manufacturer or importer of a product incorporating another product to which § 82.102 (a)(3), or, (b)(2) applies, that is purchased from another manufacturer or supplier, is not required to pass through and incorporate the labeling information that accompanies such incorporated product in a warning statement

accompanying the manufacturer's or importer's finished product. Importers of products to which § 82.102 (a)(3) or (b)(2) applies are required to apply a label, or to ensure that a label has been properly applied at the site of U.S. Customs clearance.

(b) *Reliance on reasonable belief.* The importer of a product purchased or obtained from a foreign manufacturer or supplier, which product may have been manufactured with a controlled substance, may rely on the information that it receives with the purchased product, and is not required to independently investigate whether the requirements of this subpart are applicable to the purchased or obtained product, as long as the importer reasonably believes that there was no use of controlled substances by the final manufacturer of the product being imported.

(c) *Contractual obligations.* An importer's contractual relationship with its supplier under which the supplier is required to accurately label, consistent with the requirements of this subpart, any products manufactured with a controlled substance that are supplied to the importer, or to certify to the importer whether a product was or was not manufactured with a controlled substance is evidence of reasonable belief.

§ 82.118 Compliance by wholesalers, distributors and retailers.

(a) *Requirement of compliance by wholesalers, distributors and retailers.* All wholesalers, distributors and retailers of products or containers to which this subpart applies are required to pass through the labeling information that accompanies the product.

(b) *Reliance on reasonable belief.* The wholesaler, distributor or retailer of a product may rely on the labeling information that it receives with the product or container, and is not required to independently investigate whether the requirements of this subpart are applicable to the product or container, as long as the wholesaler, distributor or retailer reasonably believes that the supplier of the product or container is reliably and accurately complying with the requirements of this subpart.

(c) *Contractual obligations.* A wholesaler, distributor or retailer's contractual relationship with its supplier under which the supplier is required to accurately label, consistent with the requirements of this subpart, any products manufactured with a controlled substance that are supplied to the wholesaler, distributor or retailer is evidence of reasonable belief.

§ 82.120 Petitions.

(a) *Requirements for procedure and timing.* Persons seeking to apply the requirements of this regulation to a product containing a class II substance or a product manufactured with a class I or a class II substance which is not otherwise subject to the requirements, or to temporarily exempt a product manufactured with a class I substance, based on a showing of a lack of currently or potentially available alternatives, from the requirements of this regulation may submit petitions to: Labeling Program Manager, Stratospheric Protection Division, Office of Atmospheric Programs, U.S. Environmental Protection Agency, 6202-J, 401 M Street, SW., Washington, DC 20460. Such persons must label their products while such petitions are under review by the Agency.

(b) *Requirement for adequate data.* Any petition submitted under paragraph (a) of this section shall be accompanied by adequate data, as defined in § 82.120(c). If adequate data are not included by the petitioner, the Agency may return the petition and request specific additional information.

(c) *Adequate data.* A petition shall be considered by the Agency to be supported by adequate data if it includes all of the following:

(1) A part clearly labeled "Section I.A." which contains the petitioner's full name, company or organization name, address and telephone number, the product that is the subject of the petition, and, in the case of a petition to temporarily exempt a product manufactured with a class I substance from the labeling requirement, the manufacturer or manufacturers of that product.

(2) For petitions to temporarily exempt a product manufactured with a class I substance only, a part clearly labeled "Section I.A.T." which states the length of time for which an exemption is requested.

(3) A part clearly labeled "Section I.B." which includes the following statement, signed by the petitioner or an authorized representative:

> I certify under penalty of law that I have personally examined and am familiar with the information submitted in this petition 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.

(4) A part clearly labeled "Section I.C." which fully explains the basis for the petitioner's request that EPA add the labeling requirements to or remove them from the product which is the subject of the petition, based specifically upon the technical facility or laboratory tests, literature, or economic analysis described in paragraphs (c)(5), (6) and (7) of this section.

(5) A part clearly labeled "Section II.A." which fully describes any technical facility or laboratory tests used to support the petitioner's claim.

(6) A part clearly labeled "Section II.B." which fully explains any values taken from literature or estimated on the basis of known information that are used to support the petitioner's claim.

(7) A part clearly labeled "Section II.C." which fully explains any economic analysis used to support the petitioner's claim.

(d) *Criteria for evaluating petitions.* Adequate data in support of any petition to the Agency to add a product to the labeling requirement or temporarily remove a product from the labeling requirement will be evaluated based upon a showing of sufficient quality and scope by the petitioner of whether there are or are not substitute products or manufacturing processes for such product:

(1) That do not rely on the use of such class I or class II substance;

(2) That reduce the overall risk to human health and the environment; and

(3) That are currently or potentially available.

(e) *Procedure for acceptance or denial of petition.* (1) If a petition submitted under this section contains adequate data, as defined under paragraph (c) of this section, the Agency shall within 180 days after receiving the complete petition either accept the petition or deny the petition.

(2) If the Agency makes a decision to accept a petition to apply the requirements of this regulation to a product containing or manufactured with a class II substance, the Agency will notify the petitioner and publish a proposed rule in the **Federal Register** to apply the labeling requirements to the product.

(3) If the Agency makes a decision to deny a petition to apply the requirements of this regulation to a product containing or manufactured with a class II substance, the Agency will notify the petitioner and publish an explanation of the petition denial in the **Federal Register**.

(4) If the Agency makes a decision to accept a petition to temporarily exempt a product manufactured with a class I substance from the requirements of this regulation, the Agency will notify the petitioner and publish a proposed rule in the **Federal Register** to temporarily exempt the product from the labeling

requirements. Upon notification by the Agency, such manufacturer may immediately cease its labeling process for such exempted products.

(5) If the Agency makes a decision to deny a petition to temporarily exempt a product manufactured with a class I substance from the requirements of this regulation, the Agency will notify the petitioner and may, in appropriate circumstances, publish an explanation of the petition denial in the **Federal Register**.

§ 82.122 Certification, recordkeeping, and notice requirements.

(a) *Certification.* (1) Persons claiming the exemption provided in § 82.106 (b)(2) must submit a written certification to the following address:

Labeling Program Manager, Stratospheric Protection Division, Office of Atmospheric Programs, 6202-J, 401 M Street, SW., Washington, DC 20460

(2) The certification must contain the following information:

(i) The exact location of documents verifying calendar year 1990 usage and the 95% reduced usage during a twelve month period;

(ii) A description of the records maintained at that location;

(iii) A description of the type of system used to track usage;

(iv) An indication of which 12 month period reflects the 95% reduced usage; and

(v) Name, address, and telephone number of a contact person.

(3) Persons who submit certifications postmarked on or before May 15, 1993, need not place warning labels on their products manufactured using CFC-113 or methyl chloroform as a solvent. Persons who submit certifications postmarked after May 15, 1993, must label their products manufactured using CFC-113 or methyl chloroform as a solvent for 14 days following such submittal of the certification.

(4) Persons certifying must also include a statement that indicates that their future annual use will not at no time exceed 95% of their 1990 usage.

(5) Certifications must be signed by the owner or a responsible corporate officer.

(6) If the Administrator determines that a person's certification is incomplete or that information supporting the exemption is inadequate, then products manufactured using CFC-113 or methyl chloroform as a solvent by such person must be labeled pursuant to § 82.106(a).

(b) *Recordkeeping.* Persons claiming the exemption under § 82.106(b)(2) must retain supporting documentation at one of their facilities.

(c) Notice Requirements. Persons who claim an exemption under § 82.106(b)(2) must submit a notice to the address in paragraph (a)(1) of this section within 30 days of the end of any 12 month period in which their usage of CFC-113 or methyl chloroform used as a solvent exceeds the 95% reduction from calendar year 1990.

§ 82.124 Prohibitions.

(a) *Warning statement.* (1) *Absence or presence of warning statement.* (i) On or after May 15, 1993, except as indicated in paragraph (a)(5) of this section, no container or product identified in § 82.102(a) may be introduced into interstate commerce unless it bears a warning statement that complies with the requirements of § 82.106(a) of this subpart, unless such labeling is not required under § 82.102(c), § 82.106(b), § 82.112(c), § 82.116(a), or temporarily exempted pursuant to § 82.120.

(ii) On or after January 1, 2015, or any time between May 15, 1993 and January 1, 2015 that the Administrator determines for a particular product manufactured with or containing a class II substance that there are substitute products or manufacturing processes for such product that do not rely on the use of a class I or class II substance, that reduce the overall risk to human health and the environment, and that are currently or potentially available, no product identified in § 82.102(b) may be introduced into interstate commerce unless it bears a warning statement that complies with the requirements of § 82.106 of this subpart, unless such labeling is not required under § 82.106(b), § 82.112(c) or § 82.116(a).

(2) *Placement of warning statement.* (i) On or after May 15, 1993, except as indicated in paragraph (a)(5) of this section, no container or product identified in § 82.102(a) may be introduced into interstate commerce unless it bears a warning statement that complies with the requirements of § 82.108 of this subpart, unless such labeling is not required under § 82.102(c), § 82.106(b), § 82.112(c), § 82.116(a), or temporarily exempted pursuant to § 82.120.

(ii) On or after January 1, 2015, or any time between May 15, 1993 and January 1, 2015 that the Administrator determines for a particular product manufactured with or containing a class II substance that there are substitute products or manufacturing processes for such product that do not rely on the use of a class I or class II substance, that reduce the overall risk to human health and the environment, and that are currently or potentially available, no product identified in § 82.102(b) may be introduced into interstate commerce unless it bears a warning statement that complies with the requirements of § 82.108 of this subpart, unless such labeling is not required under § 82.106(b), § 82.112 (c), or § 82.116 (a).

(3) *Form of label bearing warning statement.* (i) On or after May 15, 1993, except as indicated in paragraph (a)(5) of this section, no container or product identified in § 82.102(a) may be introduced into interstate commerce unless it bears a warning statement that complies with the requirements of § 82.110 of this subpart, unless such labeling is not required pursuant to § 82.102(c), § 82.106(b), § 82.112(c), § 82.116(a), or temporarily exempted pursuant to § 82.120.

(ii) On or after January 1, 2015, or any time between May 15, 1993 and January 1, 2015 that the Agency determines for a particular product manufactured with or containing a class II substance, that there are substitute products or manufacturing processes that do not rely on the use of a class I or class II substance, that reduce the overall risk to human health and the environment, and that are currently or potentially available, no product identified in § 82.102(b) may be introduced into interstate commerce unless it bears a warning statement that complies with the requirements of § 82.110 of this subpart, unless such labeling is not required pursuant to § 82.106(b), § 82.112(c), or § 82.116(a).

(4) On or after May 15, 1993, no person may modify, remove or interfere with any warning statement required by this subpart, except as described in § 82.112 of this subpart.

(5) In the case of any substance designated as a class I or class II substance after [insert date of publication], the prohibitions in paragraphs (a)(1)(i), (a)(2)(i), and (a)(3)(i) of this section shall be applicable beginning one year after the effective date of designation of such substance as a class I or class II substance or shall be applicable beginning on the date provided in the rulemaking designating such substance as a class I or class II substance, whichever comes first.

[FR Doc. 93-2704 Filed 2-10-93; 8:45 am]
BILLING CODE 6560-50-P

LISTING OF CLASS I & II OZONE CONTROLLED SUBSTANCES

Appendix A to Subpart A—Class I Controlled Substances

Controlled substance	Ozone depletion weight
A. Group I	
$CFCl_3$—Trichlorofluoromethane (CFC-11)	1.0
CCl_2F_2—Dichlorodifluoromethane (CFC-12)	1.0
CCl_2F-$CClF_2$—Trichlorotrifluoroethane (CFC-113)	0.8
CF_2Cl-$CClF_2$—Dichlorotetrafluoroethane (CFC-114)	1.0
$CClF_2$-CF_3—(Mono) chloropentafluoroethane (CFC-115)	0.6
All isomers of the above chemicals	
B. Group II	
CF_2BrCl—Bromochlorodifluoromethane (halon 1211)	3.0
CF_3Br—Bromotrifluoromethane (halon 1301)	10.0
$C_2F_4Br_2$—Dibromotetrafluoroethane (halon 2402)	6.0
All isomers of the above chemicals	
C. Group III	
CF_3Cl—Chlorotrifluoromethane (CFC-13)	1.0
C_2FCl_5 (CFC-111)	1.0
$C_2F_2Cl_4$—(CFC-112)	1.0
C_2FCl_7—(CFC-211)	1.0
$C_2F_2Cl_6$—(CFC-212)	1.0
$C_2F_3Cl_5$—(CFC-213)	1.0
$C_2F_4Cl_4$—(CFC-214)	1.0
$C_2F_5Cl_3$—(CFC-215)	1.0
$C_2F_6Cl_2$—(CFC-216)	1.0
C_2F_7Cl—(CFC-217)	1.0
All isomers of the above chemicals	
D. Group IV	
CCl_4—Carbon Tetrachloride	1.1
E. Group V	
$C_2H_3Cl_3$—1,1,1-Trichloroethane (Methyl chloroform)	.1
All isomers of the above chemical, except for 1,1,2-trichloroethane.	

Appendix B to Subpart A—Class II Controlled Substances

$CHFCl_2$-Dichlorofluoromethane (HCFC-21)	(1)
CHF_2Cl-Chlorodifluoromethane (HCFC-22)	0.05
CH_2FCl-Chlorofluoromethane (HCFC-31)	(1)
C_2HFCl_4- (HCFC-121)	(1)
$C_2HF_2Cl_3$ (HCFC-122)	(1)
$C_2HF_3Cl_2$- (HCFC-123)	0.02
C_2HF_4Cl- (HCFC-124)	0.02
$C_2H_2FCl_3$- (HCFC-131)	(1)
$C_2H_2F_2Cl_2$- (HCFC-132b)	(1)
$C_2H_2F_3Cl$- (HCFC-133a)	(1)
$C_2H_3FCl_2$- (HCFC-141b)	0.12
$C_2H_3F_2Cl$- (HCFC-142b)	0.06
C_2HFCl_5- (HCFC-221)	(1)
$C_2HF_2Cl_4$- (HCFC-222)	(1)
$C_2HF_3Cl_3$- (HCFC-223)	(1)
$C_2HF_4Cl_2$- (HCFC-224)	(1)
$C_2HF_5Cl_2$- (HCFC-225ca)	(1)
(HCFC-225cb)	(1)
C_2HF_6Cl- (HCFC-226)	(1)
$C_2H_2FCl_4$- (HCFC-231)	(1)
$C_2H_2F_2Cl_3$- (HCFC-232)	(1)
$C_2H_2F_3Cl_2$- (HCFC-233)	(1)
$C_2H_2F_4Cl_2$- (HCFC-234)	(1)
$C_2H_2F_5Cl$- (HCFC-235)	(1)
$C_2H_3FCl_3$- (HCFC-241)	(1)
$C_2H_3F_2Cl_2$- (HCFC-242)	(1)
$C_2H_3F_3Cl_2$- (HCFC-243)	(1)
$C_2H_3F_4Cl$- (HCFC-244)	(1)
$C_2H_4FCl_3$- (HCFC-251)	(1)
$C_2H_4F_2Cl_2$- (HCFC-252)	(1)
$C_2H_4F_3Cl$- (HCFC-253)	(1)
$C_2H_5FCl_2$- (HCFC-261)	(1)
$C_2H_5F_2Cl$- (HCFC-262)	(1)
C_2H_6FCl- (HCFC-271)	(1)
All isomers of the above chemicals	(1)

CLASS 1 OZONE DEPLETING SUBSTANCE

HALOCARBON NUMBER	NAME
GROUP I	
CFC-11	TRICHLOROFLUOROMETHANE
CFC-12	DICHLORODIFLUOROMETHANE
CFC-113	TRICHLOROTRIFLUOROETHANE
CFC-114	DICHLOROTETRAFLUOROETHANE
CFC-115	CHLOROPENTAFLUOROETHANE
GROUP II	
HALON 1211	BROMOCHLORODIFLUOROMETHANE
HALON 1301	BROMOTRIFLUOROMETHANE
HALON 2402	DIBROMOTETRAFLUOROMETHANE
GROUP III	
CFC-13	CHLOROTRIFLUOROMETHANE
CFC-111	PENTACHLOROFLUOROETHANE
CFC-112	TETRACHLORODIFLUOROETHANE
CFC-211	HEPTACHLOROFLUOROPROPANE
CFC-212	HEXACHLORODIFLUOROPROPANE
CFC-213	PENTACHLOROTRIFLUOROPROPANE
CFC-214	TETRACHLOROTETRAFLUOROPROPANE
CFC-215	TRICHLOROPENTAFLUOROPROPANE
CFC-216	DICHLOROHEXAFLUOROPROPANE
CFC-217	CHLOROHEPTAFLUOROPROPANE
GROUP IV	
CARBON TETRACHLORIDE	TETRACHLOROETHANE
GROUP V	
METHYL CHLOROFORM	TRICHLOROETHANE (ALL ISOMERS)

47-15-17 (10/87)—27c

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

GENERATOR ANNUAL REPORT

for the year ending December 31, 19 89

[X] GENERATOR EPA ID NUMBER NYD057731663 OR [ ] SMALL GENERATOR [ ] EXEMPT GENERATOR

NAME	TELEPHONE NUMBER
METCO DIVISION PERKIN-ELMER	516-334-1300

STREET: 325 DUFFY AVENUE

CITY	STATE	ZIP CODE
HICKSVILLE	NY	11801

TREATMENT, STORAGE, OR DISPOSAL FACILITY (TSDF)

EPA ID NUMBER NJD980536593

NAME	TELEPHONE NUMBER
ADVANCED ENVIRONMENTAL TECHNOLOGY CORPORATION	201-347-7111

STREET: GOLD MINE ROAD

CITY	STATE	ZIP CODE
FLANDERS	NJ	07836

WASTE INFORMATION

WASTE DESCRIPTION	WASTE NUMBER	HANDLING CODE	QUANTITY (in Whole Tons)
WASTE FLAMMABLE LIQUID, NOS	F005	B	.9
WASTE 1,1,1 TRICHLOROETHANE	F002	B	.2
WASTE OIL, NOS	X726	B	1.0
WASTE CHEMICAL, NOS	X900	B	.7
RQ WASTE COMBUSTIBLE LIQUID, NOS	D001	B	1.6
WASTE CHROMIC ACID SOLUTION	D002	T	.2
HAZARDOUS WASTE LIQUID, NOS	F001	B	.5
WASTE CHEMICAL NOS	X910	B	.1
WASTE FLAMMABLE LIQUID, NOS	F003	B	.1

I hereby affirm under penalty of perjury that information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

PRINT OR TYPE NAME	TITLE
Patrick A. Tighe	SUPERINTENDENT, FACILITIES COORDINATION

SIGNATURE	DATE
Patrick A. Tighe	02/23/90

47-15-17 (10/87)—27c

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

GENERATOR ANNUAL REPORT

for the year ending December 31, 19 89

☒ GENERATOR EPA ID NUMBER N Y D 0 5 7 7 3 1 6 6 3 OR ☐ SMALL GENERATOR ☐ EXEMPT GENERATOR

NAME	TELEPHONE NUMBER
METCO DIVISION PERKIN-ELMER	516-334-1300

STREET
325 DUFFY AVENUE

CITY	STATE	ZIP CODE
HICKSVILLE	NY	11801

TREATMENT, STORAGE, OR DISPOSAL FACILITY (TSDF)

EPA ID NUMBER N J D 0 0 2 4 5 4 5 4 4

NAME	TELEPHONE NUMBER
MARISOL, INC.	201-469-5100

STREET
125 FACTORY LANE

CITY	STATE	ZIP CODE
MIDDLESEX	NJ	08846

WASTE INFORMATION

WASTE DESCRIPTION	WASTE NUMBER	HANDLING CODE	QUANTITY (in Whole Tons)
HAZARDOUS WASTE, LIQUID NOS	F 0 0 1	B	.8

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PRINT OR TYPE NAME	TITLE
Patrick A. Tighe	SUPERINTENDENT, FACILITIES COORDINATION

SIGNATURE	DATE
Patrick A. Tighe	02/23/90

47-15-17 (10/87)—27c

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

GENERATOR ANNUAL REPORT

for the year ending December 31, 19 89

[X] GENERATOR EPA ID NUMBER NYD198155857 0 OR [ ] SMALL GENERATOR [ ] EXEMPT GENERATOR

NAME	TELEPHONE NUMBER
METCO DIVISION PERKIN-ELMER	516-334-1300

STREET: 220 MILLER PLACE

CITY	STATE	ZIP CODE
HICKSVILLE	NY	11801

TREATMENT, STORAGE, OR DISPOSAL FACILITY (TSDF)

EPA ID NUMBER NYD000691949

NAME	TELEPHONE NUMBER
CHEMICAL MANAGEMENT INC.	516-454-6766

STREET: 340 EASTERN PARKWAY

CITY	STATE	ZIP CODE
FARMINGDALE	NY	11735

WASTE INFORMATION

WASTE DESCRIPTION	WASTE NUMBER	HANDLING CODE	QUANTITY (in Whole Tons)
RQ, WASTE 1,1,1 TRICHLOROETHNE	F001	B	1.8
RQ, WASTE OIL, NOS	D006	T	.7

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PRINT OR TYPE NAME	TITLE
PATRICK A. TIGHE	SUPERINTENDENT, FACILITIES COORDINATION

SIGNATURE	DATE
Patrick A. Tighe	2/23/90

47-15-17 (10/87)—27c

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

GENERATOR ANNUAL REPORT

for the year ending December 31, 19 89

[X] GENERATOR EPA ID NUMBER NYD981155870 OR [ ] SMALL GENERATOR [ ] EXEMPT GENERATOR

NAME	TELEPHONE NUMBER
METCO DIVISION PERKIN-ELMER	516-334-1300

STREET: 220 MILLER PLACE

CITY	STATE	ZIP CODE
HICKSVILLE	NY	11801

TREATMENT, STORAGE, OR DISPOSAL FACILITY (TSDF)

EPA ID NUMBER NJD980536593

NAME	TELEPHONE NUMBER
ADVANCED ENVIRONMENTAL TECHNOLOGY CORPORATION	201-347-7111

STREET: GOLD MINE ROAD

CITY	STATE	ZIP CODE
FLANDERS	NJ	07836

WASTE INFORMATION

WASTE DESCRIPTION	WASTE NUMBER	HANDLING CODE	QUANTITY (in Whole Tons)
RQ, WASTE FLAMMABLE LIQUID, NOS	D001	B	10
WASTE CHEMICAL, NOS	X910	L	118

I hereby affirm under penalty of perjury that information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

PRINT OR TYPE NAME	TITLE
PATRICK A. TIGHE	SUPERINTENDENT, FACILITIES COORDINATION

SIGNATURE	DATE
Patrick A. Tighe	2/23/90

47-15-17 (10/87)—27c

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

GENERATOR ANNUAL REPORT

for the year ending December 31, 19 89

[x] GENERATOR EPA ID NUMBER NYD981515870 OR [ ] SMALL GENERATOR [ ] EXEMPT GENERATOR

NAME	TELEPHONE NUMBER
METCO DIVISION PERKIN-ELMER	516-334-1300

STREET: 220 MILLER PLACE

CITY	STATE	ZIP CODE
HICKSVILLE	NY	11801

TREATMENT, STORAGE, OR DISPOSAL FACILITY (TSDF)

EPA ID NUMBER NJD002385730

NAME	TELEPHONE NUMBER
E.I. DUPONT DENEMOURS & CO.	609-299-8098

STREET: CHAMBER WORKS, ROUTE 130

CITY	STATE	ZIP CODE
DEEPWATER	NJ	08023

WASTE INFORMATION

WASTE DESCRIPTION	WASTE NUMBER	HANDLING CODE	QUANTITY (in Whole Tons)
WASTE CHEMICAL, NOS	X90	T	19.8

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PRINT OR TYPE NAME	TITLE
PATRICK A. TIGHE	SUPERINTENDENT, FACILITIES COORDINATION

SIGNATURE: [illegible] DATE: [illegible]

47-15-17 (10/87)—27c

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

GENERATOR ANNUAL REPORT

for the year ending December 31, 19 89

Page No. 1 of 1

☐ GENERATOR EPA ID NUMBER NYD113113186511 OR ☒ SMALL GENERATOR ☐ EXEMPT GENERATOR

NAME	TELEPHONE NUMBER
METCO DIVISION PERKIN-ELMER	516-334-1300

STREET: 1101 PROSPECT AVENUE

CITY	STATE	ZIP CODE
WESTBURY	NY	11590

TREATMENT, STORAGE, OR DISPOSAL FACILITY (TSDF)

EPA ID NUMBER NJD980536593

NAME	TELEPHONE NUMBER
ADVANCED ENVIRONMENTAL TECHNOLOGY CORPORATION	201-347-7111

STREET: GOLD MINE ROAD

CITY	STATE	ZIP CODE
FLANDERS	NJ	07836

WASTE INFORMATION

WASTE DESCRIPTION	WASTE NUMBER	HANDLING CODE	QUANTITY (in Whole Tons)
WASTE FLAMMABLE LIQUID, NOS	D001	B	.2
WASTE FLAMMABLE LIQUID, NOS	F005	B	.1
WASTE FLAMMABLE LIQUID, NOS	F003	B	.1
WASTE CHEMICALS, NOS	X850	B	.2
WASTE PAINT RELATED MATERIAL	D001	B	.1

I hereby affirm under penalty of perjury that information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

PRINT OR TYPE NAME	TITLE
PATRICK A. TIGHE	SUPERINTENDENT, FACILITIES COORDINATION

SIGNATURE: Patrick A. Tighe

DATE: 2/23/90

PERKIN ELMER

The Perkin-Elmer Corporation
Metco Division
1101 Prospect Avenue
Westbury, New York 11590
Phone (516) 334-1300
Fax (516) 334-6692
Telex 967759

February 26, 1990

CERTIFIED MAIL

New York State Dept. of
Environmental Conservation
Div. of Hazardous Substances
Regulation - Manifest Section
P.O. Box 12820
Albany, NY 12212

Dear Sir/Madam:

Enclosed are the "Generator Annual Report" for all three Metco facilities.

If you require any further information please contact me.

Very truly yours,

Patrick A. Tighe
Superintendent
Facilities Coordination

PAT:ecb
Enclosure
cc: A. Mazzone

47-15-17 (10/87)—27c

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

GENERATOR ANNUAL REPORT

for the year ending December 31, 19 89

Page No. 1 of 1

☐ GENERATOR EPA ID NUMBER N Y D 1 3 1 3 1 8 6 5 1 OR ☒ SMALL GENERATOR ☐ EXEMPT GENERATOR

NAME	TELEPHONE NUMBER
METCO DIVISION PERKIN-ELMER	516-334-1300

STREET: 1101 PROSPECT AVENUE

CITY	STATE	ZIP CODE
WESTBURY	NY	11590

TREATMENT, STORAGE, OR DISPOSAL FACILITY (TSDF)

EPA ID NUMBER N J D 9 8 0 5 3 6 5 9 3

NAME	TELEPHONE NUMBER
ADVANCED ENVIRONMENTAL TECHNOLOGY CORPORATION	201-347-7111

STREET: GOLD MINE ROAD

CITY	STATE	ZIP CODE
FLANDERS	NJ	07836

WASTE INFORMATION

WASTE DESCRIPTION	WASTE NUMBER	HANDLING CODE	QUANTITY (in Whole Tons)
WASTE FLAMMABLE LIQUID, NOS	D001	B	.2
WASTE FLAMMABLE LIQUID, NOS	F005	B	.1
WASTE FLAMMABLE LIQUID, NOS	F003	B	.1
WASTE CHEMICALS, NOS	X850	B	.2
WASTE PAINT RELATED MATERIAL	D001	B	.1

I hereby affirm under penalty of perjury that information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

PRINT OR TYPE NAME	TITLE
PATRICK A. TIGHE	SUPERINTENDENT, FACILITIES COORDINATION

SIGNATURE: Patrick A. Tighe

DATE: 2/23/90

NYG 2760363

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

1478 6128.

HAZARDOUS WASTE MANIFEST

D3802344

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple

(Hazardous Waste Manifest 1/5/99)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD981558570 JC
Manifest Doc. No.: 60363
2. Page 1 of 1

Information within heavy bold line is not required by Federal Law.

A. NYG 2760363

3. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590
200 Mille Place-1
Hicksville NY 11801

B. Generator's ID: SAME

4. Generator's Telephone Number (516) 338-2337

5. Transporter 1 (Company Name): Clean Harbors Env Services Inc
6. US EPA ID Number: MAD039322250

C. State Transporter's ID: NYMA006

D. Transporter's Telephone (781) 849-1800

7. Transporter 2 (Company Name): Maurice Express Inc
8. US EPA ID Number: NJD986607380

E. State Transporter's ID

F. Transporter's Telephone ( ) 74, 8542

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4979 Spring Grove Avenue
Cincinnati, OH, 45232
10. US EPA ID Number: OHD000816629

G. State Facility ID

H. Facility Telephone (513) 681-5738

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CORROSIVE LIQUID, ACIDIC, INORGANIC, N.O.S., (HYDROCHLORIC ACID, NITRIC ACID), 8, UN3264, PG II	002	DF	00573	P	EPA D002 / STATE
b. NON DOT REGULATED MATERIAL, (MAGNESIUM OXIDE, TITANIUM OXIDE), NON DOT HAZARDOUS, NONE	48	DM	30306	P	EPA NONE / STATE
c. NON DOT REGULATED MATERIAL, NON DOT HAZARDOUS, NONE	07	DM	04465	P	EPA NONE / STATE
d. NON DOT REGULATED MATERIAL, (FILTERS, PPE, CERAMIC POWDER), NON DOT HAZARDOUS, NONE	03	DM	00419	P	EPA NONE / STATE

J. Additional Descriptions for Materials listed Above
a. 11a. ERG#154 (L)(CE) MIXED SPENT ACIDS
11c. (L) METAL/CERAMIC POWDER & WATER
b. 11b. (S) METAL OXIDES & CERAMIC POWDERS
11d. (S) FILTERS/PPE/METAL & CERAMIC POWDER

K. Handling Codes for Wastes Listed Above
a. T
c. L
d. L

15. Special Handling Instructions and Additional Information
11a: CH189112 0007 11b: CH189107 11c: CH189134 11d: CH189109
24 HOUR EMERGENCY #(800) 483-3718
2x30DF 51x55DM 73x55DM
B: 30306P D: 00419 87875

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: [illegible] Signature: [illegible] Mo. 06 Day 18 Year 04

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Tom Cardillo Signature: [illegible] Mo. 06 Day 18 Year 04

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: L Keith Neighbor Signature: L Keith Neighbor Mo. 06 Day 21 Year 04

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: CHRIMELIST Signature: [illegible] Mo. 06 Day 23 Year 04

GENERATOR

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

COPY 5—Generator—Mailed by TSD Facility

INSTRUCTIONS FOR THE NEW YORK STATE UNIFORM HAZARDOUS WASTE MANIFEST

General Information

New York State regulation requires proper completion of all information on a manifest. Omissions, false coding or illegibility is considered a violation. All generators are responsible under New York State and Federal Law for the proper identification, labeling, manifesting and ultimate disposal of all hazardous waste they generate. The manifest system is designed to track hazardous waste from the point of generation until its final disposal (cradle to grave). In order to accomplish this goal, it is essential that all **items on a manifest be properly completed.**

Distribution

Distribution of each copy of the manifest is indicated on the bottom of the form. Copies of the manifest must be mailed promptly. New York State regulations provide five (5) working days for generator and two (2) for a TSDF. The disposer's state is the state in which the designated TSD facility is located. Generator's state is the state in which the installation generating the hazardous waste is located. TSD facility is a treatment, storage or disposal facility.

Generator Section

Item 1-Enter the US EPA ID number (twelve digit number issued by the federal government). The generator must assign a sequential unique, five digit number different for each manifest, as the manifest document number.

Item 2-If a continuation sheet is used, please enter the total number of sheets here. Any EPA approved continuation sheet may be used, but distribution and completion must meet New York manifest requirements. The document number in Item A must be placed in Item L of each continuation sheet.

Items 3 and **4**-Self-explanatory. These must correspond to the generator's US EPA ID number.

Items 5, 6, 7 and **8**-These are self-explanatory. These numbers must be secured from the transporter. If more than one transporter is used, the generator must supply additional copies of this manifest for each transporter copy (#5).

Items 9 and **10**-The designated TSD facility, name, address and ID number should appear here.

NOTE: All US EPA ID numbers are a twelve digit code starting off with the letters corresponding to the state in which the facility or transporter is located.

NOTE: Only New York State authorized transporters and TSD facilities are allowed to transport or receive hazardous waste in New York State. The generator shall check for authorization.

Item 11-USDOT requires the word "waste" before or in the shipping name for all hazardous waste. See 49 CFR 171 thru 177. Contact USDOT office for description assistance. Any waste in this box is considered a hazardous waste.

Item 12-

Number-indicate number of containers (use whole numbers).

Containers/Type

DM-Metal drums, barrels, kegs	DT-Dump trucks
DW-Wooden drums, barrels, kegs	CY-Cylinders
DF-Fiberboard or plastic drums, kegs	CM-Metal boxes, cartons, cases, roll-offs
TP-Tanks, portable	CW-Wooden boxes, cartons, cases
TT-Cargo tank, tank trucks	CF-Fiber or plastic boxes, cartons, cases
TC-Tank cars	BA-Burlap, cloth, paper or plastic bags

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to: Chief Information Policy Branch, PM-223. U.S. Environmental Protection Agency, 401 M Street S.W., Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503

Item 13-Actual number of units indicated In box 14. (Do not use fractions or decimals).

Item 14-Units (wt/vol)

G-Gallons (liquids only)	L-Liters (liquids only)
P-Pounds	K-Kilograms
T-Tons (2,000 pounds)	M-Metric Tons (1,000 kilograms)
Y-Cubic Yards	N-Cubic Meters

Item 15-Use this space to indicate special transportation, treatment, storage or disposal or Bill of Lading information. If an alternate facility is designated, note it here. For international shipments, enter point of departure. Emergency response telephone numbers, or similar information may be included here.

Item 16-The authorized agent of the generator must read and then sign (by hand) and date this certification. The date is the date of receipt by transporter.

NEW YORK STATE REQUIRES THIS ADDITIONAL INFORMATION

Item A-Number preprinted by New York State Department of Environmental Conservation (NYSDEC).

Item B-Generator site address if different from mailing address. If same, write in same.

Item C and **E**-State of registration and motor vehicle license plate number of waste carrying portion of vehicle used to transport.

Item D and **F**-Telephone number of authorized agent.

Item G-No entry required by NYSDEC

Item H-Telephone number at site of TSD facility.

Item I-Hazardous waste numbers (letter and three digits) as assigned by 6 NYCRR Part 371 or 40 CFR 261 must be used to identify hazardous waste. Enter in top box by EPA. If waste is not hazardous in New York but regulated by another state, enter that state's waste code in bottom box.

Item J-If description in Item 11 (a,b,c,d) contains NOS or other general term, the hazardous waste constituent must be provided here for each. The specific gravity assumed to be one (1.00) unless indicated in lower right of each box.

Item K-Each material must be assigned an ultimate disposal method code as follows: L = Landfill, B = Incineration, heat recovery, burning, T = Chemical, physical, or biological treatment, R = Material recovery of more than 75 percent of the total material. Both the generator and the TSDF should agree on codes assigned in this item.

Transporter Section

Items 17 and **18**-Print or type the full name of person accepting responsibility and acknowledging receipt of material as listed on manifest for transport. Enter date of receipt and signature.

TSDF Section

Item 19-The authorized representative of the TSDF must note in the space any discrepancy between waste described on manifest and waste actually received. Any rejected materials should be listed and destination of those materials provided.

Item 20-The signature (by hand) of the authorized TSDF agent indicates acceptance (except for Item 19) and agreement with statements on this manifest. The date is the date of signature and receipt of shipment. A TSDF not providing ultimate disposal agrees to transfer waste to a TSDF authorized to provide ultimate disposal as indicated in Item K.

Additional Information

1. If the disposer state supplies a manifest, that state's form must be used. In any case, New York requires that both the generator and TSDF mail copies to the generator's state and the disposer's state, with the ultimate disposal method indicated in Item K.
2. There may be variations in the requirements between various states regarding Items A thru K, therefore, the generator should contact the disposer's state for specific details.
3. If assistance is needed in completion of this manifest, please contact NYSDEC Data Management Section at 518/457-6858 weekdays from 9:00 a.m. to 4:00 p.m.

EXXON CHEMICAL
EXXON CHEMICAL AMERICAS • P.O. BOX 3272, HOUSTON, TEXAS 77001
A Division of EXXON CHEMICAL COMPANY, A Division of EXXON CORPORATION

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02/07/90

NO. 92890627

SECTION 1 PRODUCT IDENTIFICATION & EMERGENCY INFORMATION

PRODUCT NAME
VARSOL 1 EXXSOL

CHEMICAL NAME
Not Applicable: Blend — CAS 8052-41-3

CHEMICAL FAMILY
Petroleum Hydrocarbon

PRODUCT APPEARANCE/DESCRIPTION
Clear colorless liquid with a petroleum odor.

EMERGENCY TELEPHONE NUMBERS: EXXON CHEMICAL AMERICAS 713-870-6000
CHEMTREC 800-424-9300

SECTION 2 HAZARDOUS INGREDIENT INFORMATION

The composition of this mixture may be proprietary information. In the event of a medical emergency, compositional information will be provided to a physician or nurse. This product is hazardous as defined in 29 CFR1910.1200, based on the following compositional information:

COMPONENT	OSHA HAZARD
Petroleum hydrocarbons	Combustible

For additional information see Section 3.

SECTION 3 HEALTH INFORMATION & PROTECTION

NATURE OF HAZARD

EYE CONTACT:
Slightly irritating but does not injure eye tissue.

SKIN CONTACT:
Frequent or prolonged contact may irritate and cause dermatitis.
Low order of toxicity.

INHALATION:
High vapor concentrations are irritating to the eyes and the respiratory tract, may cause headaches and dizziness, are anesthetic and may have other central nervous system effects.

INGESTION:
Small amounts of the liquid aspirated into the respiratory system during ingestion, or from vomiting, may cause bronchiopneumonia or pulmonary edema.
Minimal toxicity.

FIRST AID

EYE CONTACT:
Flush eyes with large amounts of water until irritation subsides. If irritation persists, get medical attention.

SKIN CONTACT:
Flush with large amounts of water; use soap if available.
Remove grossly contaminated clothing, including shoes, and launder before reuse.

INHALATION:
Using proper respiratory protection, immediately remove the affected victim from exposure. Administer artificial respiration if breathing is stopped. Keep at rest. Call for prompt medical attention.

THIS INFORMATION RELATES TO THE SPECIFIC MATERIAL DESIGNATED AND MAY NOT BE VALID FOR SUCH MATERIAL USED IN COMBINATION WITH ANY OTHER MATERIALS OR IN ANY PROCESS. SUCH INFORMATION IS TO THE BEST OF OUR KNOWLEDGE AND BELIEF, ACCURATE AND RELIABLE AS OF THE DATE COMPILED. HOWEVER, NO REPRESENTATION, WARRANTY OR GUARANTEE IS MADE AS TO ITS ACCURACY, RELIABILITY OR COMPLETENESS. IT IS THE USER'S RESPONSIBILITY TO SATISFY HIMSELF AS TO THE SUITABILITY AND COMPLETENESS OF SUCH INFORMATION FOR HIS OWN PARTICULAR USE. WE DO NOT ACCEPT LIABILITY FOR ANY LOSS OR DAMAGE THAT MAY OCCUR FROM THE USE OF THIS INFORMATION NOR DO WE OFFER WARRANTY AGAINST PATENT INFRINGEMENT.

INGESTION:
If swallowed, DO NOT induce vomiting. Keep at rest. Get prompt medical attention.

ACUTE TOXICITY DATA IS AVAILABLE UPON REQUEST.

WORKPLACE EXPOSURE LIMITS

EXXON RECOMMENDS THE FOLLOWING OCCUPATIONAL EXPOSURE LIMITS:
100 ppm total hydrocarbon based on composition.

PRECAUTIONS

PERSONAL PROTECTION
For open systems where contact is likely, wear safety glasses with side shields, long sleeves, and chemical resistant gloves.
Where contact may occur, wear safety glasses with side shields.
Where concentrations in air may exceed the limits given in this Section and engineering, work practice or other means of exposure reduction are not adequate, NIOSH/MSHA approved respirators may be necessary to prevent overexposure by inhalation.

VENTILATION
The use of mechanical dilution ventilation is recommended whenever this product is used in a confined space, is heated above ambient temperatures, or is agitated.
Use explosion-proof ventilation equipment.

CHRONIC EFFECTS
Laboratory animal studies have shown that prolonged and repeated inhalation exposure to light hydrocarbon vapors in the same naphtha boiling range as this product can produce adverse kidney effects in male rats. However, these effects were not observed in similar studies with female rats and male and female mice and in limited studies with other animal species. Additionally, in a number of human studies, there was no clinical evidence of such effects at normal occupational levels. It is therefore highly unlikely that the kidney effects observed in male rats have significant implications for humans exposed at or below recommended vapor limits in the workplace.

CHRONIC TOXICITY DATA IS AVAILABLE UPON REQUEST

SECTION 4 FIRE & EXPLOSION HAZARD

FLASHPOINT: 100 Deg. F. METHOD: TCC
FLAMMABLE LIMITS: LEL: 0.9 UEL: 7.0
AUTOIGNITION TEMPERATURE: 490 Deg. F. NOTE: Approximately

GENERAL HAZARD
Combustible Liquid, can form combustible mixtures at temperatures at or above the flashpoint.
Static Discharge, material can accumulate static charges which can cause an incendiary electrical discharge .
"Empty" containers retain product residue (liquid and/or vapor) and can be dangerous. DO NOT PRESSURIZE, CUT, WELD, BRAZE, SOLDER, DRILL, GRIND, OR EXPOSE SUCH CONTAINERS TO HEAT, FLAME, SPARKS, STATIC ELECTRICITY, OR OTHER SOURCES OF IGNITION; THEY MAY EXPLODE AND CAUSE INJURY OR DEATH.
Empty drums should be completely drained, properly bunged and promptly returned to a drum reconditioner, or properly disposed of.

FIRE FIGHTING
Use water spray to cool fire exposed surfaces and to protect personnel.
Shut off "fuel" to fire. If a leak or spill has not ignited, use water spray to disperse the vapors.

Use foam or dry chemical to extinguish fire.
Avoid spraying water directly into storage containers due to danger of boilover.

DECOMPOSITION PRODUCTS UNDER FIRE CONDITIONS
No unusual

SECTION 5 SPILL CONTROL PROCEDURE

LAND SPILL
Eliminate sources of ignition. Prevent additional discharge of material, if possible to do so without hazard. For small spills implement cleanup procedures; for large spills implement cleanup procedures and, if in public area, keep public away and advise authorities. Also, if this product is subject to CERCLA reporting (see Section 7) notify the National Response Center.
Prevent liquid from entering sewers, watercourses, or low areas. Contain spilled liquid with sand or earth. Do not use combustible materials such as sawdust.
Recover by pumping (use an explosion proof or hand pump) or with a suitable absorbent.
Consult an expert on disposal of recovered material and ensure conformity to local disposal regulations.

WATER SPILL
Remove from surface by skimming or with suitable adsorbents. If allowed by local authorities and environmental agencies, sinking and/or suitable dispersants may be used in non-confined waters.
Consult an expert on disposal of recovered material and ensure conformity to local disposal regulations.

SECTION 6 NOTES

No notes applicable.

SECTION 7 REGULATORY INFORMATION

DEPARTMENT OF TRANSPORTATION (DOT):
DOT HAZARD CLASS: Combustible Liquid
DOT IDENTIFICATION NUMBER: UN 1255
NAME: Naphtha, petroleum

TSCA:
This product is listed on the TSCA Inventory as a UVCB (Unknown, Variable Composition or Biological) Chemical at CAS Registry Number 8052-41-3

CERCLA:
If this product is accidentally spilled, it is not subject to any special reporting under the requirements of the Comprehensive Response, Compensation, and Liability Act (CERCLA). We recommend you contact local authorities to determine if there may be other local reporting requirements.

SARA TITLE III:
Under the provisions of Title III, Sections 311/312 of the Superfund Amendments and Reauthorization Act, this product is classified into the following hazard categories:
Delayed Health, Fire.
This product does not contain Section 313 Reportable Ingredients.

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SECTION 8 TYPICAL PHYSICAL & CHEMICAL PROPERTIES

SPECIFIC GRAVITY:
0.7[illegible] at 60

SOLUBILITY IN WATER, WT. % AT °F:
Insoluble

SP. GRAV. OF VAPOR, at 1 atm (Air=1):
4.83

EVAPORATION RATE, n-Bu Acetate=1:
0.1

VAPOR PRESSURE, mmHg at °F:
36 at 100

VISCOSITY OF LIQUID, CST AT °F:
1 at 77

FREEZING/MELTING POINT, °F:
Less than 32

BOILING POINT, °F:
305 to 396 Approximately

SECTION 9 REACTIVITY DATA

STABILITY:
Stable

CONDITIONS TO AVOID INSTABILITY:
Not Applicable

HAZARDOUS POLYMERIZATION:
Will not occur

COND. TO AVOID HAZARDOUS POLYMERIZATION:
Not Applicable

MATERIALS AND CONDITIONS TO AVOID INCOMPATIBILITY:
Halogens, molten sulfur, strong oxidizing agents.

HAZARDOUS DECOMPOSITION PRODUCTS:
None

SECTION 10 STORAGE AND HANDLING

ELECTROSTATIC ACCUMULATION HAZARD:
Yes, use proper grounding procedure

STORAGE TEMPERATURE, °F:
Ambient

STORAGE/TRANSPORT PRESSURE, mmHg:
Atmospheric

LOADING/UNLOADING TEMPERATURE, °F:
Ambient

VISC. AT LOADING/UNLOADING TEMP., cST:
1

REFERENCE NUMBER:
HDHA-C-25038

DATE PREPARED:
February 7, 1990

SUPERCEDES ISSUE DATE:

FOR ADDITIONAL PRODUCT INFORMATION, CONTACT YOUR TECHNICAL SALES REPRESENTATIVE
FOR ADDITIONAL HEALTH/SAFETY INFORMATION, CALL 713-870-6885

PERKIN ELMER

The Perkin-Elmer Corporation
Metco Division
1101 Prospect Avenue
Westbury, New York 11590
Phone (516) 334-1300
Fax (516) 334-6692
Telex 967759

February 28, 1990

Environmental Protection Agency
P.O. Box 70266
Washington, DC 20024-0266

Ref: SARA TITLE III - Tier II Reports

Dear Sir/Madam:

Enclosed please find the SARA TITLE III - Tier II Reports for our three facilities.

If we could be of further assistance, please contact me.

Very truly yours,

Patrick A. Tighe
Superintendent
Facilities Coordination

PAT:ecb
Enclosure
cc: A. Mazzone

Page 1 of 3 pages
Form Approved OMB No 2050-0072

Tier Two
EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: METCO DIVISION PERKIN-ELMER
Street Address: 1101 PROSPECT AVENUE
City: WESTBURY State: NY Zip: 11590
SIC Code: 3542 Dun & Brad Number: 05-773-1663

FOR OFFICIAL USE ONLY: ID #: Date Received:

Owner/Operator Name

Name: PATRICK A. TIGHE Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact

Name: PATRICK A. TIGHE Title: SUPERINTENDENT, FACILITIES COORDINATION
Phone: (516) 334-1300 24 Hr. Phone: (516) 798-1249
Name: Title:
Phone: ( ) 24 Hr. Phone: ( )

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 19__

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory: Max. Daily Amount (code)	Inventory: Avg. Daily Amount (code)	Inventory: No. of Days On-site (days)	Storage Codes and Locations (Non-Confidential): Storage Code	Storage Locations
CAS 7440508 Trade Secret ☐ Chem. Name COPPER POWDER Check all that apply: Pure [X] Mix [X] Solid [X] Liquid ☐ Gas ☐	☐ Fire ☐ Sudden Release of Pressure [X] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	03	03	365	N14	STOCK WAREHOUSE
CAS 71556 Trade Secret ☐ Chem. Name 1,1,1 TRICHLOROETHANE Check all that apply: Pure [X] Mix [X] Solid ☐ Liquid [X] Gas ☐	[X] Fire ☐ Sudden Release of Pressure [X] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	02	02	365	F14	STOCK WAREHOUSE
CAS 108952 Trade Secret ☐ Chem. Name PHENOL Check all that apply: Pure [X] Mix [X] Solid ☐ Liquid [X] Gas ☐	[X] Fire ☐ Sudden Release of Pressure [X] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	01	01	365	F14	STOCK WAREHOUSE

Certification *(Read and sign after completing all sections)*

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 responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

PATRICK A. TIGHE SUPERINTENDENT, FACILITIES COORDINATION
Name and official title of owner/operator or owner/operator's authorized representative

Patrick A. Tighe
Signature

2/28/90
Date signed

Optional Attachments *(Check one)*

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations

Page 2 of 3 pages
Form Approved OMB No 2050-0072

Tier Two
EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY
Specific Information by Chemical

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Name: METCO DIVISION PERKIN-ELMER
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CAS 7440025 Trade Secret ☐ Chem. Name NICKEL POWDER Check all that apply: X Pure, X Mix, X Solid, ☐ Liquid, ☐ Gas	☐ Fire ☐ Sudden Release of Pressure X Reactivity X Immediate (acute) X Delayed (chronic)	04	04	365	N14	STOCK WAREHOUSE
CAS 7440484 Trade Secret ☐ Chem. Name COBALT POWDER Check all that apply: X Pure, X Mix, X Solid, ☐ Liquid, ☐ Gas	☐ Fire ☐ Sudden Release of Pressure X Reactivity X Immediate (acute) X Delayed (chronic)	03	03	365	N14	STOCK WAREHOUSE
CAS 7440473 Trade Secret ☐ Chem. Name CHROMIUM (III) POWDER Check all that apply: X Pure, X Mix, X Solid, ☐ Liquid, ☐ Gas	☐ Fire ☐ Sudden Release of Pressure X Reactivity X Immediate (acute) X Delayed (chronic)	04	04	365	N14	STOCK WAREHOUSE

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PATRICK A. TIGHE SUPERINTENDENT, FACILITIES COORDINATION
Name and official title of owner/operator or owner/operator's authorized representative

Patrick A. Tighe 2/28/90
Signature Date Signed

Optional Attachments *(Check one)*
☐ I have attached a site plan
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Page 3 of 3 pages
Form Approved OMB No. 2050-0072

Tier Two
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City: WESTBURY State: NY Zip: 11590
SIC Code: 3542 Dun & Bradstreet Number: 05-773-1663

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ID #
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Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19__

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory: Max. Daily Amount (code)	Inventory: Avg. Daily Amount (code)	Inventory: No. of Days On-site (days)	Storage Codes and Locations (Non-Confidential): Storage Code	Storage Locations
CAS 7429905 Trade Secret ☐ Chem. Name: ALUMINUM Check all that apply: Pure [X] Mix [X] Solid [X] Liquid ☐ Gas ☐	Fire ☐ Sudden Release of Pressure ☐ Reactivity [X] Immediate (acute) [X] Delayed (chronic) [X]	03	03	365	N14	STOCK WAREHOUSE
CAS 13448281 Trade Secret ☐ Chem. Name: ALUMINUM OXIDE Check all that apply: Pure [X] Mix [X] Solid [X] Liquid ☐ Gas ☐	Fire ☐ Sudden Release of Pressure ☐ Reactivity [X] Immediate (acute) [X] Delayed (chronic) [X]	03	03	365	N14	STOCK WAREHOUSE
CAS ☐ Trade Secret ☐ Chem. Name: Check all that apply: Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas ☐	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic) ☐					

Certification *(Read and sign after completing all sections)*

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Name and official title of owner/operator or owner/operator's authorized representative

Patrick A. Tighe
Signature

2/28/90
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Tier Two
EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY
Specific Information by Chemical

Facility Identification
Name: METCO DIVISION PERKIN-ELMER
Street Address: 220 MILLER PLACE
City: HICKSVILLE State: NY Zip: 11801
SIC Code: 3399 Dun & Bradstreet Number: 05-773-1663

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name
Name: PATRICK A. TIGHE Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVE., WESTBURY, NY 11590

Emergency Contact
Name: PATRICK A. TIGHE Title: SUPERINTENDENT, FACILITIES COORDINATION
Phone: (516) 334-1300 24 Hr. Phone: (516) 798-1249
Name: Title:
Phone: ( ) 24 Hr. Phone: ( )

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19__

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CAS 7440025 Trade Secret ☐ Chem. Name: NICKEL POWDER Check all that apply: Pure [X] Mix [X] Solid [X] Liquid ☐ Gas ☐	Fire ☐ Sudden Release of Pressure ☐ Reactivity [X] Immediate (acute) [X] Delayed (chronic) [X]	04	04	365	D14 N14	WAREHOUSE PRODUCTION LINES
CAS 7440473 Trade Secret ☐ Chem. Name: CHROMIUM (III) POWDER Check all that apply: Pure [X] Mix [X] Solid [X] Liquid ☐ Gas ☐	Fire ☐ Sudden Release of Pressure ☐ Reactivity [X] Immediate (acute) [X] Delayed (chronic) [X]	03	03	365	D14 N14	WAREHOUSE PRODUCTION LINES
CAS 7440484 Trade Secret ☐ Chem. Name: COBALT POWDER Check all that apply: Pure [X] Mix [X] Solid [X] Liquid ☐ Gas ☐	Fire ☐ Sudden Release of Pressure ☐ Reactivity [X] Immediate (acute) [X] Delayed (chronic) [X]	03	03	365	D14 N14	WAREHOUSE PRODUCTION LINES

Certification *(Read and sign after completing all sections)*
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PATRICK A. TIGHE SUPERINTENDENT, FACILITIES COORDINATION
Name and official title of owner/operator or owner/operator's authorized representative

Patrick A. Tighe
Signature

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Date signed

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Street Address: 220 MILLER PLACE
City: HICKSVILLE State: NY Zip: 11801
SIC Code: 3399 Dun & Bradstreet Number: 05-773-1663
FOR OFFICIAL USE ONLY — ID #: ; Date Received:

Owner/Operator Name
Name: PATRICK A. TIGHE Phone: (516) 334-1300
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Chemical Description	Physical and Health Hazards (check all that apply)	Inventory: Max. Daily Amount (code)	Inventory: Avg. Daily Amount (code)	Inventory: No. of Days On-site (days)	Storage Codes and Locations (Non-Confidential): Storage Code	Storage Locations
CAS 71556; Trade Secret ☐; Chem. Name: 1,1,1 TRICHLOROETHANE; Check all that apply: Pure X, Mix ☐, Solid ☐, Liquid X, Gas ☐	X Fire; ☐ Sudden Release of Pressure; X Reactivity; X Immediate (acute); X Delayed (chronic)	02	02	365	C15 D14	DEGREASING OPERATION
CAS 7429905; Trade Secret ☐; Chem. Name: ALUMINUM; Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐	☐ Fire; ☐ Sudden Release of Pressure; X Reactivity; X Immediate (acute); X Delayed (chronic)	03	03	365	D14 N14	WAREHOUSE PRODUCTION LINES
CAS 13448281; Trade Secret ☐; Chem. Name: ALUMINUM OXIDE; Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐	☐ Fire; ☐ Sudden Release of Pressure; X Reactivity; X Immediate (acute); X Delayed (chronic)	03	03	365	D14 N14	WAREHOUSE PRODUCTION LINES

Certification *(Read and sign after completing all sections)*
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 responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

PATRICK A. TIGHE SUPERINTENDENT, FACILITIES COORDINATION — Name and official title of owner/operator or owner/operator's authorized representative
Signature: Patrick A. Tighe
Date Signed: 2/28/90

Optional Attachments *(Check one)*
☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations

Page 1 of 1 pages
Form Approved OMB No 2050-0072

Tier Two
EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY
Specific Information by Chemical

Facility Identification
Name: METCO DIVISION PERKIN-ELMER
Street Address: 325 DUFFY AVENUE
City: HICKSVILLE State: NY Zip: 11801
SIC Code: 3542 Dun & Brad Number: 05-773-1663

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name
Name: PATRICK A. TIGHE Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact
Name: PATRICK A. TIGHE Title: SUPERINTENDENT, FACILITIES COORDINATION
Phone: (516 334-1300 24 Hr. Phone: (516) 798-1249
Name: Title:
Phone: ( ) 24 Hr. Phone: ( )

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19__

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory: Max. Daily Amount (code)	Inventory: Avg. Daily Amount (code)	Inventory: No. of Days On-site (days)	Storage Codes and Locations (Non-Confidential): Storage Code	Storage Locations
CAS 71 55 6 Trade Secret ☐ Chem. Name 1,1,1 TRICHLOROETHANE Check all that apply: Pure ☒ Mix ☐ Solid ☐ Liquid ☒ Gas ☐	Fire ☒ Sudden Release of Pressure ☐ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic) ☒	02	02	365	C 15 D 14	DEGREASING PROCESS
CAS Trade Secret ☐ Chem. Name Check all that apply: Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas ☐	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic) ☐					
CAS Trade Secret ☐ Chem. Name Check all that apply: Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas ☐	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic) ☐					

Certification *(Read and sign after completing all sections)*
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 responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

PATRICK A. TIGHE SUPERINTENDENT, FACILITIES COORDINATION
Name and official title of owner/operator or owner/operator's authorized representative

Signature: Patrick A. Tighe
Date signed: 2/28/90

Optional Attachments *(Check one)*
☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations

TRK 44031
TRA 548702WV

07-97767
07-97820

#10752

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number:

2. Page 1 of 1

3. Emergency Response Phone: 410-377-3742

4. Manifest Tracking Number: 001251037 JJK

GENERATOR

5. Generator's Name and Mailing Address: SULZER METCO (US)
1101 PROSPECT AVE
WESTBURY, NY 11590

Generator's Phone: 516-338-2331

Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: BEDROCK DBA, TRI-STATE MOTOR TRANSIT CO.

U.S. EPA ID Number: MOD 095038998

7. Transporter 2 Company Name:

U.S. EPA ID Number:

8. Designated Facility Name and Site Address: WASTE CONTROL SPECIALISTS
9998 W. STATE HWY 176
ANDREWS, TX 79714

Facility's Phone: 888-789-2783

U.S. EPA ID Number:

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	1. RADIOACTIVE MATERIAL, EXCEPTED PACKAGE, LIMITED QUANTITY OF MATERIAL, 7, UN2910	54	DM	7003	K	NONE
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information: WP-019353

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: MATTHEW GOLD

Signature: Matthew Gold

Month 10 Day 11 Year 07

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:

Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Ray Hochstedler

Signature: Ray Hochstedler

Month 10 Day 11 Year 07

Transporter 2 Printed/Typed Name:

Signature:

Month Day Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator)

U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator)

Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1. H132 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name: Bill Thompson

Signature: Bill Thompson

Month 10 Day 16 Year 07

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO GENERATOR STATE (IF REQUIRED)

NYC 6756568

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 12/00)

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Document No.

2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Telephone ( )

A. State Manifest Document Number: NYC 6756568

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID: NYE 5759

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	001		00014		EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. | c.

b. | d.

K. Handling Codes for Wastes Listed Above

a. | c.

b. | d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR**, if I am a small generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Steve Lopez | Signature | Mo. 05 Day 07 Year 02

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name: John Mulvey | Signature | Mo. 05 Day 07 Year 02

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

COPY 5 - GENERATOR - MAILED BY TSD FACILITY

#2SU2007789

NYC-6756568

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 12/00)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Document No.

2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Telephone ( )

A. State Manifest Document Number NYC 6756568

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	001		00017		EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. | c.

b. | d.

K. Handling Codes for Wastes Listed Above

a. | c.

b. | d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

COPY 8 - GENERATOR - RETAINED BY GENERATOR

P2SUL007790

NASSAU COUNTY
DEPARTMENT of HEALTH

TOXIC OR HAZARDOUS MATERIALS STORAGE FACILITY PERMIT

Facility Number	001536	Type of Permit	[X] Operation [ ] Construction	Date Issued: 09/01/2006	Date Modified: 02/15/2007	Expiration Date: 09/01/2007
Name of Permittee:	SULZER METCO (US) INC.			Address of Permittee:	1101 PROSPECT AVE. WESTBURY NY

GENERAL CONDITIONS

1. By acceptance of this permit, the permittee agrees that the permit is contingent upon strict compliance with Article XI, Nassau County Public Health Ordinance.
2. All work carried out under this permit shall conform to the approved plans and specifications. Any amendments must be approved by the Nassau County Department of Health prior to their implementation. The permittee shall notify the Health Department 48 hours in advance of the start of construction.
3. As a condition of the issuance of this permit, the applicant has accepted expressly, by the execution of the application, the full legal responsibility for all damages direct or indirect, of whatever nature, and by whomever suffered, arising out of the project described herein and has agreed to defend, indemnify and save harmless the County from suits, actions, damages and costs of every name and description resulting from the said project.

** NOT TRANSFERABLE **

Name of Facility:	SULZER METCO (US) INC.	FACILITY ADDRESS:
Mailing Address:	1101 PROSPECT AVE. WESTBURY NY 11590-	1101 PROSPECT AVE. WESTBURY NY 11590

THIS FACILITY CONSISTS OF STORAGE AREAS AS LISTED ON PLANS AND APPLICATIONS FILED WITH THIS DEPARTMENT

Tank/Storage Area Number	Capacity	Type of Toxic or Hazardous Material Stored	REPLACE DATE
BULK 0002	9900 GALLONS	MULTIPLE CHEMICALS STORED	

ABBY J. GREENBERG, M.D. ACTING COMMISSIONER

Authorizing Officer Michael J. Alascio

~~Kathleen A. Gurney, M.D., M.P.H. Commissioner of Health~~

EH 768 9/86

THIS PERMIT MUST BE POSTED IN A CONSPICUOUS PLACE AT THE FACILITY

Code	Waste description
P084	N-Nitrosomethylvinylamine
P084	Vinylamine, N-methyl-N-nitroso-
P085	Diphosphoramide, octamethyl-
P085	Octamethylpyrophosphoramide
P087	Osmium oxide OsO_4, (T-4)-
P087	Osmium tetroxide
P088	7-Oxabicyclo[2.2.1]heptane-2,3-dicarboxylic acid
P088	Endothall
P089	Parathion
P089	Phosphorothioic acid, O,O-diethyl-O-(4-nitrophenyl) ester
P092	Mercury, (acetato-O)phenyl-
P092	Phenylmercury acetate
P093	Phenylthiourea
P093	Thiourea, phenyl-
P094	Phorate
P094	Phosphorodithioic acid, O,O-diethyl S-[(ethylthio)methyl] ester
P095	Carbonic dichloride
P095	Phosgene
P096	Hydrogen phosphide
P096	Phosphine
P097	Famphur
P097	Phosphorothioic acid O-[4-[(dimethylamino)sulfonyl]phenyl] O,O-dimethyl ester
P098	Potassium cyanide
P098	Potassium cyanide K(CN)
P099	Argentate (1-), bis(cyano-C)-, potassium
P099	Potassium silver cyanide
P101	Ethyl cyanide
P101	Propanenitrile
P102	2-Propyn-1-ol
P102	Propargyl alcohol
P103	Selenourea
P104	Silver cyanide
P104	Silver cyanide Ag(CN)
P105	Sodium azide
P106	Sodium cyanide
P106	Sodium cyanide Na(CN)
P107	Strontium sulfide SrS
P108	Strychnidin-10-one, & salts
P108	Strychnine, & salts
P109	Tetraethyldithiopyrophosphate
P109	Thiodiphosphoric acid, tetraethyl ester
P110	Plumbane, tetraethyl-
P110	Tetraethyl lead
P111	Diphosphoric acid, tetraethyl ester
P111	Tetraethyl pyrophosphate
P112	Methane, tetranitro- (R)
P112	Tetranitromethane (R)
P113	Thallic oxide
P113	Thallium oxide Tl_2O_3
P114	Selenious acid, dithallium (1+) salt
P114	Thallium(I) selenite
P115	Sulfuric acid, dithallium (1+) salt
P115	Thallium(I) sulfate
P116	Hydrazinecarbothioamide
P116	Thiosemicarbazide
P118	Methanethiol, trichloro-
P118	Trichloromethanethiol
P119	Ammonium vanadate
P119	Vanadic acid, ammonium salt
P120	Vanadium oxide V_2O_5
P120	Vanadium pentoxide
P121	Zinc cyanide
P121	Zinc cyanide $Zn(CN)_2$
P122	Zinc phosphide Zn_3P_2, when present at concentrations greater than 10% (R,T)
P123	Toxaphene

SULZER METCO

Sulzer Metco (Westbury) Inc.
1101 Prospect Avenue
PO Box 1006
Westbury, NY 11590-0201
Phone:(516) 334-1300
Fax: (516) 338-2477

October 20, 1994

Mr. Victor Insler, Public Health Engineer
Bureau of Environmental Engineering
Nassau County Department of Health
240 Old Country Road
Mineola, NY 11501-4250

Subject: Transfer of Ownership

Dear Mr. Insler:

As of September 30, 1994, the three properties on Long Island owned by The Perkin-Elmer Corporation, doing business as the Metco division of Perkin-Elmer, were sold by Perkin-Elmer to Sulzer Metco (Westbury), Inc., a Delaware Corporation having a principal place of business at the Prospect Avenue Facility indicated below. No substantial change in the business is expected for each location at this time. The addresses and facility numbers are as follows:

Prospect Avenue Facility	1101 Prospect Avenue, Westbury, NY 11590-0201 Facility No. 28-2200-1828
Duffy Avenue Facility	325 Duffy Avenue, Hicksville, NY 11810-3635 Facility No. 28-2400-5161
Miller Place Facility	220 Miller Place, Hicksville, NY 11801-1826 Facility No. 28-24700-4240

Please call me if you have any questions or require clarification.

Sincerely,

Joseph Macri

Joseph Macri
Manager Facilities
Phone: (516) 338-2374
FAX: (516) 338-2336

JM:clc
c: Andrew B. Mazzone, Sulzer Metco
Herbert S. Ingham, Esq., Sulzer Metco
Constance L. Conroy, Sulzer Metco

Permtsf1.Wp6

METCO AMDRY

At the Sulzer Metco facility, three areas are used for the storage of hazardous materials; two areas are designated as satellite waste accumulation areas and one storage room in the southwestern corner of the facility is used for the storage of hazardous materials. Decontamination of the three hazardous material storage areas will be performed by qualified Sulzer Metco employees or an outside contractor. Personnel will be equipped with chemical resistant coveralls, head protection, gloves, and boots. Each storage area will be decontaminated identically as follows:

1. Containment structures and floor surfaces underlying each storage area will be decontaminated by steam cleaning followed by two (2) clean rinses.
2. To assess the adequacy of decontamination, samples of the final wash water rinse will be analyzed for TCLP Toxicity metals and volatile organic compounds (VOCs). Decontamination will be repeated until all parameters meet the closure performance guidelines of Section 2.2.

3.0 FACILITY CLOSURE

This plan has been prepared with the understanding that Sulzer Metco intends to entirely vacate the Duffy avenue facility and move all process operations into an alternate facility. All equipment, considering it is in usable condition, will be transported to the new facility for future use. All components to be transported will be cleaned as dictated herein as to prevent contamination of the environment during transport operations.

3.1 Closure Schedule

Closure of the Duffy avenue facility is expected to require approximately two to three weeks, with confirmatory sample analysis requiring an additional four weeks. If the confirmatory

(IMPORTANT: Type or print; read instructions before completing form)

EPA
United States Environmental Protection Agency

FORM R

TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

WHERE TO SEND COMPLETED FORMS: 1. EPCRA Reporting Center, P.O Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY 2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision

For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2000

SECTION 2. TRADE SECRET INFORMATION

2.1	Are you claiming the toxic chemical identified on page 2 trade secret? [ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)	2.2	Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2.1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official:	Signature:	Date Signed:
JOSEPH REARDON MANAGER OF GLOBAL QUALITY		08/06/2001

SECTION 4. FACILITY IDENTIFICATION

4.1		TRI Facility ID Number	11801PRKNL220MI
Facility or Establishment Name	SULZER METCO (US), INC.	Facility or Establishment Name or Mailing Address(if different from street address)	SULZER METCO (US), INC.
Street	220 MILLER PLACE	Mailing Address	1101 PROSPECT AVENUE
City/County/State/Zip Code	HICKSVILLE NASSAU NY 11801-	City/State/Zip Code	WESTBURY NY 11590-0201
		Country (Non-US)	

4.2	This report contains information for: (Important : check a or b; check c or d if applicable)	a. [X] An entire facility	b. [ ] Part of a facility	c. [ ] A Federal facility	d. [ ] GOCO		
4.3	Technical Contact Name	MICHAEL S. LYDON			Telephone Number (Include area code) 516-338-2337		
4.4	Public Contact Name	ROSEPH REARDON			Telephone Number (Include area code) 516-338-2316		
4.5	SIC Code (s) (4 digits)	Primary a. 3399	b.	c.	d.	e.	f.

4.6	Latitude	Degrees	Minutes	Seconds	Longitude	Degrees	Minutes	Seconds
		40	47	10		073	31	00

4.7 Dun & Bradstreet Number(s) (9 digits)	4.8 EPA Identification Number (RCRA I.D. No.) (12 characters)	4.9 Facility NPDES Permit Number(s) (9 characters)	4.10 Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)
a. 152084398	a. NYD981555857	a. NA	a. NA
b.	b.	b.	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA [ ]	SULZER INC.
5.2	Parent Company's Dun & Bradstreet Number	NA [ ]	001826957

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION

TRI Facility ID Number
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
NICKEL

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.) 7440020
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) NICKEL
1.3	Generic Chemical Name (Important: Complete only if Part 1, Section 2.1 is checked "yes". Generic Name must be structurally descriptive.) NA

1.4 Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.
(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0.01 and 100. Distribution should be reported in percentages and the total should equal 100%. If you do not have speciation data available, indicate NA.)

NA	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
X																	

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.) NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY
(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:	3.2 Process the toxic chemical:	3.3 Otherwise use the toxic chemical:
a. [ ] Produce b. [ ] Import		
If produce or import:	a. [ ] As a reactant	a. [ ] As a chemical processing aid
c. [ ] For on-site use/processing	b. [X] As a formulation component	b. [ ] As a manufacturing aid
d. [ ] For sale/distribution	c. [ ] As an article component	c. [ ] Ancillary or other use
e. [ ] As a byproduct	d. [X] Repackaging	
f. [ ] As an impurity	e. [ ] As an impurity	

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	04	(Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

			A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	NA X	NA		
5.2	Stack or point air emissions	NA [ ]	4	E	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
	Stream or Water Body Name				
5.3.1	NA				
5.3.2					
5.3.3					

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1 - 10 pounds; B= 11- 499 pounds; C= 500 - 999 pounds.

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
NICKEL

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		NA	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite to Class I Wells	X	NA	
5.4.2	Underground Injection onsite to Class II-V Wells	X	NA	
5.5	Disposal to land onsite			
5.5.1A	RCRA Subtitle C landfills	X	NA	
5.5.1B	Other landfills		19225	M
5.5.2	Land treatment/application farming	X	NA	
5.5.3	Surface Impoundment	X	NA	
5.5.4	Other disposal	X	NA	

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers(pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B.1	POTW Name	NA					
POTW Address							
City		State		County		Zip	-
6.1.B.2	POTW Name						
POTW Address							
City		State		County		Zip	

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box 1 **and indicate the Part II, Section 6.1 page number in this box** 1 **(example: 1,2,3, etc.)**

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.1	Off-Site EPA Identification Number (RCRA ID No.)	NA					
Off-Site Location Name	NA						
Off-Site Address							
City		State		County		Zip	Country (Non-US)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 11801PRKNL220MI

Toxic Chemical, Category or Generic Name: NICKEL

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 19225	1. M	1. M72
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2.2 Off-Site EPA Identification Number (RCRA ID No.)

Off-Site location Name

Off-Site Address

City | State | County | Zip - | Country (Non-US)

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]						c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data ?
7A.1a	7A. 1b	1		2			7A. 1c	7A. 1d	7A. 1e
NA	3	4		5				%	Yes [ ] No [ ]
	6	7		8					
7A.2a	7A. 2b	1		2			7A. 2c	7A. 2d	7A. 2e
	3	4		5				%	Yes [ ] No [ ]
	6	7		8					
7A.3a	7A. 3b	1		2			7A. 3c	7A. 3d	7A. 3e
	3	4		5				%	Yes [ ] No [ ]
	6	7		8					
7A.4a	7A. 4b	1		2			7A. 4c	7A. 4d	7A. 4e
	3	4		5				%	Yes [ ] No [ ]
	6	7		8					
7A.5a	7A. 5b	1		2			7A. 5c	7A. 5d	7A. 5e
	3	4		5				%	Yes [ ] No [ ]
	6	7		8					

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box [1]
and indicate the Part II. Section 6.2/7A page number in this box : [1] **(example: 1,2,3, etc)**

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 11801PRKNL220MI

Toxic Chemical, Category or Generic Name: NICKEL

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [enter 3-character code(s)]

1	2	3	4
NA			

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [enter 3-character code(s)]

1.	2.	3.	4.	5.
NA				
6.	**7.**	**8.**	**9.**	**10.**

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1	Quantity released ***	19000	19229	19000	19000
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	NA	NA	NA	NA
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	NA	NA	NA	NA
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)			NA	
8.9	Production ratio or activity index			0000001.15	

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

		YES	NO
8.11	Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one box)	[ ]	[X]

EPA Form 9350-1 (Rev. 01/2001) - Previous editions are obsolete.

* For Dioxin or Dioxin-like compounds, report in grams/year

*** Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated onsite.

(IMPORTANT: Type or print; read instructions before completing form)

EPA
United States Environmental Protection Agency

FORM R

TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

WHERE TO SEND COMPLETED FORMS: 1. EPCRA Reporting Center, P.O Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY 2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision

For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2000

SECTION 2. TRADE SECRET INFORMATION

2.1	Are you claiming the toxic chemical identified on page 2 trade secret? [ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)	2.2	Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2.1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official:	Signature:	Date Signed:
JOSEPH REARDON MNAGER OF GLOBAL QUALITY		08/06/2001

SECTION 4. FACILITY IDENTIFICATION

4.1		TRI Facility ID Number	11801PRKNL220MI
Facility or Establishment Name	SULZER METCO (US), INC.	Facility or Establishment Name or Mailing Address(if different from street address)	SULZER METCO (US), INC.
Street	220 MILLER PLACE	Mailing Address	1101 PROSPECT AVENUE
City/County/State/Zip Code	HICKSVILLE NASSAU NY 11801-	City/State/Zip Code	WESTBURY NY 11590-0201
		Country (Non-US)	

4.2	This report contains information for: (Important : check a or b; check c or d if applicable)	a. [X] An entire facility	b. [ ] Part of a facility	c. [ ] A Federal facility	d. [ ] GOCO			
4.3	Technical Contact Name	MICHAEL S. LYDON				Telephone Number (Include area code) 516-338-2337		
4.4	Public Contact Name	ROSEPH REARDON				Telephone Number (include area code) 516-338-2316		
4.5	SIC Code (s) (4 digits)	Primary a. 3399	b.	c.	d.	e.	f.	

4.6	Latitude	Degrees	Minutes	Seconds	Longitude	Degrees	Minutes	Seconds
		40	47	10		073	31	00

4.7 Dun & Bradstreet Number(s) (9 digits)	4.8 EPA Identification Number (RCRA I.D. No.) (12 characters)	4.9 Facility NPDES Permit Number(s) (9 characters)	4.10 Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)
a. 152084398	a. NYD981555857	a. NA	a. NA
b.	b.	b.	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA [ ]	SULZER INC.
5.2	Parent Company's Dun & Bradstreet Number	NA [ ]	001826957

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION

TRI Facility ID Number: 11801PRKNL220MI

Toxic Chemical, Category or Generic Name: CHROMIUM COMPOUNDS

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.) N090
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) CHROMIUM COMPOUNDS
1.3	Generic Chemical Name (Important: Complete only if Part 1, Section 2.1 is checked "yes". Generic Name must be structurally descriptive.) NA

1.4 Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.
(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0.01 and 100. Distribution should be reported in percentages and the total should equal 100%. If you do not have speciation data available, indicate NA.)

NA	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
X																	

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.) NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY
(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:	3.2 Process the toxic chemical:	3.3 Otherwise use the toxic chemical:
a. [ ] Produce b. [ ] Import		
If produce or import:	a. [ ] As a reactant	a. [ ] As a chemical processing aid
c. [ ] For on-site use/processing	b. [X] As a formulation component	b. [ ] As a manufacturing aid
d. [ ] For sale/distribution	c. [ ] As an article component	c. [ ] Ancillary or other use
e. [ ] As a byproduct	d. [X] Repackaging	
f. [ ] As an impurity	e. [ ] As an impurity	

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	04	(Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

			A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	NA [X]	NA		
5.2	Stack or point air emissions	NA [ ]	9	E	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
	Stream or Water Body Name				
5.3.1	NA				
5.3.2					
5.3.3					

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1 - 10 pounds; B= 11- 499 pounds; C= 500 - 999 pounds.

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 11801PRKNL220MI

Toxic Chemical, Category or Generic Name: CHROMIUM COMPOUNDS

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		NA	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite to Class I Wells	X	NA	
5.4.2	Underground Injection onsite to Class II-V Wells	X	NA	
5.5	Disposal to land onsite			
5.5.1A	RCRA Subtitle C landfills	X	NA	
5.5.1B	Other landfills	X	NA	
5.5.2	Land treatment/application farming	X	NA	
5.5.3	Surface Impoundment	X	NA	
5.5.4	Other disposal	X	NA	

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers(pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B.1 POTW Name: NA

POTW Address:

City: | State: | County: | Zip: -

6.1.B.2 POTW Name:

POTW Address:

City: | State: | County: | Zip:

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box 1 **and indicate the Part II, Section 6.1 page number in this box** 1 **(example: 1,2,3, etc.)**

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.1 Off-Site EPA Identification Number (RCRA ID No.): NA

Off-Site Location Name: NA

Off-Site Address:

City: | State: | County: | Zip: | Country (Non-US):

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

EPA FORM R

- PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 11801PRKNL220MI

Toxic Chemical, Category or Generic Name: CHROMIUM COMPOUNDS

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. NA	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2.2 Off-Site EPA Identification Number (RCRA ID No.)

Off-Site location Name

Off-Site Address

City | State | County | Zip - | Country (Non-US)

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]			c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data ?
7A.1a	7A.1b	1	2	7A.1c	7A.1d	7A.1e
NA	3	4	5		%	Yes [ ] No [ ]
	6	7	8			
7A.2a	7A.2b	1	2	7A.2c	7A.2d	7A.2e
	3	4	5		%	Yes [ ] No [ ]
	6	7	8			
7A.3a	7A.3b	1	2	7A.3c	7A.3d	7A.3e
	3	4	5		%	Yes [ ] No [ ]
	6	7	8			
7A.4a	7A.4b	1	2	7A.4c	7A.4d	7A.4e
	3	4	5		%	Yes [ ] No [ ]
	6	7	8			
7A.5a	7A.5b	1	2	7A.5c	7A.5d	7A.5e
	3	4	5		%	Yes [ ] No [ ]
	6	7	8			

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box [1]

and indicate the Part II, Section 6.2/7A page number in this box : [1] **(example: 1,2,3, etc)**

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 11801PRKNL220MI

Toxic Chemical, Category or Generic Name: CHROMIUM COMPOUNDS

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [enter 3-character code(s)]

1 NA 2 3 4

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [enter 3-character code(s)]

1. NA 2. 3. 4. 5.
6. 7. 8. 9. 10.

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1	Quantity released ***	9	9	2000	2000
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	NA	NA	NA	NA
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	NA	NA	NA	NA
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)			NA	
8.9	Production ratio or activity index			0000001.15	

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11 Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one box) YES [ ] NO [X]

EPA Form 9350-1 (Rev. 01/2001) - Previous editions are obsolete.

* For Dioxin or Dioxin-like compounds, report in grams/year

*** Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated onsite.

EPA United States Environmental Protection Agency

FORM R

TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

WHERE TO SEND COMPLETED FORMS: 1. EPCRA Reporting Center, P.O Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY 2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision

For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2000

SECTION 2. TRADE SECRET INFORMATION

2.1	Are you claiming the toxic chemical identified on page 2 trade secret? [ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)	2.2	Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2.1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official:	Signature:	Date Signed:
JOSEPH REARDON MNAGER OF GLOBAL QUALITY		08/06/2001

SECTION 4. FACILITY IDENTIFICATION

4.1		TRI Facility ID Number	11801PRKNL220MI
Facility or Establishment Name	SULZER METCO (US), INC.	Facility or Establishment Name or Mailing Address(if different from street address)	SULZER METCO (US), INC.
Street	920 MILLER PLACE	Mailing Address	1101 PROSPECT AVENUE
City/County/State/Zip Code	HICKSVILLE NASSAU NY 11801-	City/State/Zip Code	WESTBURY NY 11590-0201
		Country (Non-US)	

4.2	This report contains information for: (Important : check a or b; check c or d if applicable)	a. [X] An entire facility	b. [ ] Part of a facility	c. [ ] A Federal facility	d. [ ] GOCO
4.3	Technical Contact Name	MICHAEL S. LYDON		Telephone Number (include area code)	516-338-2337
4.4	Public Contact Name	ROSEPH REARDON		Telephone Number (include area code)	516-338-2316

4.5	SIC Code (s) (4 digits)	Primary a. 3399	b.	c.	d.	e.	f.

4.6	Latitude	Degrees	Minutes	Seconds	Longitude	Degrees	Minutes	Seconds
		40	47	10		073	31	00

4.7 Dun & Bradstreet Number(s) (9 digits)	4.8 EPA Identification Number (RCRA I.D. No.) (12 characters)	4.9 Facility NPDES Permit Number(s) (9 characters)	4.10 Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)
a. 152084398	a. NYD981555857	a. NA	a. NA
b.	b.	b.	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA [ ]	SULZER INC.
5.2	Parent Company's Dun & Bradstreet Number	NA [ ]	001826957

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION

TRI Facility ID Number: 11801PRKNL220MI

Toxic Chemical, Category or Generic Name: ALUMINUM (FUME OR DUST)

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.) 7429905
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) ALUMINUM (FUME OR DUST)
1.3	Generic Chemical Name (Important: Complete only if Part 1, Section 2.1 is checked "yes". Generic Name must be structurally descriptive.) NA

1.4 Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.
(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0.01 and 100. Distribution should be reported in percentages and the total should equal 100%. If you do not have speciation data available, indicate NA.)

NA	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
X																	

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.) NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY
(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:	3.2 Process the toxic chemical:	3.3 Otherwise use the toxic chemical:
a. [ ] Produce b. [ ] Import		
If produce or import:	a. [ ] As a reactant	a. [ ] As a chemical processing aid
c. [ ] For on-site use/processing	b. [X] As a formulation component	b. [ ] As a manufacturing aid
d. [ ] For sale/distribution	c. [ ] As an article component	c. [ ] Ancillary or other use
e. [ ] As a byproduct	d. [X] Repackaging	
f. [ ] As an impurity	e. [ ] As an impurity	

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	04	(Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

			A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	NA [X]	NA		
5.2	Stack or point air emissions	NA [ ]	83	E	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
	Stream or Water Body Name				
5.3.1	NA				
5.3.2					
5.3.3					

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1 - 10 pounds; B= 11- 499 pounds; C= 500 - 999 pounds.

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
ALUMINUM (FUME OR DUST)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		NA	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite to Class I Wells	X	NA	
5.4.2	Underground Injection onsite to Class II-V Wells	X	NA	
5.5	Disposal to land onsite			
5.5.1A	RCRA Subtitle C landfills	X	NA	
5.5.1B	Other landfills		29685	M
5.5.2	Land treatment/application farming	X	NA	
5.5.3	Surface Impoundment	X	NA	
5.5.4	Other disposal	X	NA	

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers(pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B.1	POTW Name	NA					
POTW Address							
City		State		County		Zip	-
6.1.B.2	POTW Name						
POTW Address							
City		State		County		Zip	

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box 1 **and indicate the Part II, Section 6.1 page number in this box** 1 **(example: 1,2,3, etc.)**

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.1	Off-Site EPA Identification Number (RCRA ID No.)	NA					
Off-Site Location Name	NA						
Off-Site Address							
City		State		County		Zip	Country (Non US)

* For Dioxin or Dioxin-like compounds, report in grams/year

EPA Form 9350-1 (Rev.01/2001) - Previous editions are obsolete.

** Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 11801PRKNL220MI

Toxic Chemical, Category or Generic Name: ALUMINUM (FUME OR DUST)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2.2 Off-Site EPA Identification Number (RCRA ID No.)

Off-Site location Name

Off-Site Address

City | State | County | Zip - | Country (Non-US)

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data ?
7A.1a	7A.1b: 1 2 3 4 5 6 7 8	7A.1c	7A.1d	7A.1e
NA			%	Yes [ ] No [ ]
7A.2a	7A.2b: 1 2 3 4 5 6 7 8	7A.2c	7A.2d	7A.2e
			%	Yes [ ] No [ ]
7A.3a	7A.3b: 1 2 3 4 5 6 7 8	7A.3c	7A.3d	7A.3e
			%	Yes [ ] No [ ]
7A.4a	7A.4b: 1 2 3 4 5 6 7 8	7A.4c	7A.4d	7A.4e
			%	Yes [ ] No [ ]
7A.5a	7A.5b: 1 2 3 4 5 6 7 8	7A.5c	7A.5d	7A.5e
			%	Yes [ ] No [ ]

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box [1]
and indicate the Part II. Section 6.2/7A page number in this box : [1] **(example: 1,2,3, etc)**

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 11801PRKNL220MI

Toxic Chemical, Category or Generic Name: ALUMINUM (FUME OR DUST)

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [enter 3-character code(s)]

1 NA 2 3 4

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [enter 3-character code(s)]

1. NA 2. 3. 4. 5.

6. 7. 8. 9. 10.

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1	Quantity released ***	29000	29769	29000	29000
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	NA	NA	NA	NA
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	NA	NA	NA	NA
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)			NA	
8.9	Production ratio or activity index			0000001.15	

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11 Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one box) YES [ ] NO [X]

EPA Form 9350-1 (Rev. 01/2001) - Previous editions are obsolete.

* For Dioxin or Dioxin-like compounds, report in grams/year

*** Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated onsite.

EPA United States Environmental Protection Agency

FORM R

TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

WHERE TO SEND COMPLETED FORMS: 1. EPCRA Reporting Center, P.O Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY 2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2000

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret? [ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)

2.2 Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2.1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official:	Signature:	Date Signed:
JOSEPH REARDON MNAGER OF GLOBAL QUALITY		08/06/2001

SECTION 4. FACILITY IDENTIFICATION

4.1 TRI Facility ID Number: 11801PRKNL220MI

Facility or Establishment Name: SULZER METCO (US), INC.

Facility or Establishment Name or Mailing Address(if different from street address): SULZER METCO (US), INC

Street: 220 MILLER PLACE

Mailing Address: 1101 PROSPECT AVENUE

City/County/State/Zip Code: HICKSVILLE NASSAU NY 11801-

City/State/Zip Code: WESTBURY NY 11590-0201

Country (Non-US):

4.2 This report contains information for: (Important : check a or b; check c or d if applicable) a. [X] An entire facility b. [ ] Part of a facility c. [ ] A Federal facility d. [ ] GOCO

4.3 Technical Contact Name: MICHAEL S. LYDON — Telephone Number (include area code): 516-338-2337

4.4 Public Contact Name: ROSEPH REARDON — Telephone Number (include area code): 516-338-2316

4.5 SIC Code (s) (4 digits)

Primary a.	b.	c.	d.	e.	f.
3399					

4.6

Latitude Degrees	Minutes	Seconds	Longitude Degrees	Minutes	Seconds
40	47	10	073	31	00

4.7 Dun & Bradstreet Number(s) (9 digits)	4.8 EPA Identification Number (RCRA I.D. No.) (12 characters)	4.9 Facility NPDES Permit Number(s) (9 characters)	4.10 Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)
a. 152084398	a. NYD981555857	a. NA	a. NA
b.	b.	b.	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1 Name of Parent Company: NA [ ] SULZER INC.

5.2 Parent Company's Dun & Bradstreet Number: NA [ ] 001826957

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION

TRI Facility ID Number: 11801PRKNL220MI

Toxic Chemical, Category or Generic Name: COBALT

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.) 7440484
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) COBALT
1.3	Generic Chemical Name (Important: Complete only if Part 1, Section 2.1 is checked "yes". Generic Name must be structurally descriptive.) NA

1.4 Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.
(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0.01 and 100. Distribution should be reported in percentages and the total should equal 100%. If you do not have speciation data available, indicate NA.)

NA	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
X																	

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.) NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY
(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:	3.2 Process the toxic chemical:	3.3 Otherwise use the toxic chemical:
a. [ ] Produce b. [ ] Import		
If produce or import:	a. [ ] As a reactant	a. [ ] As a chemical processing aid
c. [ ] For on-site use/processing	b. [X] As a formulation component	b. [ ] As a manufacturing aid
d. [ ] For sale/distribution	c. [ ] As an article component	c. [ ] Ancillary or other use
e. [ ] As a byproduct	d. [X] Repackaging	
f. [ ] As an impurity	e. [ ] As an impurity	

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	03	(Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

			A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	NA [X]	NA		
5.2	Stack or point air emissions	NA [ ]	3	E	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
	Stream or Water Body Name				
5.3.1	NA				
5.3.2					
5.3.3					

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1 - 10 pounds; B= 11- 499 pounds; C= 500 - 999 pounds.

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 11801PRKNL220MI

Toxic Chemical, Category or Generic Name: COBALT

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		NA	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite to Class I Wells	X	NA	
5.4.2	Underground Injection onsite to Class II-V Wells	X	NA	
5.5	Disposal to land onsite			
5.5.1A	RCRA Subtitle C landfills	X	NA	
5.5.1B	Other landfills		702	M
5.5.2	Land treatment/application farming	X	NA	
5.5.3	Surface Impoundment	X	NA	
5.5.4	Other disposal	X	NA	

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B.1 POTW Name: NA

POTW Address:

City: | State: | County: | Zip: -

6.1.B.2 POTW Name:

POTW Address:

City: | State: | County: | Zip:

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box 1 **and indicate the Part II, Section 6.1 page number in this box** 1 **(example: 1,2,3, etc.)**

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.1 Off-Site EPA Identification Number (RCRA ID No.): NA

Off-Site Location Name: NA

Off-Site Address:

City: | State: | County: | Zip: | Country (Non-US):

* For Dioxin or Dioxin-like compounds, report in grams/year

EPA Form 9350-1 (Rev.01/2001) - Previous editions are obsolete.

** Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number: 11801PRKNL220MI

Toxic Chemical, Category or Generic Name: COBALT

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

6.2.2 Off-Site EPA Identification Number (RCRA ID No.)

Off-Site location Name

Off-Site Address

City | State | County | Zip | Country (Non-US)

Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]						c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data ?
7A.1a	7A. 1b	1		2			7A. 1c	7A. 1d	7A. 1e
NA	3	4		5				%	Yes ☐ No ☐
	6	7		8					
7A.2a	7A. 2b	1		2			7A. 2c	7A. 2d	7A. 2e
	3	4		5				%	Yes ☐ No ☐
	6	7		8					
7A.3a	7A. 3b	1		2			7A. 3c	7A. 3d	7A. 3e
	3	4		5				%	Yes ☐ No ☐
	6	7		8					
7A.4a	7A. 4b	1		2			7A. 4c	7A. 4d	7A. 4e
	3	4		5				%	Yes ☐ No ☐
	6	7		8					
7A.5a	7A. 5b	1		2			7A. 5c	7A. 5d	7A. 5e
	3	4		5				%	Yes ☐ No ☐
	6	7		8					

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box [1]
and indicate the Part II. Section 6.2/7A page number in this box : [1] **(example: 1,2,3, etc)**

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

Powder Division

Material Safety Data Sheet

Aluminum Company of America, Powder Division, P.O. Box 472, Rockdale, TX 76567

ALCOA

NO. 126F

Common Name	Phone	Date	Revised
Atomized Powders 718	412-553-4001	1980-09-17	1988-05-27

SECTION I. Material Description

Chemical Name & Formula: Alloy of aluminum (Al) and silicon (Si)
Other Designation: Alcoa Atomized Powder 718
CAS No.: Al (7429-90-5); Si (7440-21-3); Fe (7439-89-6)
Manufacturer: Alcoa

SECTION II. Ingredients

	% Typical
Al	87.5
Si	12.0
Fe	0.5

Occupational Exposure Limits

TWA in mg/m^3 unless indicated

ACGIH TLV

Nuisance dust (Al & Si):
Total fraction - 10

ALCOA PEL

Respirable fraction - 5

For more detailed information on maximum trace levels of other metal contaminants in Alcoa aluminum powder, see "Quality Control and Analytical Test Methods for Alcoa Aluminum Powders" (Section FA2D-2, page 4).

SECTION III. Physical Data

Physical Form: Finely divided aluminum powder in nodular form
Boiling Temperature: NA
Freeze-Melt Temperature: 1070-1080°F (577-582°C)
Vapor Pressure: NA
Evaporation Rate: NA
Specific Gravity: NA
Density: 69 - 88 lb/ft^3 (1.1 - 1.4 g/cm^3)
Water Solubility: Insoluble; insoluble in organic solvents
pH: NA
Color: Varies from dull gray to metallic silvery color
Odor: None

SECTION IV. Fire and Explosion Data

Flashpoint:	Auto-Ignition Temp.:	Flammability Limits in Air: Upper:	Lower:
None	650°C (layered)	Minimum Explosive Concentration in Air	40 mg/L

Aluminum powder may be explosive when dispersed in air. Even a minor dust cloud can explode violently.

In case of fire: Use extreme care to prevent dust cloud formation. Use gentle surface application of Class D extinguishing agent or dry inert granular material (e.g., sand) to cover and ring the burning powder. Do not use fire extinguishers rated for Class A, B, or C fires. Do not use water or halogenated fire extinguishing agents. Do not disturb the burning powder or cause mixing of the agent with the burning powder. Do not disturb the powder until completely cool.

Firefighters should wear NIOSH approved self-contained breathing apparatus and protective clothing when appropriate.

SECTION V. Reactivity Data

With water: Generates hydrogen and heat slowly. Water/aluminum powder mixtures may be especially hazardous when confined.
With heat: Oxidizes at a rate dependent on temperature.
With strong oxidizers: Violent reaction with much heat generated.
With halogenated compounds: Many halogenated hydrocarbons, including halogenated fire extinguishing agents, can react violently with finely divided aluminum.
When exposed to fire, aluminum oxide and aluminum nitride are formed.

SECTION VI. Health Hazard Information (See Section II for exposure limits.)

Low health risk by inhalation. Treat aluminum and silicon as nuisance dusts as specified by the American Conference of Governmental Industrial Hygienists (ACGIH).

According to AIHA Hygienic Guide, Aluminum:
Toxicity by ingestion: None expected
Skin and eyes: Not an irritant

SECTION VII. Spill, Leak & Disposal Procedures

Avoid all ignition sources around spill area. Prohibit smoking. Do not use water for spill clean-up. Avoid dusting of powder to the greatest extent possible. Sweep spilled powder with natural bristle broom (push type recommended). Pick up material with non-sparking shovel. Place carefully in dry, water-tight containers. Seal containers. Waste aluminum powder should be sent to a reclamation facility for reuse or recycling. After complete clean-up by sweeping, area may be washed down with copious amounts of water, if necessary.

RCRA Hazardous Waste No. Not Federally Regulated

SECTION VIII. Special Protection Information

Use with adequate explosion-proof ventilation to meet the exposure limits as listed in Section II. Use non-sparking handling equipment, including vehicle wheels. Cover and reseal partially empty containers. Keep absolutely dry. Storage rooms must be of fire resistant construction. It is preferable not to store powder in the same room as other combustible materials. Smoking is prohibited.

Where respiratory protection is necessary, NIOSH approved respiratory protection should be used. Select the appropriate respiratory protection (dust respirator, etc.) based on the actual or potential airborne contaminants and their concentrations present.

SECTION IX. Special Precautions & Comments

Chemical substance components have been reported to the EPA Office of Toxic Substances in accordance with the requirements of the Toxic Substances Control Act (Title 40 CFR Part 710).

All electrical equipment must be suitable for use in hazardous atmospheres involving aluminum powder in accordance with 29 CFR 1910.307. The National Electric Code, NFPA 70, contains guidelines for determining the type and design of equipment and installation which will meet this requirement.

None of the materials in this mixture are on the EPA list of extremely hazardous substances (Section 302 of SARA).
Aluminum (fume and dust) is on the toxic chemicals list (Section 313 of SARA).

This material fits the EPA Hazard Category definitions of Reactive and Sudden Release of Pressure Hazards, under SARA Sections 311, 312.

D.O.T. Shipping Name, Hazard Class, I.D. No. (if applicable) Aluminum, Metallic Powder, (Not Regulated by 49 CFR)

SECTION X. References

Aluminum Association Bulletin TR-2, "Recommendation for Storage and Handling of Aluminum Pigments and Powders"
ANSI Z12.19
Bureau of Mines #6516, "Explosibility of Metal Powders (1964)"
NFPA 651, "Standard for the Manufacture of Aluminum and Magnesium Powder"
NFPA 65, "Standard for the Processing and Finishing of Aluminum"

Information herein is given in good faith as authoritative and valid; however, no warranty, express or implied, can be made.

ALUMINUM COMPANY OF AMERICA
1501 ALCOA BUILDING
PITTSBURGH, PENNSYLVANIA 15219

ALCOA

MATERIAL SAFETY DATA SHEET NOTIFICATION

METCO INC.- DIV. OF PERKIN-ELMER 1988-07-12
1101 PROSPECT AVENUE
WESTBURY NY 11590

ALCOA SALES ORDER-PD 20982
PURCHASE ORDER----78065 (VB)
MSDS NO. & DATE---126 1988-05-27

ATTN: MANAGER OF SAFETY

THE ENCLOSED ALCOA MATERIAL SAFETY DATA SHEET (MSDS) DESCRIBES THE PROPERTIES AND POTENTIAL HAZARDS OF A PRODUCT YOUR COMPANY HAS PURCHASED FROM ALCOA.

THIS MSDS HAS BEEN CAREFULLY REVIEWED BY SPECIALISTS AND INCLUDES THE BEST INFORMATION AVAILABLE AT THE TIME OF PRINTING. IT DESCRIBES THE PERSONAL HEALTH, ENVIRONMENTAL SAFEGUARDS AND SAFETY PRECAUTIONS WHICH SHOULD BE OBSERVED BY EVERYONE WHO WORKS WITH THESE PRODUCTS.

PLEASE SEE THAT ALL APPROPRIATE PEOPLE RECEIVE THIS IMPORTANT INFORMATION.

ALCOA'S EMERGENCY NUMBER IS PRINTED ON THE FRONT OF THE MSDS. FOR ANY ROUTINE QUESTIONS OR REQUESTS, PLEASE WRITE TO THE ABOVE ADDRESS OR PHONE ME AT (412) 553-3905.

RAYMOND W. SAUER
MANAGER OF PRODUCT SAFETY

GERAGHTY & MILLER, INC.
Environment and Infrastructure
a heidemij company

December 24, 1997

Richard G. Rudolf, Esquire
Sulzer U.S. Holding Inc.
200 Park Avenue
New York, New York 10166-0068

Subject: Remediation and Investigation Work at the 325 Duffy Avenue Facility
Sulzer Metco, Hicksville, NY

Dear Mr. Rudolf:

Geraghty & Miller Inc. has developed this scope of work to perform the remediation and investigation work at the 325 Duffy Avenue Facility, located in Hicksville, NY. The following scope of work has been developed based on the conclusions and recommendations provided by ERM-Northeast in their correspondence dated November 26, 1997.

BACKGROUND

The Phase II Site Investigation performed by ERM-Northeast on October 31, 1997 focused on two areas of concern. A brief summary of the findings, conclusions and recommendations for the two areas of concern are provided below.

1. The sediments in the two catch basins, located outside the east wall of the building, have been identified to contain elevated levels of metals. A recommendation has been made to remove the remaining sediments and to pressure wash the catch basin interiors.

2. The two sumps located in the maintenance department require additional investigation work. While shallow soil samples were taken in the area surrounding the two sumps indicating preliminary metals impacts in one sump and potential volatile organic compounds (VOCs) impacts in the soil around both sumps, the investigation was deemed inconclusive due to the failed attempt of obtaining deeper representative soil samples. A recommendation was provided to obtain the deeper representative samples for VOCs and metals.

GERAGHTY & MILLER, INC.

SCOPE OF WORK

The following scope of work has been developed to address the recommendations made for the remediation of the two catch basins (Drywell Remediation) located outside the east wall of the building and the additional investigative work associated with the two sumps (Sumps Investigation) located in the maintenance department.

DRYWELL REMEDIATION

Geraghty & Miller and our contractor will provide the necessary equipment and labor for the removal the sediments in the two catch basins and for the pressure washing of the interiors of the catch basins. The removed sediments and associated washwater will be placed in fifty-five (55) gallon drums. Geraghty & Miller will provide the estimated three (3) drums necessary to contain the waste generated from this remediation work. Sulzer Metco will be responsible for the proper disposal of the drums.

SUMPS INVESTIGATION

Geraghty & Miller and our contractor will perform the additional investigation work of the two sumps located in the maintenance department. Three borings will be advanced adjacent to each sump (for a total of six borings) using a geoprobe mounted on the back of a heavy duty utility cart. A concrete drill will be used to penetrate the concrete slab and construction debris reported to be beneath the concrete slab. An air chisel will also be available to penetrate the construction debris if the concrete drill fails. Each boring will be advanced to two feet below the invert of the sumps (approximately 6 feet below the concrete floor) and soil samples will be collected by hydraulically hammering a large bore sampler into the subsurface. The large bore samplers are an open tube design and measure approximately 2 inches in diameter by 24 inches in length. The samplers are fitted with a removable cutting shoe and a disposable clear acetate liner. The soil collected within the sampler will not come into direct contact with the interior of the sampler but will be stored in the acetate liner.

The soil collected in each large bore sampler will be placed in a jar for field screening of VOCs. The jar will be covered with aluminum foil, sealed with a Teflon-lined, screw-on lid, and allowed to equilibrate for approximately 15 minutes. The foil will then be pierced and the headspace above the sample screened with a photoionization detector for the presence of VOCs. Soil collected from the worse case sample (based on the field screening) will be placed into the appropriate sample jars, and stored on ice at a temperature of 4° Celsius until delivery to a New York State certified laboratory for VOCs and priority pollutant metals.

Geraghty & Miller will also perform an integrity test of the shallower sump to determine if any leaks exist. A two-hour constant head test consisting of the placement of potable water into the sump at a pre-determined level. During the two hour test, accurate measurements will be

taken and recorded. Any additional water added will also be measured and recorded. For the purpose of an accurate constant head test, the influent and effluent pipes will need to be temporarily sealed off prior to the placement of potable water. Geraghty & Miller will need to coordinate this with the production personnel to avoid any problems or delays.

SUMMARY REPORT

Upon completion of this work, a report summarizing our findings and conclusions will be submitted. Should any additional remediation be required as a result of the sumps investigation, Geraghty & Miller will provide a recommendation to complete this work.

Sincerely,

GERAGHTY & MILLER, INC.

Tom C. Eng

Tom C. Eng, CIH
Principal Engineer

Tom Lobasso TCE

Tom Lobasso
Vice President

48-14-1 (3-89)–7f

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

Form Approved OMB No. 2050-0039, Expires 9-30-94

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. [illegible]
Manifest Document No. [illegible]
2. Page 1 of
Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
[illegible]
4. Generator's Phone ( ) [illegible]

A. State Manifest Document Number
NY C 217231-7
B. Generator's ID
[illegible]

5. Transporter 1 (Company Name)
[illegible]
6. US EPA ID Number
[illegible]
C. State Transporter's ID [illegible]
D. Transporter's Phone ( ) [illegible]

7. Transporter 2 (Company Name)
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone ( )

9. Designated Facility Name and Site Address
[illegible]
10. US EPA ID Number
[illegible]
G. State Facility's ID
H. Facility's Phone
[illegible]

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. [illegible]	11	DM	91		EPA D001 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
[illegible]
a
b
c
d

K. Handling Codes for Wastes Listed Above
a
b
c
d

15. Special Handling Instructions and Additional Information
[illegible]
EMERGENCY RESP #1 [illegible] 24HR
[illegible]

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: X Bill Bonchard
Signature: X
Mo. Day Year: 02 25 93

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: Gary Factora
Signature: Gary Factora
Mo. Day Year: 02 25 93

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name
Signature
Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: J. Zimmerman
Signature
Mo. Day Year: 02 25 93

NY C 217231-7

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 5-Generator-Mailed by TSD facility

P2SUL005704

48-14-1 (3-89)-7f

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

Form Approved OMB No. 2050-0039, Expires 9-30-94

Immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.

2. Page 1 of | Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number: NY C 217231 7

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Phone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility's ID

H. Facility's Phone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	11		71		EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a | c

b | d

K. Handling Codes for Wastes Listed Above

a | c

b | d

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR**, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Mo. Day Year

TRA

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

Discrepancy Indication Space

Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Name | Signature | Mo. Day Year

(Rev. 9-88) Previous editions are obsolete

COPY 8-Generator-retained by generator

P2SUL005705

NY C 217231 7

safety-kleen ®

2-118-08

NOTICE OF LAND DISPOSAL RESTRICTION OF WASTE

TO: SAFETY-KLEEN CORP.
(DESIGNATED FACILITY)

EPA ID NO. NYD000708198
(DESIGNATED FACILITY)

80 SEABRO

ADDRESS: NO AMITYVILLE NY 11701

OPTION A

Under manifest number _____, the generator noted below is shipping to you a waste determined to be restricted under 40 CFR Part 268. In accordance with 40 CFR Part 268.7, the generator hereby provides notice that the waste is restricted from land disposal. A copy of this form must be kept by the generator and facility for five (5) years from the date of waste shipment.

OPTION B

In accordance with 40 CFR 268.7, the generator hereby provides notice that the waste is restricted from land disposal. I am a small quantity generator (100-1,000 kg/mo) in accordance with 40 CFR 268.7. This notice applies to all waste shipments under my service contract with Safety-Kleen Corp. It covers today's shipment on manifest No. NYC217231-7, or sales/service acknowledgement No. 147371, and all subsequent shipments. A copy of this notice will be maintained with the service contract(s) or sales/service acknowledgment(s) for five (5) years beyond the termination of the service contract.

PLEASE CHECK THE APPROPRIATE BOXES

✓	WASTE NAME	EPA * WASTE CODE	THE WASTE MAY CONTAIN THE FOLLOWING RESTRICTED CONSTITUENTS	TREATMENT STANDARD (mg/l) OR METHOD (FOR NON-WASTE WATER)
☒	Waste Petroleum Naphtha (105)	D001, D018, D039,	Ignitable Liquid (High TOC Subcategory) Halogenated Organic Compounds (HOC's) ≥ 1000 mg/l Benzene Tetrachloroethylene	Incineration (INCIN), fuel substitution (FSUBS) or recovery (RORGS) (40 CFR 268.42) (non-waste water) INCIN (40 CFR 268.42) (non-waste water) Not Established Not Established
☐	Waste Petroleum Naphtha (140)	D001,	Ignitable Liquid (High TOC Subcategory)	INCIN, FSUBS, or RORGS (40 CFR 268.42) (non-waste water)
☐	Waste Petroleum Naphtha (sludges from Safety-Kleen Service Center Operations)	D001, D006, D007, D008, D039,	All of the above, plus: __ Cadmium __ Chromium __ Lead __ Tetrachloroethylene	 1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste Water) Not Established
☐	Waste Compound Cleaning Liquid/ Immersion cleaner 699	 D006, D007, D008, D018, D021, D027, D039, D040,	HOC's ≥ 1000 mg/l __ Cadmium __ Chromium __ Lead __ Benzene __ Chlorobenzene __ 1, 4-Dichlorobenzene __ Tetrachloroethylene __ Trichloroethylene	INCIN (40 CFR 268.42) (non-waste water) 1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste Water Not Established Not Established Not Established Not Established Not Established
☐	Waste Perchloroethylene	F002,	Tetrachloroethylene	5.6 (non-waste water)
☐	Waste Perc. Filters This hazardous debris is subject to the alternative treatment standards of 40CFR 268.45.	F002,	Tetrachloroethylene	5.6 (non-waste water)
☐	Waste Trichlorotrifluoroethane	F002,	Trichlorotrifluoroethane	28.0 (non-waste water)
☐	Waste 1,1,1 Trichloroethane	F002,	1, 1, 1 Trichloroethane	5.6 (non-waste water)
☐	Waste Petroleum Naphtha (Dry Cleaning)	D001, D039,	Ignitable Liquid (High TOC Subcategory) Tetrachloroethylene	INCIN, FSUBS, or RORGS (40 CFR 268.42) (non-waste water) Not Established
☐	Waste Paint Related Material	F003, F005, F003, F005, F003, F003, D001, D006, D007, D008,	Acetone Methyl Ethyl Ketone Methyl Isobutyl Ketone Toluene Xylene Methanol Ignitable Liquid (High TOC Subcategory) Cadmium Chromium Lead (TOC Subcategory)	160.0 (non-waste water) 36.0 (non-waste water) 33.0 (non-waste water) 28.0 (non-waste water) 28.0 (non-waste water) 0.75(non-waste water) INCIN, FSUBS, or RORGS (40 CFR 268.42) (non-waste water) 1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste water)
☐	Waste Antifreeze	D008, D039,	Lead Tetrachloroethylene	5.0 (non-waste water) Not Established

GENERATOR

The constituent composition is based on knowledge of the waste (via Material Safety Data Sheets for the chemical(s) used, and the process which created the waste).

*These treatment standards do not preclude reclamation prior to final disposition. 9308 2-118-08-1500 04 147371

Generator Company: METCO

EPA ID NO.: NYD057731663

Generator's Signature: X B Bouchard

Date: 2-25-93

Printed Name and Title of Generator: Bill Bouchard SUP. MFG/R.

P2SUL005706

Safety-Kleen Corp. manages the above waste through its recycling and fuels programs in accordance with all applicable elements of the land disposal restrictions.

Form No. 1328 (1/93)

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

NEW YORK STATE DEC
DIVISION OF HAZARDOUS
SUBSTANCES REGULATION
PO BOX 12820
ALBANY NY 12212

4a. Article Number

P 617 298 185

4b. Service Type

☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

PS Form 3811, December 1991 ★U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

P 617 298 185

Certified Mail Receipt
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

UNITED STATES POSTAL SERVICE

Sent to	NYS DEC DIVISION OF HAZARDOUS SUBSTANCES REG.
Street & No.	PO BOX 12820
P.O., State & ZIP Code	ALBANY NY 12212
Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form 3800, June 1990

Fold at line over top of envelope to the right of the return address.

CERTIFIED MAIL

P 617 298 185

SULZER METCO

Sulzer Metco (Westbury) Inc.
1101 Prospect Avenue
PO Box 1006
Westbury, NY 11590-0201
Phone:(516) 334-1300
Fax: (516) 338-2477

May 13, 1999

Mr. Edward J. Guster III
Environmental Scientist
USEPA – RCB/HWCS
290 Broadway 22 Floor
New York, NY 10007-1866

Subject: Notice of Violations

Dear Mr. Guster:

This letter is to inform you of the actions that have been taken to abate the six citations in your notice of violation dated April 12, 1999.

Citation 1: Please see the attached copies of the contingency plan for the Prospect Avenue and Miller Place facilities. These plans have been updated to reflect the names, addresses, and phone numbers (office and home) for the current emergency coordinators.

Citation 2: Two framed postings have been installed adjacent to the emergency telephones at the Prospect Avenue, and Miller Place facilities. The first framed posting consists of the names and telephone numbers of the emergency response coordinators, telephone number of the fire department, as well as other pertinent emergency telephone numbers. The second posting is a diagram listing the location of spill control equipment, fire extinguishers, emergency telephones with telephone numbers to the fire department, and emergency alarm pull stations. Please see attached emergency telephone sheets, emergency response diagrams, and photo documentation.

Citation 3: Attached please find complete copies of the following waste manifests.

NYG0669717	09/16/98	NYB7207164	09/12/96
NYG0021492	04/09/97	NYG0211734	05/29/97
NJA2953049	07/23/98	MIA7018245	07/30/98

These manifests include the generator copy, TSD return, and land ban notification.

Citation 4: At the Miller Place facility, an emergency telephone has been installed inside the hazardous waste storage facility as an emergency alarm. This phone is part of the buildings integrated telecommunications system. This phone will be placed on a routine maintenance and inspection schedule. This emergency phone was installed on May 12, 1999. Please see attached photo documentation.

METCO AMDRY

recycled paper

EXPRESS MAIL

UNITED STATES POSTAL SERVICE®

EXPRESS MAIL
UNITED STATES POSTAL SERVICE TM

POST OFFICE TO ADDRESSEE

EJ376266956US

Mailing Label

ORIGIN (POSTAL USE ONLY)			
PO ZIP Code	Day of Delivery ☐ Next ☐ Second	Flat Rate Envelope ☐	
Date In Mo. Day Year	☐ 12 Noon ☐ 3 PM	Postage $	
Time In ☐ AM ☐ PM	Military ☐ 2nd Day ☐ 3rd Day	Return Receipt Fee	
Weight lbs. ozs.	Int'l Alpha Country Code	COD Fee	Insurance Fee
No Delivery ☐ Weekend ☐ Holiday	Acceptance Clerk Initials	Total Postage & Fees $	

DELIVERY (POSTAL USE ONLY)		
Delivery Attempt Mo. Day	Time ☐ AM ☐ PM	Employee Signature
Delivery Attempt Mo. Day	Time ☐ AM ☐ PM	Employee Signature
Delivery Date Mo. Day	Time ☐ AM ☐ PM	Employee Signature
Signature of Addressee or Agent x		
Name - Please Print x		

CUSTOMER USE ONLY

METHOD OF PAYMENT:

Express Mail Corporate Acct. No.

Federal Agency Acct. No. or Postal Service Acct. No.

☐ **WAIVER OF SIGNATURE** (Domestic Only) **Additional merchandise insurance is void if waiver of signature is requested.** I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.

NO DELIVERY ☐ Weekend ☐ Holiday

Customer Signature

FROM: (PLEASE PRINT) PHONE ( )

Michael S. Lydon
Sulzer Metco
1101 Prospect Avenue
Westbury, NY 11590

TO: (PLEASE PRINT) PHONE ( )

Mr. Edward J. Guster III
Environmental Scientist
USEPA - RCB/HWCS
290 Broadway 22 Floor
New York, NY 10007-1866

PRESS HARD.
You are making 3 copies.

FOR PICKUP OR TRACKING CALL 1-800-222-1811 **www.usps.gov** EMS

Label 11-B, July 1997

EPHM-2 REV. 6/97

STATE OF CONNECTICUT

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST PROGRAM
79 Elm St., Hartford, CT 06106-5127

BK927823
PPW/04/12/2005

Please type (or print) *(Form designed for use on elite (12-pitch) typewriter.)*

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No. CKW 12283 Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but may be required by State law.

3. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Phone (516) 338-2337

A. State Manifest Document Number: CT F 1172783

B. G.S.I. (Gen. Site Address): CAMP

5. Transporter 1 Company Name: Clean Harbors Env Services Inc
6. US EPA ID Number: MAD039322250

C. S.T.I. (Trans. Lic. Plate #): L43/4VA NY

7. Transporter 2 Company Name
8. US EPA ID Number

D. Tran. Phone (781) 849-1800

9. Designated Facility Name and Site Address: Clean Harbors Of Conn Inc
61 Broderick Road
Bristol, CT 06010
10. US EPA ID Number: CTD000604288

E. S.T.I. (Trans. Lic. Plate #)

F. Tran. Phone

G. State Facility's ID (Not Required)

H. Facility's Phone (800) 582-8017

11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. NON DOT REGULATED MATERIAL, (CERAMIC OXIDE), NONE, NONE	001	T.T	EST 1,000	G	EPA NONE STATE CR04
b.					EPA STATE
c.					EPA STATE
d.					EPA STATE

J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above	
(L)		Interim / Final	Interim / Final
a.	c.	a.	c.
b.	d.	b.	d.

15. Special Handling Instructions and Additional Information: EMERGENCY PHONE #: (800) 483-3718
11a: ch82414bb

Point of Departure:

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR,** if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month Day Year
X Joe Dean	X	05 04 05

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year
Michael Corbett		05 04 05

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month Day Year

A Form 8700-22 (Rev. 9/91) Form Approved OMB No.2050-0039

COPY 6: GENERATOR MAILS TO DESTINATION STATE

COPY 6: GENERATOR MAILS TO DESTINATION STATE

CT F 1172783

PARTIAL INSTRUCTIONS
FOR COMPLETING THE CONNECTICUT UNIFORM HAZARDOUS WASTE MANIFEST

IMPORTANT: READ ALL INSTRUCTIONS ON THE COVER SHEET BEFORE COMPLETING THIS FORM. ALL 8 COPIES MUST BE TOTALLY LEGIBLE.

GENERAL INFORMATION

The Hazardous Waste Manifest is designed to track waste from the point of generation to final disposal ("cradle to grave"). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete, incorrect or illegible manifests are violations of the law, and could subject you to civil or criminal liabilities as specified in Connecticut Hazardous Waste Management Regulations.

The Connecticut manifest contains 8 copies. ALL COPIES MUST BE LEGIBLE! (Illegible manifests submitted to the State will be returned to the Generator for proper completion). This form is designed for use on a 12 pitch (elite) typewriter. A firm ball point pen may also be used only if you press down HARD. The eight copies must be filed with the appropriate parties as they are completed.

* Be aware that hazardous wastes manifested into or out of Connecticut are subject to a hazardous waste assessment per C.G.S. 22a-132. Please contact the Dept. of Revenue Services at (860) 541-3225 for more information.

COPY DISTRIBUTION is as follows:

COPY 1: FACILITY MAILS TO DESTINATION STATE: This copy is mailed by the Facility to the responsible state agency in the state in which the facility is located, upon receipt of the waste.

COPY 2: FACILITY MAILS TO GENERATOR STATE: This copy is mailed by the facility to the appropriate agency in the Generator's state, upon receipt of the waste.

COPY 3: FACILITY MAILS TO GENERATOR: This copy is mailed to the generator by the facility upon receipt of the waste. This copy is the generator's documentation that the facility received the waste.

COPY 4: FACILITY RETAINS: This copy is retained by the facility for his records.

COPY 5: TRANSPORTER 1 RETAINS: This copy is retained by the Transporter for his records. This copy is the Transporter's documentation that this shipment was transported from the generator to the facility.
NOTE: If a continuing Transporter is used, the generator is responsible for supplying him with a legible photocopy of the manifest, which must contain signatures where required.

COPY 6: GENERATOR MAILS TO DESTINATION STATE: This copy is mailed by the generator to the appropriate agency in the destination state (the state in which the facility is located).

COPY 7: GENERATOR MAILS TO GENERATOR STATE: This copy is mailed by the generator to the appropriate state agency in his state.

COPY 8: GENERATOR RETAINS: This copy is retained by the generator for his records.

GENERATOR SECTION

Item 12: CONTAINERS (NO. & TYPE) - Enter the number of containers for each waste and the appropriate abbreviation from TABLE 1 (below) for the type of container used.

TABLE 1 - CONTAINER TYPE

DM = Metal drums, barrels, kegs	TP = Tanks, Portable	CM = Metal boxes, cartons, cases (incl. roll-offs)
DW = Wooden drums, barrels, kegs	TT = Cargo Tanks (tank trucks)	CW = Wooden boxes, cartons, cases
DF = Fiberboard or plastic drums, barrels, kegs	TC = Tank Cars	CF = Fiber or plastic boxes, cartons, cases
CY = Cylinders	DT = Dump Trucks	BA = Burlap, cloth, paper, plastic bags

Item 13: TOTAL QUANTITY - Enter the total quantity of waste described on each line, relative to the units used in Item 14.

Item 14: UNIT (Wt./Vol.) - Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line. DO NOT use fractions.

TABLE II - UNITS OF MEASURE

G = Gallons (liquids only)	L = Liters (liquids only)	Y = Cubic Yards
P = Pounds	K = Kilograms	N = Cubic Meters
T = Tons (2000 lb.)	M = Metric Tons (1000 kg.)	

TRANSPORTER SECTION

Item 17: TRANSPORTER 1 ACKNOWLEDGEMENT - Print or type the name of the person accepting the waste on behalf of the 1st transporter. That person must acknowledge acceptance of the waste described on the manifest by signing & entering the date of receipt.

Item 18: TRANSPORTER 2 ACKNOWLEDGEMENT - If applicable, follow instructions for Item 17 for Transporter 2.

DESIGNATED FACILITY (TSDF) SECTION

Item K: HANDLING CODES (TSDF COMPLETES) - Refer to Item K in full instructions.

TABLE III - PROCESS CODES/HANDLING METHOD CODES

STORAGE:	S01 (Containers)	S02 (Tank)	S03 (Waste Pile)	S04 (Surface Impoundment)	S05 (Other - Specify)
TREATMENT:	T01 (Tank)	T02 (Surface Impoundment)	T03 (Incinerator)	(Other Treatment - specify code from 40 CFR 265 Appendix I)	
DISPOSAL:	D80 (Injection well)	D81 (Landfill)	D82 (Land Application)	D84 (Surface Impoundment)	
			D83 (Ocean Disposal)	D85 (Other - Specify)	

Item 19: DISCREPANCY INDICATION SPACE - The authorized representative of the designated facility's owner or operator must note in this space any significant discrepancy between the waste described on the manifest & the waste actually received at the facility. Any rejected materials should be listed here, along with an indication of the disposition of the rejected materials. **Any applicable Discrepancy or Rejection reporting requirements must also be complied with. Federal & State regulations vary.**

Item 20: FACILITY OWNER OR OPERATOR CERTIFICATION - Print or type the name of the person accepting the waste on behalf of the owner or operator of the designated TSDF. That person must acknowledge acceptance of the waste described on the manifest by signing (by hand) & entering the date of the receipt. The signature of the authorized TSDF agent indicates acceptance (except for items specified in Item 19) & agreement with the statements on this manifest.

* NOTE: FOR INTERSTATE SHIPMENTS (between different states) YOU MAY BE REQUIRED TO COMPLY WITH THE MANIFESTING REQUIREMENTS OF BOTH THE DESTINATION & GENERATOR STATES REGARDING THE COMPLETION OF SPECIFIC INFORMATION INCLUDED IN LETTERED ITEMS A-K. You may wish to contact State agencies for more information on this subject.

REMINDER: ALL 8 COPIES OF THIS FORM MUST BE TOTALLY LEGIBLE.

Public reporting burden for this collection of information is estimated to average: 37 minutes for generator, 15 minutes for transporter, 10 minutes for treatment, storage and disposal facility. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to CHIEF, INFORMATION POLICY BRANCH, PM-223, U.S. ENVIRONMENTAL PROTECTION AGENCY, 401 M STREET SW, WASHINGTON, D.C. 20460, and to the OFFICE OF INFORMATION AND REGULATORY AFFAIRS, OFFICE OF MANAGEMENT AND BUDGET, WASHINGTON, D.C. 20503.

INVOICE

CleanHarbors
ENVIRONMENTAL SERVICES®

REMIT TO:
Clean Harbors Env. Services
PO Box 3442
Boston, MA 02241-3442

OFFICE:
Clean Harbors Env Services Inc
3 Sutton Place
Edison, NJ 08817 - 0000
(732) 248-1997

If you have any questions regarding this invoice, please contact your customer service representative at the telephone number listed above

SOLD TO:
Alfonso Rolli
Sulzer Metco US Inc
Attn: Accounts Payable
1101 Prospect Avenue
Westbury, NY 11590

JOB SITE/GENERATOR:
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590

Job Description: DS-CH82414,METAL/CERAMIC POWDER & 90% WAT VIA CHES TO LANCAS

**** Payable in USD funds ****

Job Date	Invoice No	Customer	Sales Order	Purchase Order	Terms
07 Feb 2008	MS0876682	SUL025	MS1781872	ALFONSO ROLLI	NET 15 DAYS

SUMMARY BY LINE TYPE

Disposal	$1,350.00	
Equipment	$137.50	
Transportation	$1,400.00	
SUBTOTAL	**$2,887.50**	**USD**
TAX	**0.00**	
INVOICE TOTAL	**$2,887.50**	**USD**

Manifest Info	Item ID	Description	Billing Qty	Billing UOM	Unit Price	Amount
		07 Feb 2008				
BOL235394 A	DISPSL / B26B	METAL/CERAMIC POWDER & 90% WATER DS-CH82414	1,800.000	GAL	0.7500	$1,350.00
BOL235394	TRAN	TRANSPORTATION	1.000	EA	1,400.0000	$1,400.00
	PUMPTIME	Pumping time	1.250	HR	110.0000	$137.50
					SUBTOTAL	**$2,887.50**
					TAX	**$0.00**
					TOTAL	**$2,887.50**

3000405

SULZER METCO (US) INC.
MAR 17 2008
EHS DEPARTMENT

PLEASE RETURN A COPY OF INVOICE WITH PAYMENT - THANK YOU

WASTE CONTROL
SPECIALISTS LLC

December 4, 2007

Peter DiPietrantonio
Sulzer-Metco (US), Inc.
1101 Prospect Ave
Westbury, NY 11590

Dear Mr. DiPietrantonio:

Thank you for selecting Waste Control Specialists, LLC as your Treatment, Storage, and Disposal Facility. We value your business and hope to be of future service.

This letter serves as confirmation that we are in receipt of the waste described on the below referenced manifest. Enclosed, please find your signed original manifest indicating that the waste was received at the WCS Facility in Andrews, Texas on 11/27/2007.

WCS is committed to providing a level of customer service unequaled in the industry today. If you have any questions regarding this manifest, please do not hesitate to contact me at (888) 789-2783.

Again thank you for selecting Waste Control Specialists, LLC.

Sincerely,

Victoria Gutierrez
Manifest Coordinator

Re: Manifest
001251040JJK
N/A

Corporate
5430 LBJ Freeway, Ste. 1700
Three Lincoln Centre
Dallas, TX 75240
Ph. 972.715.9800
Fx. 972.448.1419

Facility
P.O. Box 1129
Andrews, TX 79714
Ph. 888.789.2783
Fx. 505.394.3427

METCO DIVISION PERKIN-ELMER
DUFFY AVENUE
ENVIRONMENTAL ISSUES

Water Pollution Control -

Waste water from a sink in the machine shop appears to discharge into a dry well through a grease trap and neutralization tank. Chronic acid etching solution and oils are handled in this area. Staining in the sink indicated these chemicals may be discharged to the dry well. All sinks in process area should be connected to the sanitary sewer. Waste oils and acids should be disposed of and managed as hazardous waste.

Our investigation of the waste lines revealed that the sink discharges to the storm water drain lines and then into the sump. Currently establishing an employee training program to include hazardous materials handling.

Air Pollution Control -

Emission points discharge VOCs from two spray paint booths and an oven. Paint samples were collected by an NCHD inspector to verify compliance with VOC emissions standards.

An inspector from Nassau County Department of Health, Office of Industrial Facility Regulation, collected paint samples on March 26, 1990. Paints currently in use at facility are water base. An inventory of the air emission points is maintained.

Hazardous Waste Management -

Hazardous waste containers are not labeled or sealed at the point of generation to prevent mixing of incompatible waste and improper disposal. Secondary containment, to prevent spills from reaching a nearby storm drain, is not present in the centralized drum storage area located at the loading dock. Hazardous wastes shipped offsite (October 1989 and April 1989) exceeded the 1000 kg limit for small quantity generators.

An inspector from Nassau County Department of Health office of Industrial and Hazardous Wastes Management toured the facility. Concerning secondary containment, obtaining absorbent material would surfice. The requirement of containers being labeled, dated and sealed is in the process of being addressed. We are in the process of setting up a waste monitoring system which will include weekly inspections of storage areas.

Hazardous Waste Management -

Waste degreasing solvent and waste rags are not properly classified. Rags contaminated with a hazardous waste must be disposed of as hazardous waste.

A waste container will be put into the waste accumulation area soley for the purpose of collecting contaminated rags.

Hazardous Waste Management -

Metco is not in compliance with the provisions of The Nassau County Health Department (NCHD) Hazardous Waste Ordinance:

Central storage areas do not have containment.

Containers in storage are not labeled with DOT designations.

Training is not provided to workers or supervisors involved in hazardous mateials handling practices.

Annual reports have not been submitted to NCHD.

> Secondary containment, employee training, proper labeling and annual reports are currently being addressed.

Past Disposal Storage/Practices -

Facility industrial wastes were discharged to a septic system. This system was abandoned in 1986 without documentation on the impacts of discharging industrial wastes to the environment.

A storm water basin receives water from the facility cooling system. The source of this water is an onsite contaminated process well. The well was sampled by NYDEC and shown to be contaminated with volatile organics. The source of this contamination has not been documented.

Underground storage tanks were removed without documentation on the potential impact to soil and ground water.

> The underground storage tanks were removed from all three facilities under the guidance of a Nassau County Department of Health representative (1987).
>
> Upon receiving proper approval, we can proceed with our environmental consultants and conduct an investigation covering past disposal/storage practices at our facilities.

Community Right To Know -

A (Tier II) chemical inventory was not submitted to the local fire department.

> Reviewing and revising the distribution of reports for SARA Title III Community-Right-To-Know.

Joe Mercurio
06/29/2000 06:35 AM

To: John DeTomasso/SM/Sulzer@Sulzer
cc: Kevin Rodgers/SM/Sulzer@Sulzer
Subject: Material and fluid usage

John,

Hope this helps. Have you received the information from Miller yet?

Regards,
Joe

---------- Forwarded by Joe Mercurio/SM/Sulzer on 06/29/2000 07:47 AM ----------

John Paukovits
06/28/2000 03:47 PM

To: Joe Mercurio/SM/Sulzer@Sulzer
cc:
Subject: Material and fluid usage

Cutting Fluids
165 gal. water soluble
1650 gal. mineral oil

Copper bar stock
7600 feet

Aluminum bar stock
6800 feet

Stainless steel bar stock
5900'

Brass Bar stock
8200 feet

Actrel 3349L
440 gal. purchased
??? gal. recycled

Safety Kleen 105
1650 gal purchased
??? gal recycled

⇒ Need purchasing records for QTYs in lbs for the following materials

1) Copper barstock
Brass bar stock
Aluminum bar stock
Stainless steel barstock
2) Propane cylinders.
Safety Kleen 105
Actrel 3324L solvent.
Cutting fluids - mineral oil
Diesel fuel for truck + skidsteer

powders - Nickel
Chromium
Chromium oxide
Chromium carbide
Nickel carbide
Aluminum
Aluminum oxide
Tungsten carbide cobalt
~~Alloy bond?~~

HAZ-MAT training - Quick training.

⇒ purchase a DOT HAZMAT video.

⇒ labeling - All dip tanks, + secondary containers.

⇒ E-mail Gail Keller requesting 2nd May 23rd training session at HAZMAT Dold

⇒ Need fire extinguisher training refresher class

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Hi John -

Attached please find the manufactured powders produced last year.

This represents only the powders produced by Miller and not the resale materials.

If you have any questions or need anything further, just give me a call.

Key :

B - Blends

C - Crushed

H - Hosped

O - Ceramic Spray Dry Only

P - Screened in Packaging to size

T - Tungsten Oven Only

TC - Tungsten Oven + Crush

W - Wire

870 Fields had numeric overflow during the report.

* IQQ5028

Ellen,

MILLER

Powders - Nickel 195,000 7440-02-0
Chromium 7440:47-3
Chromium Oxide 5800
Chromium Carbide 112,500
Nickel Carbide
Aluminum 7429905 55,800 1344-28-1
Aluminum Oxide 69,000
Tungsten Carbide Cobalt 220,900
NO 96 (COBALT)

Sorry no cover sheet.

Thanks,

John

Chromium + Nickel Carbide are Troy
This is for Miller products only.

Ellen,

Powders - Nickel 195,000
Chromium
Chromium Oxide 5800
Chromium Carbide 112,500
Nickel Carbide
Aluminum 55,800
Aluminum Oxide 69,000
Tunasten Carbide Cobalt 220,900

Sorry no cover sheet.

Thanks,

John

Chromium + Nickel Carbide are Troy
This is for Miller products only.

TRIS Query Results

Only TRIS facility information was searched to select facilities

EPA FACILITY ID: Equal To: **NYD981558570**
Results are based on data extracted on JUL-06-2001
Note:
Click on the underlined TRI_FACILITY_ID value to view a detailed report on the facility.
Click on the underlined EPA FACILITY ID value to view EPA Facility information for the facility.
Click on the underlined SUBMISSIONS value to view the list of DCN's for each of the TRI Reporting Year.

Go To Bottom Of The Page

List of EPA-Regulated Facilities in TRI

TRI FACILITY ID	EPA FACILITY ID	FACILITY NAME	ADDRESS	COUNTY NAME	SUBMISSIONS
11801PRKNL220MI	NYD981558570	SULZER METCO (US) INC.	220 MILLER PL. HICKSVILLE, NY 11801	NASSAU	50

Go To Top Of The Page
Total Number of Facilities Displayed: 1

Joe Mercurio
06/29/2000 06:35 AM

To: John DeTomasso/SM/Sulzer@Sulzer
cc: Kevin Rodgers/SM/Sulzer@Sulzer
Subject: Material and fluid usage

John,

Hope this helps. Have you received the information from Miller yet?

Regards,
Joe

---------- Forwarded by Joe Mercurio/SM/Sulzer on 06/29/2000 07:47 AM ----------

For year 2000

John Paukovits
06/28/2000 03:47 PM

To: Joe Mercurio/SM/Sulzer@Sulzer
cc:
Subject: Material and fluid usage

Cutting Fluids
165 gal. water soluble 3B – 165 gals.
1650 gal. mineral oil 3DB – 1650 gals

Copper bar stock
7600 feet ~~5200'~~ 14,140'

Aluminum bar stock
6800 feet ~~[illegible]~~ 8234'

Stainless steel bar stock
5900' ~~6500'~~ 6045'

Brass Bar stock
8200 feet ~~[illegible]~~ 7212'

Actrel 3349L 8B – 440 gals
440 gal. purchased ~~[illegible]~~
??? gal. recycled

Safety Kleen 105
1650 gal purchased – 1584 gals. ~~[illegible]~~
??? gal recycled

SULZER METCO (US), INC.
Miller Place Facility

Waste Profiles

Old Profile #	New Profile #	Process Generating Waste	Name of Waste	Haz, or Non-Haz USEPA Waste	Charge Number
3388-A	6SMN-001	Tower 1	Ceramic	Non Hazardous	
3388-B	6SMN-002	Tower 1 and 2	Ceramic & Tungsten Carbide, Cobalt	Non Hazardous	
3388-C	6SMN-002	Tower 2 and 4	Ceramic & Tungsten Carbide Cobalt	Non Hazardous	
3388-D	6SMN-003	Cladding	Ceramic, Chromium Oxide	Hazardous	
3388-E	6SMN-002	Spray Dry and Packaging	Ceramic, Tungsten Carbide, Cobalt, & Metals	Non Hazardous	
3388-F	6SMN-004	Wire Line and Maintenance	Waste Oil	Non Hazardous	
3388-G	6SMN-005	Packaging	Ceramic, and Metal Powder	Non Hazardous	
3388-H	6SMN-005	Inspection and Packaging	Ceramic, and Metal Powder	Non Hazardous	
3388-I	6SMN-005	Cladding and Warehouse	Ceramic, and Metal Powder	Non Hazardous	
3388-J	6SMN-005	Cladding and HOSP Screening	Ceramic, and Metal Powder	Non Hazardous	
3388-K	6SMN-001	HOSP 1	Ceramic Powder	Non Hazardous	
3388-L	6SMN-001	HOSP 2	Ceramic Powder	Non Hazardous	
3388-M	6SMN-006	Cladding	Aluminum, Graphite Metal	Non Hazardous	
3388-N	6SMN-007	Wire Line	Petroleum Distillate - Super Agitine	Hazardous	
3388-O	6SMN-008	Coolant	Non-Regulated Coolant	Non Hazardous	
3388-P	6SMN-009	Out of Service Material	Waste Paint Related	Hazardous	
3388-Q	6SMN-010	Water, Alcohol Graphite from Wire Line	Waste Flammable Liquid NOS	Hazardous	
N/A	6SMN-011	QA Lab	Waste Spent Acids	Hazardous	
N/A	6SMN-012	Nonhaz Baghouse Cleanout	Baghouse filters, metal and ceramic powder	Non Hazardous	
3388-R	6SMN-011	Quality Assurance Lab	Mixed Spent Acids	Hazardous	

KEY:
Shading indicates an obsolete profile

One Time Disposal Waste Profiles

Profile Number	Process Generating Waste	Name of Waste	Haz, or Non-Haz USEPA Waste	Profile Status	Charge Number
3388-1	Paint Locker Cleanup	Oil and Water Mixture	Non Hazardous	Finalized	
3388-2	Paint Locker Cleanup	Water, Salts, and Metals Mixture	Non Hazardous	Finalized	
3388-3		Water, Naptha, Oil mixture	Hazardous	Finalized	
3388-4					
3388-5		Water, Naptha, Oil mixture	Hazardous	Finalized	
3388-6					
3388-7					
3388-8					
3388-9					
3388-10					
3388-11					
3388-12					
3388-13					

FILE:PROFLMP.DOC

ENVIRONMENTAL SERVICES

☒ New ☐ Amendment

NAME OF WASTE STREAM: Metal/Ceramic Powders

MATERIAL PROFILE NO.: LSMN-005

A. GENERATOR INFORMATION

Generator Name: Sulzer Metco

Facility Address: 220 Miller Place

City/County: Hicksville

State: NY Zip Code: 11801

USEPA ID#: NYD981558570

State ID#:

Technical Contact: Joe Mercurio

Telephone (516) 338-2334 EXT.

Fax ( )

Billing Name

Billing Address

City State Zip Code

Attention

Telephone ( ) EXT.

B. DOT Shipping Name: Non-regulated Material

Hazard Class

UN/NA No. Packing Group RQ

C. RCRA RCRA Non Hazardous/Exempt? ☒ Yes ☐ No Process Generating: Industrial filters

State Waste Codes: EPA Waste Codes: None

D. ANNUAL REPORT CODES

SIC Code:

Source Code: A

Form Code: B

Origin Code:

System Type: M

E. OTHER COMPONENTS

	No	Yes	Total ppm
PCB's	☒	☐	
Cyanides	☒	☐	
Sulfides	☒	☐	
Pesticides	☒	☐	
Phenolics	☒	☐	
Dioxins	☒	☐	
Halogens	☒	☐	%

F. PHYSICAL CHARACTERISTICS AT 70º F

1. Infectious or Biological Waste? ☐ Yes ☒ No
2. NRC Regulated Radioactive? ☐ Yes ☒ No
3. Reactivity ☒ None ☐ Water Reactive ☐ Pyrophoric ☐ Shock Sensitive ☐ Cyanides ☐ DOT Explosive ☐ Sulfides ☐ Other

☐ Gas (Cylinder) ☒ Solid 100 %
☐ Aerosol ☐ Sludges %
☐ Lab-Pack ☐ Free Liquids %
100%

Layers: ☒ Single Layered ☐ Bi-layered ☐ Multi-layered

Viscosity: ☐ Low ☐ Medium ☐ High

Odor: ☒ None ☐ Mild ☐ Strong Describe:

Color/Appearance: gray

Weight
Density lbs./gal. (US, liq) lbs./cu. foot
Dry Weight ☐ <1.0% ☐ 5-20% ☐ 1-5% ☐ 20-100%

pH ☒ N/A ☐ 0-2 ☐ 4.1-10 ☐ ≥ 12.5 ☐ 2.1-4 ☐ 10.1-12.4 Exact

Flash Point (liquid only)
☐ <73ºF (23ºC)
☐ 73-140ºF (23-60ºC)
☐ 142-200ºF (61-93ºC)
☐ >200ºF (93ºC)
☒ N/A

Boiling Point
☐ <95ºF (35ºC)
☐ >95ºF (35ºC)
☐ N/A

BTU/Lb.

Dermal Toxicity LD_{50} (Mg/Kg)
☐ ≤40 ☐ >200, ≤1000
☐ >40, ≤200 ☐ >1000
4. Material poisonous by inhalation? ☐ Yes ☐ No

Oral Toxicity LD_{50} (Mg/Kg)
☐ ≤5 ☐ >5, ≤50
Solids: ☐ >50, ≤200 ☐ >200
Liquids: ☐ >50, ≤500 ☐ >500

5. Is this waste stored in vented drums? ☐ Yes ☒ No
6. Is this waste pumpable? ☐ Yes ☒ No
7. Is this waste polymerizable? ☐ Yes ☒ No
8. Is waste stream subject to the National Emission Standards for Benzene Waste Operations (40 CFR 61 Subpart FF)? ☐ Yes ☒ No
9. Is this waste regulated as an ozone depleting substance (40 CFR part 82)? ☐ Yes ☒ No
10. Does this waste contain scrap metal pieces greater than 2 inches in size? ☐ Yes ☒ No

G. METALS
☒ NONE ☐ TCLP (MG/L) ☐ TOTAL (PPM)

	Reg. Limit	Below	Above	Range
Arsenic	5 mg/L			
Barium	100 mg/L			
Cadmium	1 mg/L			
Chromium	5 mg/L			
Copper				
Lead	5 mg/L			
Mercury	0.2 mg/L			
Nickel	134 mg/L			
Selenium	1 mg/L			
Silver	5 mg/L			
Zinc				
Others:				

H. PHYSICAL/CHEMICAL CONSTITUENTS

Metal & Ceramic Powders 100 %

Containing: zirconium oxide, yttrium oxide, cerium oxide, magnesium oxide, titanium oxide

100 %

(Attach All MSDS, Sample Analysis and Additional Info.)

I. ANTICIPATED VOLUME

Qty.	Container	Qty.	Container
☐	5 gl. pail	☐	Cubic Yard Box*
☐	15 gl. carboy	☐	Super Sack*
☐	30 gl. drum	☐	Rolloff Dump Trailer*
☒ 10	55 gl. drum	☐	Tanker*
☐	85 gl. drum	☐	Other

Per ☐ 1 Time ☐ Week ☐ Month ☐ Year ☒ Other qtr

(*) Is this waste regulated as a Marine Pollutant (49 CFR 171.8)? ☐ Yes ☒ No

Generator's Certification:
I hereby certify that the above and attached description is complete and accurate to the best of my knowledge and ability to determine that no deliberate or willful omissions of composition properties exist and that all known or suspected hazards have been disclosed. I certify that the materials tested are representative of all material described by this profile.

X Michael / A.

P2SUL004586

Joe Mercurio
06/29/2000 06:35 AM

To: John DeTomasso/SM/Sulzer@Sulzer
cc: Kevin Rodgers/SM/Sulzer@Sulzer
Subject: Material and fluid usage

John,

Hope this helps. Have you received the information from Miller yet?

Regards,
Joe

---------- Forwarded by Joe Mercurio/SM/Sulzer on 06/29/2000 07:47 AM ----------

John Paukovits
06/28/2000 03:47 PM

To: Joe Mercurio/SM/Sulzer@Sulzer
cc:
Subject: Material and fluid usage

Cutting Fluids
165 gal. water soluble
1650 gal. mineral oil

Copper bar stock
7600 feet 8300'

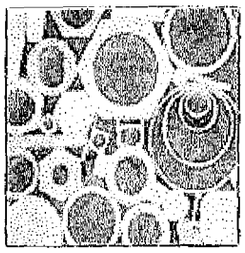
Aluminum bar stock
6800 feet 7400'

Stainless steel bar stock
5900' 6500'

Brass Bar stock
8200 feet 9000'

Actrel 3349L
440 gal. purchased ~~4500~~ G
??? gal. recycled

Safety Kleen 105 2000 G
1650 gal purchased
??? gal recycled



ANCHOR BRONZE & METALS, I

TEL 440-899-1635 FAX 440-899-1636 BRASS - BRONZE - COPPER - E

COPPER & COPPER ALLOY PRODUCTS

WROUGHT PRODUCTS BRASS - BRONZE & COPPER

CONTINUOUS CAST COPPER ALLOY PRODUCTS

CENTRIFUGAL CAST COPPER ALLOY PRODUCTS

CONTINUOUS BRONZE PRODUCTS

MADE TO ORDER COPPER ALLOYS

FINISHED MACHINE PARTS

CONTINUOUS CAST GRAY & DUCTILE IRON

COPPER & BRASS ELECTROPLATING ANODES

CONTINUOUS CAST PRODUCTION METHODS

QUALITY CONTROL PROCEDURES

USE COPPER ALLOY SAVINGS

WORLDWIDE COPPER ALLOY EQUIVALENTS

HYDRAULIC & PNEUMATIC APPLICATIONS

POWER TRANSMISSION APPLICATIONS

NEW PRODUCTS & IMPROVEMENTS

SALES & SERVICE INFORMATION

TECHNICAL SUPPORT

PHONE INQUIRY FORM

HOME PAGE

Home Page Go!

Copper Alloy No. C46400

(Naval Brass)

Chemical Composition % by weight

Element	Nominal	Minimum	Maximum
Copper	60	59	62
Lead	-	-	.20
Iron	-	-	.10
Tin	.8	.5	1
Zinc	39.2	Remainder	
Arsenic**	-	.02	.06
Sb or P**	-	.02	.10

* The uninhibited alloy is is copper alloy no. C46400.

** Arsenic, Antimony and Phosphorus inhibited alloys are identified respectively copper alloy nos. C46500, C46600 and C46700.

Applications

Hardware: Aircraft turnbuckle barrels, balls, bolts.

Industrial: Condenser plates, welding rod.

Common Fabrication Processes

Blanking, drawing, forming and bending, heading and upsetting, hot forging a pressing, hot heading and upsetting, shearing.

Mechanical Properties

Typical for 1" Rod Half Hard (20%) Temper

Hardness*	Rockwell B Scales

Tensile Strength**	KSI
Yield Strength** (.5% EAU)	KSI
Elongation**	% in 2 inch

**Test values are nominal approximations and depend on specimen size and orientation.

Physical Properties

Thermal Conductivity	BTU/ (sq ft-ft-hr-F)	6
Specific Heat	BTU/lb/°F @ 68F	.0
Thermal Expansion	Per °F from 68 F to 572 F	.000(
Density	lb/cu in @ 68 F	.3(
Electrical Conductivity* (Annealed)	% IACS @ 68 F	2
Modulus of Elasticity (Tension)	KSI	15,(

*Volume basis

Fabrication Properties

Capacity for being cold worked	Fair
Capacity for being hot formed	Excellent
Machinability rating (Free Cutting Brass=100)	30
Suitability for being joined by:	Soldering/Excellent
	Brazing/Excellent
	Oxyacetylene Welding/Good
	Gas Shielded Arc Welding/Fair
	Coated Metal Arc Welding/Not Recommended
Resistance Welding	Spot/Good
	Seam/Fair
	Butt/Good

The values listed above represent reasonable approximations suitable for general engineering use. Due to commercial variations in composition and to manufacturing limitations, they should not be used for specifica purposes. See applicable A.S.T.M. specification references.

Anchor Bronze & Metals, Inc. - 472 Oakmoor Ave. - Bay Village, Ohio 44140 - Telephone: 440-899-1635 - Fax: 440-899-1636 - E-mail: info@anchorbronze.

Forms Completed by Waste Disposal, Inc.

Form IC

Waste Disposal, Inc. is required to file the 1993 Hazardous Waste Report since the site treated, stored, disposed, or recycled RCRA hazardous wastes in units subject to RCRA permitting requirements during 1993. See inside front cover, WHO MUST FILE. All sites required to submit this report must fill out Form IC. The EPA identification number appears below the site name.

Sections I-III	collect information about the site's location address, mailing address, and contact person.
Section IV	certification is signed after all the report forms are filled out.

Global Risk Consultants

Global Risk Consultants Corp.
447 South Harvey
Plymouth, MI 48170
734.459-1175
Fax 734.459-7237

April 20, 2000

Mr. Don Gratton
Plant Engineer
SULZER METCO
1972 Meijer Drive
Troy, MI 48084

RE: Loss Prevention Report
Troy, Michigan
File No. 705 0001

Dear Mr. Gratton:

Enclosed is the Loss Prevention Report resulting from my March 9, 2000 visit to your facility.

Per our agreement with Sulzer US Holdings Risk Management, please respond in writing to the recommendations within 60 days of receiving this report. Your response should be mailed to Mr. Peter Rullo, Global Risk Consultants. Metro Park, 99 Wood Avenue South, Iselin, NJ 08830-4114.

Thank you for your preparation and assistance to Fred D'Ambrosio and myself.

Please feel free to contact me at (734) 459-1175, if you have any comments or questions regarding this report or my inspection visit.

Sincerely,

Paul G. Dobbs

Paul G. Dobbs
Senior Consultant

PGD/kb
Enclosure

cc: F. D'Ambrosio/Frenkel/NY
K.LaPierre/Sulzer/Troy
S.Makowski/Sulzer/Troy
M. Lydon/Sulzer/Westbury, NY
R. Grisham/ Winterthur/Dallas
P.Rullo/K.Moore/GRC/NJ
Files

Global Risk Consultants

LOSS PREVENTION REPORT

Fire and Associated Perils

for

SULZER METCO
1972 Meijer Drive
Troy, Michigan, USA 48084
File No. 705 0001

Date Visited: March 9, 2000

Prepared By: Paul G. Dobbs
Plymouth, Michigan, District Office
(734) 459-1175

Conferred With: Mr. Don Gratton, Plant Engineer
Mr. Frank D'Ambrosio, Frenkel & Co, Inc

Summary:

This facility manufactures various metal powders used by the thermal spray industry. The predominant construction is noncombustible (MD-2 roof construction assumed). Automatic sprinkler protection is provided. Fire protection water is supplied by one 6-inch connection to a 12-inch city water main. Central station alarm service is provided. Special hazards include metal dust collecting, melting furnaces, flammable liquid storage and handling, and warehousing of raw materials, in process goods, and finished goods.. They are generally well cared for. Written human element programs have been established. The Troy Fire Department services this facility. Public hydrants are available for suction. External exposures are considered light.

Changes and Comments:

Automatic sprinkler protection has been extended into the hydrogen plasma spray booth area. This complies with Recommendation 98-1, which has been removed from this report.

All of the equipment and operations associated with the Codep process have been eliminated from this plant. This area has since been remodeled into a plant maintenance shop area. Recommendation 98-2, which addressed the equipment associated with the Codep operation, has been deleted from the report since it is no longer applicable. However, the new maintenance shop operations that have been established in that area do warrant sprinkler protection, and therefore a new item, Recommendation 00-01, has been added to this report.

This report does not purport to set forth all hazards nor to indicate that other hazards do not exist. However, we urge that recommendations presented, if any, be given serious consideration. We would be pleased to discuss alternative solutions.

Changes and Comments: continued

Some monthly visual inspections of the portable fire extinguishers are being made in the lab area, however none are being done elsewhere in the plant. A program is currently being set up to accomplish this. Attention is directed to Recommendation 00-02. An outside contractor is responsible for the annual maintenance inspection and testing of these units.

A plant emergency organization is currently in the process of being set up. An evacuation plan has been established and evacuation routes have been posted throughout the plant. Audible alarms have been provided to alert the employees. A new safety audit committee has just recently been established and they are in the process of reviewing all the standard emergency procedures. It was noted that employees have not recently received any portable fire extinguisher training. Attention is directed to Recommendation 00-03. A written hot work permit system has been previously designed at this plant. After reviewing that system, it was found to be satisfactory and should continue to be used. Sprinkler control valves and waterflow alarms are being inspected and tested on a monthly basis and this is satisfactory. Smoking is no longer allowed anywhere inside the building.

Two new single rows of rack storage have recently been added near the spray area. These racks contain storage of various powders in plastic jars in cartons on wood pallets that are stored in the racks up to 18 ft high. It is expected that the existing ceiling sprinkler protection would not be adequate for extended storage of this configuration. However, due to the very limited extent of the current situation, it is considered marginally acceptable. If any additional storage of this nature is added, we should be consulted so that a complete evaluation of the existing protection can be made and appropriate recommendations developed.

Recommendations – Human Element:

00-02 **Upgrade Self Inspection Program.** It is understood and recommended that the existing recorded self inspection program will be upgraded to include the monthly visual inspection of all of the portable fire extinguishers. These inspections should determine that all extinguishers are in their proper location and that they appear to be operational.

00-03 **Fire Extinguisher Training.** An annual training program should be established for all employees to receive instruction, preferably hands on, in the use of the plant's portable fire extinguishers and the established procedures to follow in an emergency.

Recommendations – Physical Protection

00-01 **Extend Sprinkler Protection**. Automatic sprinkler protection should be extended into the new maintenance shop area. The current occupancy only warrants ordinary hazard protection and this can be extended from the existing sprinkler piping nearby, as long as the pipe sizes are appropriate.

This report does not purport to set forth all hazards nor to indicate that other hazards do not exist. However, we urge that recommendations presented, if any, be given serious consideration. We would be pleased to discuss alternative solutions.

Recommendations – Physical Protection continued

98-3 **Provide Sprinklers in Office and Labs.** In order to provide complete protection of the plant facilities and due to the combustible occupancy, automatic sprinkler protection should be extended to the office area and labs at the south end of the building. These sprinklers can be installed on a light hazard basis and calculated to provide a density of 0.10 gpm/sq.ft over an area of 1500 sq.ft.

98-4 **Extend AFA to Computer Room.** Automatic fire alarms (smoke detectors) should be tied into the existing central station alarm system (ADT).

CONSTRUCTION

The predominant construction at this plant is noncombustible, (MD-2 roof construction assumed). The roof covering is a ballasted, single-ply membrane. The buildings are all one and 1=2 stories high. Although there are considerable internal walls and compartmentalization of this building, it is considered one fire area.

PROCESSES

This facility manufactures various metal powders used by the thermal spray industry. The metal powders produced include aluminum, titanium, nickel, cobalt and iron. All of the raw materials are received by truck from outside suppliers. Some powder product is also purchased from an outside company in Long Island, NY, which is blended with the powder produced at this facility to create a finished product. A total of approximately one million pounds per year of powdered metal is produced. All production is to fill specific customer orders. There are two other production operations at this facility beside the actual production of metal powders. These are the cladding operation and a tape and paste operation.

In the high bay area of the plant, there are three electric induction furnaces, two with the capacity of 1000, and one with 300 pounds capacity. The required metal alloy is melted in the furnace and then poured through an orifice into a stainless steel tank. As the molten metal flows through the orifice, it is blown with an inert gas, which atomizes the metal into a powder. This powder is then collected from the bottom of the tanks, screened and packaged. There are 9 screening lines used to classify the metal powder. From these lines, the powder is packaged into plastic 5 and 10 pound containers, or in up to 1000 pound capacity hoppers. These are then stored in the warehouse area to await shipment to the customer.

In the cladding operation, a nickel-iron core material is used and a binder is mixed with aluminum or other powders to adhere to the core. This core material is usually purchased from outside suppliers, such as Miller Place, Long Island, NY. The binder can be either a water or lacquer-based material, which will adhere the aluminum (or other powder) to the core powder. The mixing is done in one of four steam-heated mixers, the largest of which has a 200-gallon capacity, 2 have a 40-gallon capacity, and one is a 25-gallon mixing bowl. The finished product from this mixing operation then goes through 4 screening lines to size the product, which is then packaged into the regular 5 and 10 pound plastic containers or in bulk containers as necessary.

This report does not purport to set forth all hazards nor to indicate that other hazards do not exist. However, we urge that recommendations presented, if any, be given serious consideration. We would be pleased to discuss alternative solutions.

SPECIAL HAZARDS

Metal Dust Collection: There is one cyclone-type dust collector associated with the plasma operation . It collects titanium and aluminum dust from the blending operations. This dust collector is located outside of the plant and is connected to the operation by metal ductwork. Cleaning of the ductwork is facilitated by several clean-out openings.

There is a bag-type collector, also located outside, associated with the plasma spraying operation. This dust collector normally has an argon-nitrogen atmosphere, and standard operating procedures require all the ducts to be taken down and cleaned prior to the start-up of any production run.

Melting Furnaces: There are 3 induction heated furnaces, which are used to form the basic metal powders produced by this plant. Metals used include iron, nickel and cobalt, as well as some aluminum and titanium. Up to 1000 pounds of metal is placed inside a furnace, which is electrically heated up to 3100° F. A closed loop circulating water system provides cooling for the furnace. High temperature interlocks on the cooling water as well as the furnace itself are provided and interlocked to shut down the furnace in case of excess temperature. Each furnace is located directly above the associated atomizing tank. Small hydraulic units (with a maximum 30-gallon capacity oil storage tank) are used to tilt the furnace in order to pour the liquid metal into the tanks. Nitrogen or argon gas at 600 psi is used to atomize the metal into a fine powder as it is poured into the tanks. Some furnaces use argon gas for inerting and those furnaces are also equipped with oxygen analyzers.

Flammable Liquid Storage and Handling: Bulk storage of all flammable and combustible liquids is located in a pre-fabricated storage building located on the north side of the plant. This building is designed for flammable liquid storage and separation from the plant provides adequate protection.

Warehousing: Raw materials, in process goods and finished goods are stored in several areas of the plant. There is no separate warehouse building or area.

Various raw materials, mostly metal in cardboard and small plastic containers are stored on wood pallets in single and double row racks up to 18 ft high in the east side of the plant. These commodities are regarded as Class II and some Class III per NFPA 231-C. Considering all Class III storage, NFPA-C requires a ceiling sprinkler density of 0.25 gpm/sq.ft. over an area of 3100 sq.ft. when using 286°F rated heads. This capacity is available.

Various metal powders in metal containers are stored in metal racks up to 20 feet high near the center of the plant manufacturing area. The non-combustible nature of this storage would not require sprinkler protection. Ceiling sprinklers are provided in the area. Most storage is in open top containers. Due to the nature of the material being stored, the racks are of very substantial construction and the possibility of water accumulation in the open containers is insignificant to the overall weight of the storage. This storage is adequately protected.

Polyethylene containers are being stored in cartons in piles up to 6 feet high. Based on NFPA 231 and 13, the existing ceiling sprinklers, designed for a density of 0.25 gpm/sq.ft. over an area of 3120 sq.ft, provides adequate protection for this storage arrangement.

This report does not purport to set forth all hazards nor to indicate that other hazards do not exist. However, we urge that recommendations presented, if any, be given serious consideration. We would be pleased to discuss alternative solutions.

BUSINESS INTERRUPTION FEATURES

Business interruption features in connection with boilers, electrical systems, refrigeration systems, cooling towers and computer installations have been covered under the *Common Hazards* of this report. There are no specific production features which if completely lost would cause a loss of 33% or more production on an annual basis.

BUSINESS INTERRUPTION INTERDEPENDENCY

Based upon information provided by plant management, there appears to be no significant interdependency between this plant and other plants within the corporation.

This report does not purport to set forth all hazards nor to indicate that other hazards do not exist. However, we urge that recommendations presented, if any, be given serious consideration. We would be pleased to discuss alternative solutions.

Fire Protection Water Supply Data:

Water Sources Other Than Fire Pumps:

One 6-inch connection to a 12-inch city water main in Meijer Drive.
This 12-inch main is part of a 12-inch grid throughout this area of the city.

Other Sources Test Data:

DATE	BY	SOURCE TESTED	FLOW LOCATION	PRESSURE LOCATION	TEST DATA			COMMENTS
					FLOW (GPM)	STATIC (PSI)	RESID. (PSI)	
8/97	City	City water	Hydt @ front of plant	1st hydt E of plant	1840	60	52	

Note: Where fixed installation of equipment is suggested, submit plans for review prior to installation. All fixed or portable systems/equipment recommended should be approved and/or listed by a recognized testing laboratory, unless specifically agreed otherwise.

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LOSS ESTIMATES

ANTICIPATED PROBABLE LOSS:

P.D. - $400,000 B.I. - $25,000 Total -$425,000

Under APL conditions, it is presumed that all fire protection equipment is in service and operating properly, and prompt fire fighting response is realized. Under these conditions, the most severe loss would involve a fire in the rack storage area near the spraying operation. Ceiling sprinklers would not be able to halt the spread of fire throughout the single rack. However, due to the limited nature of this storage, the sprinklers will contain the fire and the fire department will achieve final extinguishment.

The total PD loss will amount to $400,000.

As a result of this loss, about 4% of plant production would be lost while clean-up is accomplished.

PROBABLE MAXIMUM LOSS:

P.D. -$3,300,000 B.I. - 12.5% Total -$3,300,000

The PML considers one unit of the fire protection equipment out of service and resultant delayed response by fire fighters. With the only sprinkler system protecting this plant impaired, a fire starting in the shipping and receiving storage racks will be able to spread throughout these racks quickly. The fire would spread to the roof and the surrounding area. There would be somewhat delayed notification of the fire department due to the impairment of the sprinkler system. They would eventually respond and be able to bring the fire under control due to the low level of combustible continuity in the plant. There would be significant damage to the building in the area of the rack storage, with decreasing damage to the surrounding building and equipment.

Total damage to the building is expected to be about 25%. Machinery and equipment damage will be about 20%, with another 40% damage to stock. The total PD loss will therefore be [(25% x $1,530,000) + (20% x $6,800,000) + (40% x $4,000,000)] or about $3,300,000.

As a result of this loss, all production would be lost for 1 month while building repairs are made and the building could be reoccupied. Another 50% of production would be lost for the next month until equipment could be replaced. The total BI loss would therefore be [(100% x 1/12) + (50% x 1/12)] or 12.5% of the total BI exposure.

This report does not purport to set forth all hazards nor to indicate that other hazards do not exist. However, we urge that recommendations presented, if any, be given serious consideration. We would be pleased to discuss alternative solutions.

LOSS ESTIMATES continued

MAXIMUM FORSEEABLE LOSS:

P.D. -$10,700,000 B.I. - 69% Total -$10,700,000

The MFL considers all protection out of service and no fire fighting response. Under these conditions, a fire starting in the storage racks in the shipping and receiving area would be able to spread through the racks. With no sprinkler protection and no manual fire fighting, the fire will spread to the surrounding areas and across the combustible rated roof, eventually involving the entire building. Damage to the building will be 80%. Machinery and equipment will also be 80% lost, and 100% of the stock will be lost.

The PD loss will therefore be [(80% x $1,530,000) + (80% x $6,800,000) + (100% x $4,000,000)] or about $10,700,000.

The cost of debris removal following the above described incident is estimated at 5% of the property damage. In addition, an inflation factor of 3.45% (representing the length of time from the calculation of insurable property values to restoration of property) is applied. The total PD loss is therefore ($10,700,000 x 108.45%) or about $11,600,000.

As a result of this loss, a new building will need to be located and replacement equipment purchased and installed. Some production (25%) could start in as little as 3 months, with materials purchased from outside suppliers. Production would be increased to 50% after 6 months, but it would take one full year to replace the furnaces and related equipment to restart the powder manufacturing. The total BI loss would therefore be [(100% x 3/12) + (75% X 3/12) + (50% x 6/12) or approximately 69% of the annual BI exposure.

PGD

This report does not purport to set forth all hazards nor to indicate that other hazards do not exist. However, we urge that recommendations presented, if any, be given serious consideration. We would be pleased to discuss alternative solutions.

VALUES (100%)
(000's omitted)

PROPERTY DAMAGE:		$12,330
Buildings	$ 1,530	
Machinery & Equipment	6,800	
Stock	4,000	
BUSINESS INTERRUPTION:		N/A
TOTAL		$12,330

This report does not purport to set forth all hazards nor to indicate that other hazards do not exist. However, we urge that recommendations presented, if any, be given serious consideration. We would be pleased to discuss alternative solutions.

METCO DIVISION PERKIN-ELMER
DUFFY AVENUE
HEALTH AND SAFETY ISSUES

Respiratory Protection Program -

The Metco respiratory protection program does not meet OSHA requirements. Federal regulations (OSHA) require employers issuing repirators to develop and maintain comprehensive respiratory program which includes evaluation of exposure levels, select the appropriate protective equipment and performance of routine testing and training in the proper use and maintenance of respiratory protective equipment. Metco is issuing respiratory equipment without implementing a comprehensive program as defined by the OSHA regulations. Employee exposures have not been fully evaluated and documented by an industrial hygiene survey.

Management met with a technical representative from 3M and discussed the various types of materials used at the facility, employee exposures and OSHA regulations. 3M services include training and fit testing of employees on site, and a written respirator program that can be adapted to any facility.

OSHA Recordkeeping -

OSHA 200 Accident and Illness Logs facility must be separated for each Metco facility. Additionally, incidents of employee hearing loss should be recorded as an occupational illness.

The Human Resources staff has already separated the OSHA 200 Accident and Illness Logs by location.

Hazard Communication Program -

Hazard Communication plan does not meet OSHA requirements. The written plan is not specific to the individual chemicals and hazards found in each of the three Metco facilities. New employees have not been trained (since 1986) in chemical hazards before entering the work place.

The Hazardous Communication Program with its various requirements, site specific written plan, employee training and notification to contractors is currently being addressed. If necessary, an environmental consulting firm proficient in this area will assist us.

Hearing Conservation Program -

Potential noise exposures may be associated with the operation of plasma spray booths, turret and grinding machines. Written documentation (memos to corporate) indicate noise levels in the spray booth exceed 130 dB. OSHA is authorized to cite noise exposures in excess of 115 dB, and to require a hearing conservation program for levels above 85 dB. Metco may not be in compliance with OSHA requirements for a hearing conservation program.

We have all of the components in place for a hearing conservation program. We are currently working with Liberty Mutual to assess indoor noise levels and Perkin-Elmer to prepare a written program.

Employees Exposed To Toxic Substances -

Employees are exposed to a variety of hazardous chemicals including oils, solvents, toxic metals, dusts and particulates. OSHA holds employers responsible for ensuring employees are adequately protected from hazards in the work place. Metco has not documented that its current program is protective of employees. All of Metco's protection programs (hearing, respiratory and medical monitoring) should be supported by accurate measures of exposure levels.

With the assistance of Liberty Mutual and if necessary an environmental consulting firm, industrial monitoring can be performed and action taken based upon the results.

Personal Protective Equipment -

OSHA requires personal protective equipment to be used whenever it is necessary to protect employees from process hazards including environmental, chemical or mechanical hazards. Employees were found to be using protective equipment in a sporadic manner. Some employees were not sure what equipment was required for specific jobs.

Working with technically proficient representatives from 3M and Liberty Mutual, we can evaluate personal protection requirements and train employees on the proper usage of the equipment.

Frequent Injuries -

Accident reports indicate frequent lacerations and back injuries are occuring at Metco's Duffy Avenue facility. Evaluating the cause of these injuries and instituting preventative measures, could significantly reduce future accidents.

Management will review the recommendations and possibly incorporate a safe lifting training program into the hazardous communication training program. Additionally, at the regularly scheduled safety meetings the accident reports can be reviewed.

Inappropriate Fire Extinguishers -

Class A,B, and C fire extinguishers are provided in areas where metal fires are likely to occur. These types of extinguishers are incompatible with metals. Continued use of these cylinders is in violation of NFPA standards and use could result in increasing the spread of a fire. Hydrostatic testing by trained

persons with adequate equipment facilities of fire extinguishers is not conducted. Some systems have not been tested since 1979, as evidenced by a lack of tags and stamps on extinguisher cylinders.

A fire extinguisher company that provides sales and recharging services was contracted to service and if necessary perform hydrostatic testing on the fire extinguishers at our three facilities. Additionally, we have setup an inventory of the fire extinguishers at our three facilities which is currently being reviewed.

Machine Guarding -

OSHA requires that one or more methods of machine guarding be provided to protect employees from the point of operation of the machine, in running nip points, rotating parts, flying chips and sparks. Machines plant wide were found to be unguarded.

We are actively working with a technical director from Liberty Mutual to assist us in reviewing our current machine guards and make recommendations where necessary.

Safety Meeting -

Safety meetings should be routinely conducted.

Management will review recommendations and routinely schedule safety meetings in the future.

Suspected Asbestos Containing Materials -

Small quantities of material suspected to contain asbestos were observed in the boiler room and warehouse.

Upon receiving management approval, we will contract the services of an environmental consulting firm to assist us.

Employee Work Practices -

OSHA prohibits employer from allowing food or drink in any area exposed to toxic material. Employees were observed eating and drinking at work benches. This practice potentially exposes employees through ingestion and inhalation to hazardous substances in work areas.

Management has addressed the employee work habit of eating and drinking at their work benches. The training portion of the Hazardous Communication Program will include proper employee work practices.

Storage of Flammable Chemicals -

Storage and management of flammable chemicals in the paint room presents a potential fire and explosion hazard. Uncontrolled ignition sources from electrical plugs, wires and equipment are present.

The paints currently in use at the facility are water base. The oil based paints were removed by an EPA permitted hazardous waste removal company in accordance with federal, state, and local regulations. Management will review current storage procedures and if necessary relocate materials into the Flammable Storage Room.

SULZER METCO

March 1, 1999

Sulzer Metco (U.S.) Inc.
1101 Prospect Avenue
Westbury, NY 11590
Phone: (516) 334-1300
Fax: (516) 338-2296

Fire Chief
Westbury Fire Department
Maple Ave.
Westbury, NY 11590

Subject: SARA Title III – Tier II Report

Dear Sir / Madam:

Enclosed please find Sulzer Metco's 1998 SARA Title III, Tier II Reports for our Prospect Avenue and Miller Place facilities.

Thank you.

Michael S. Lydon
Environment, Health & Safety
Phone #: (516) 338-2337
FAX #: (516) 338-2336

FILE: 0301997.DOC

METCO AMDRY

SULZER METCO

March 1, 1999

Sulzer Metco (U.S.) Inc.
1101 Prospect Avenue
Westbury, NY 11590
Phone: (516) 334-1300
Fax: (516) 338-2296

Fire Chief
Hicksville Fire Department
East Marie St.
Hicksville, NY 11801

Subject: SARA Title III – Tier II Report

Dear Sir / Madam:

Enclosed please find Sulzer Metco's 1998 SARA Title III, Tier II Reports for our Prospect Avenue and Miller Place facilities.

Thank you.

Michael S. Lydon
Environment, Health & Safety
Phone #: (516) 338-2337
FAX #: (516) 338-2336

FILE: 0301996.DOC

METCO AMDRY

SULZER METCO

March 1, 1999

Sulzer Metco (U.S.) Inc.
1101 Prospect Avenue
Westbury, NY 11590
Phone: (516) 334-1300
Fax: (516) 338-2296

Local Emergency Planning Committee
C/o Civil Preparedness Office
140 5th St.
Mineola, NY 11501

Subject: SARA Title III – Tier II Report

Dear Sir / Madam:

Enclosed please find Sulzer Metco's 1998 SARA Title III, Tier II Reports for our Prospect Avenue and Miller Place facilities.

Thank you.

Michael S. Lydon
Environment, Health & Safety
Phone #: (516) 338-2337
FAX #: (516) 338-2336

FILE: 0301995.DOC

METCO AMDRY

SULZER METCO

March 1, 1999

Sulzer Metco (U.S.) Inc.
1101 Prospect Avenue
Westbury, NY 11590
Phone: (516) 334-1300
Fax: (516) 338-2296

NYSDEC
Bureau of Spill Prevention and Response
Room 360
50 Wolf Rd.
Albany, NY 12233-3750

Subject: SARA Title III – Tier II Report

Dear Sir / Madam:

Enclosed please find Sulzer Metco's 1998 SARA Title III, Tier II Reports for our Prospect Avenue and Miller Place facilities.

Thank you.

Michael S. Lydon
Environment, Health & Safety
Phone #: (516) 338-2337
FAX #: (516) 338-2336

FILE: 0301994.DOC

METCO AMDRY

SULZER METCO

March 1, 1999

Sulzer Metco (U.S.) Inc.
1101 Prospect Avenue
Westbury, NY 11590
Phone: (516) 334-1300
Fax: (516) 338-2296

State Emergency Response Commission
c/o State Emergency Management Office
Albany, New York 12226-5000

Subject: SARA Title III – Tier II Report

Dear Sir / Madam:

Enclosed please find Sulzer Metco's 1998 SARA Title III, Tier II Reports for our Prospect Avenue and Miller Place facilities.

Thank you.

Michael S. Lydon
Environment, Health & Safety
Phone #: (516) 338-2337
FAX #: (516) 338-2336

FILE: 0301993.DOC

METCO AMDRY

SULZER METCO

March 1, 1999

Sulzer Metco (U.S.) Inc.
1101 Prospect Avenue
Westbury, NY 11590
Phone: (516) 334-1300
Fax: (516) 338-2296

EPA Region #2
Fred Rubel, preparedness Coordinator
Woodridge Ave.
Edison, NJ 08837

Subject: SARA Title III – Tier II Report

Mr. Rubel:

Enclosed please find Sulzer Metco's 1998 SARA Title III, Tier II Reports for our Prospect Avenue and Miller Place facilities.

Thank you.

Michael S. Lydon
Environment, Health & Safety
Phone #: (516) 338-2337
FAX #: (516) 338-2336

FILE: 0301992.DOC

SULZER METCO

March 1, 1999

Sulzer Metco (U.S.) Inc.
1101 Prospect Avenue
Westbury, NY 11590
Phone: (516) 334-1300
Fax: (516) 338-2296

Fire Chief
Syosset Fire Department
Cold Spring Road
Syossett, NY 11791

Subject: SARA Title III – Tier II Report

Dear Sir / Madam:

Enclosed please find Sulzer Metco's 1998 SARA Title III, Tier II Reports for our Prospect Avenue and Miller Place facilities.

Thank you.

Michael S. Lydon
Environment, Health & Safety
Phone #: (516) 338-2337
FAX #: (516) 338-2336

FILE: 0301998.DOC

METCO AMDRY

Form Approved OMB No 2050 0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: Sulzer Metco (US), Inc
Street: 220 Miller Place
City: Hicksville County: Nassau State: NY Zip: 11801
SIC Code: 3399 Dun & Brad Number: 15-208-4398

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name
Name: Russell Siedlewicz Phone: 516 334-1300
Mail Address: 1101 Prospect Avenue, Westbury, NY 11590

Emergency Contact
Name: Michael S. Lydon Title: Environment,Health&Safety
Phone: (516) 338-2337 24 Hr. Phone: (800) 424-9300
Name: Russell Siedlewicz Title: Chemtrec Manager Facilities
Phone: (516) 338-2139 24 Hr. Phone: (800) 424-9300

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19 98

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential)	Optional
CAS 7440-02-0 Trade Secret ☐ Chem. Name: Nickel Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 Warehouse Production Floor N 1 4 Production Floor R 1 4 Production Floor Hardened Steel Hoppers E 1 4 Warehouse Production Floor I 1 4 Warehouse Production Floor	☐
CAS 7440-47-3 Trade Secret ☐ Chem. Name: Chromium Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 Warehouse Production Floor N 1 4 Production Floor R 1 4 Production Floor Hardened Steel Hoppers E 1 4 Warehouse Production Floor I 1 4 Warehouse Production Floor	☐
CAS 7440-48-4 Trade Secret ☐ Chem. Name: Cobalt Check all that apply: Pure ☐, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 Warehouse Production Floor N 1 4 Production Floor R 1 4 Production Floor Hardened Steel Hoppers E 1 4 Warehouse Production Floor I 1 4 Warehouse Production Floor	☐

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3 and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Russell Sieldewicz Manager Facilities
Name and official title of owner/operator OR owner/operator's authorized representative

Signature

3-3-99
Date signed

Optional Attachments

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

Form Approved OMB No 2050 0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: Sulzer Metco (US) Inc
Street: 220 Miller Place
City: Hicksville County: Nassau State: NY Zip: 11801
SIC Code: 3399 Dun & Brad Number: 15-208-4398

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name
Name: Russell Siedlewicz Phone: (516) 334-1300
Mail Address: 1101 Prospect Ave., Westbury, NY 11590

Emergency Contact
Name: Michael S. Lydon Title: Environment,Health&Safety
Phone: (516) 338-2337 24 Hr. Phone: (800) 424-9300 Chemtrec
Name: Russell Siedlewicz Title: Manager Facilities
Phone: (516) 338-2139 24 Hr Phone: (800) 424-9300

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 98

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7429905 Trade Secret ☐ Chem. Name: Aluminum Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	X Fire ☐ Sudden Release of Pressure X Reactivity X Immediate (acute) X Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 Warehouse Production Floor N 1 4 Production Floor R 1 4 Production Floor Hardened Steel Hoppers E 1 4 Warehouse Production Floor I 1 4 Warehouse Production Floor	☐
CAS 13444281 Trade Secret ☐ Chem. Name: Aluminum Oxide Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 Warehouse Production Floor N 1 4 Production Floor R 1 4 Production Floor Hardened Steel Hoppers E 1 4 Warehouse Production Floor I 1 4 Warehouse Production FLoor	☐
CAS 13142344 Trade Secret ☐ Chem. Name: Zirconium Oxide Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 Warehouse Production Floor N 1 4 Production Floor R 1 4 Production Floor Hardened Steel Hoppers E 1 4 Warehouse Production Floor I 1 4 Warehouse Production Floor	☐

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3 and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Russell Siedlewicz Manager Facilities
Name and official title of owner/operator OR owner/operator's authorized representative

Signature

3-3-99
Date signed

Optional Attachments

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

Form Approved OMB No 2050 0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name Sulzer Metco (US) Inc
Street 220 Miller Place
City Hicksville County Nassau State NY Zip 11801
S.I.C. Code 3399 Dun & Bradstreet Number 15-208-4398

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name
Name Russell Siedlewicz Phone (516) 334-1300
Mail Address 1101 Prospect Avenue, Westbury, NY 11590

Emergency Contact
Name Michael S. Lydon Title Environment, Health&Safety
Phone (516) 338-2337 24 Hr. Phone (800) 424-9300 Chemtrec
Name Russell Siedlewicz Title Manager Facilities
Phone (516) 338-2139 24 Hr Phone (800) 424-9300

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 98

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) — Storage Locations	Optional
CAS 26099 71 8 Trade Secret ☐ Chem. Name Polyester "POB" Homopolymer Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 Warehouse Production Floor N 1 4 Production Floor R 1 4 Production Floor Haredened Steel Hoppers E 1 4 Warehouse Production Floor I 1 4 Warehouse Production Floor	☐
CAS 11308 38 9 Trade Secret ☐ Chem. Name Chromium Oxide Check all that apply: Pure X, Mix ☐, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name	X Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 Warehouse Production Floor N 1 4 Production Floor R 1 4 Production Floor Hardened Steel Hoppers E 1 4 Warehouse Production Floor I 1 4 Warehouse Production Floor	☐
CAS ☐ Trade Secret ☐ Chem. Name Check all that apply: Pure ☐, Mix ☐, Solid ☐, Liquid ☐, Gas ☐, EHS ☐ EHS Name	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic)	Max. Daily Amount (code) Avg. Daily Amount (code) No. of Days On-site (days)		☐

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Name and official title of owner/operator OR owner/operator's authorized representative — Signature — Date signed 3-3-99

Optional Attachments
☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

Form Approved OMB No 2050-0072

Tier Two
EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: Sulzer Metco (US) Inc
Street: 1101 Prospect Avenue
City: Westbury County: Nassau State: NY Zip: 11590
SIC Code: 3542 Dun & Bradstreet Number: 87-429-0349

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name

Name: Russell Siedlewicz Phone: (516) 334-1300
Mail Address: 1101 Prospect Avenue, Westbury, NY 11590

Emergency Contact

Name: Michael S. Lydon Title: Environment, Health& Safety
Phone: (516) 338-2337 24 Hr Phone: (800) 424-9300 Chentrec
Name: Russell Siedlewicz Title: Manager Facilities
Phone: (516) 338-2139 24 Hr Phone: (516) 424-9300

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19 98

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7429-90-5 Trade Secret ☐ Chem. Name: Aluminum Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire X Sudden Release of Pressure Reactivity X Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 03 Avg. Daily Amount (code): 03 No. of Days On-site (days): 365	N 1 4 Engineering Laboritories D 1 4 Warehouse	☐
CAS 1344-28-1 Trade Secret ☐ Chem. Name: Aluminum oxide Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire Sudden Release of Pressure Reactivity Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 03 Avg. Daily Amount (code): 03 No. of Days On-site (days): 365	N 1 4 Engineering Laboratories D 1 4 Warehouse	☐
CAS 7439-89-6 Trade Secret ☐ Chem. Name: Iron Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire X Sudden Release of Pressure Reactivity X Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 03 Avg. Daily Amount (code): 03 No. of Days On-site (days): 365	N 1 4 Engineering Laboratories D 1 4 Warehouse	☐

Certification *(Read and sign after completing all sections)*

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Russell Siedlewicz Manager Facilities
Name and official title of owner/operator OR owner/operator's authorized representative

Signature

3-3-99
Date signed

Optional Attachments

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☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

Form Approved OMB No 2050 0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: Sulzer Metco (US) Inc
Street: 1101 Prospect Avenue
City: Westbury County: Nassau State: NY Zip: 11590
SIC Code: 3542 Dun & Brad Number: 87-429-0349

FOR OFFICIAL USE ONLY — ID #: ; Date Received:

Owner/Operator Name

Name: Russell Siedlewicz Phone: (516) 334-1300
Mail Address: 1101 Prospect Avenue, Westbury, NY 11590

Emergency Contact

Name: Michael S. Lydon Title: Environment, Health&Safety
Phone: (516) 338-2337 24 Hr. Phone: (800) 424-9300 Chemtrec
Name: Russell Siedlewicz Title: Manager Facilities
Phone: (516) 338-2139 24 Hr. Phone: (800) 424-9300

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19 98

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) — Storage Locations	Optional
CAS 7440-02-0; Trade Secret ☐ Chem. Name: Nickel Check all that apply: Pure ☐ Mix X Solid X Liquid ☐ Gas ☐ EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 Engineering Laboratories D 1 4 Warehouse	☐
CAS 7440-47-3; Trade Secret ☐ Chem. Name: Chromium Check all that apply: Pure X Mix X Solid X Liquid ☐ Gas ☐ EHS ☐ EHS Name:	X Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 Engineering Laboratories D 1 4 Warehouse	☐
CAS 1314-23-4; Trade Secret ☐ Chem. Name: Check all that apply: Pure X Mix X Solid X Liquid ☐ Gas ☐ EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) ☐ Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 Engineering Laboratories D 1 4 Warehouse	☐

Certification *(Read and sign after completing all sections)*

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Russell Siedlewicz Manager Facilities — Name and official title of owner/operator OR owner/operator's authorized representative
Signature: [signature] Date signed: 3-3-99

Optional Attachments

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

Form Approved OMB No 2050 0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: Sulzer Metco (US) Inc
Street: 1101 Prospect Avenue
City: Westbury County: Nassau State: NY Zip: 11590
SIC Code: 3542 Dun & Brad Number: 87-429-0349

FOR OFFICIAL USE ONLY
ID #
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Owner/Operator Name
Name: Russell Siedlewicz Phone: (516) 334-1300
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Phone: (516) 338-2337 24 Hr Phone: (800) 424-9300 Chemtrec
Name: Russell Siedlewicz Title: Manager Facilities
Phone: (516) 338-2139 24 Hr Phone: (800) 424-9300

Important. Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 98

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS ____ Trade Secret ☐ Chem. Name: Polyester "POB" Homopolymer Check all that apply: Pure ☒ Mix ☒ Solid ☒ Liquid ☐ Gas ☐ EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	Max. Daily Amount (code): 03 Avg. Daily Amount (code): 03 No. of Days On-site (days):	N 1 4 Engineering Laboratories D 1 4 Warehouse	☐
CAS ____ Trade Secret ☐ Chem. Name: Check all that apply: Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas ☐ EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic)	Max. Daily Amount (code): Avg. Daily Amount (code): No. of Days On-site (days):		☐
CAS ____ Trade Secret ☐ Chem. Name: Check all that apply: Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas ☐ EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic)	Max. Daily Amount (code): Avg. Daily Amount (code): No. of Days On-site (days):		☐

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Russell Siedlewicz Manager Facilities
Name and official title of owner/operator OR owner/operator's authorized representative

Signature

3-3-99
Date signed

Optional Attachments

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

WORK COPY MP

(IMPORTANT: Type or print; read instructions before completing form)

Form Approved OMB Number: 2070-0093
Approval Expires: 11/92

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FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER: 11801PRKNL220MI

Toxic Chemical, Category, or Generic Name: ALUMINUM POWDER

WHERE TO SEND COMPLETED FORMS:

1. EPCRA Reporting Center
   P.O. Box 3348
   Merrifield, VA 22116-3348
   ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 92

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?

[ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [X] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official: JOE MACRI, MANAGER FACILITIES

Signature:

Date Signed: June 30, 1993

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: METCO DIVISION PERKIN-ELMER CORPORATION

TRI Facility ID Number: 11801PRKNL220MI

Street Address: 220 Miller Place

City: Hicksville

County: Nassau

State: New York

Zip Code: 11801

Mailing Address (if different from street address):

City:

State:

Zip Code:

PUT LABEL HERE

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PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
ALUMINUM POWDER

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check only one)	a. [ ] An entire facility		b. [X] Part of a facility			
4.3	Technical Contact	Name: JOE MACRI			Telephone Number (include area code): (516) 334-1300		
4.4	Public Contact	Name: JOE MACRI			Telephone Number (include area code): (516) 334-1300		
4.5	SIC Code (4-digit)	a. 3399	b.	c.	d.	e.	f.
4.6	Latitude and Longitude	Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		086	13	00	003	47	00
4.7	Dun & Bradstreet Number(s) (9 digits)	a. 05-773-1663					
		b.					
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. NYD981558570					
		b.					
4.9	Facility NPDES Permit Number(s) (9 characters)	a. N/A					
		b.					
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. N/A					
		b.					

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	[ ] NA PERKIN-ELMER CORPORATION
5.2	Parent Company's Dun & Bradstreet Number	[ ] NA (9 digits) 00-118-4480

w/c

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United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER
11801FRKNL220MI
Toxic Chemical, Category, or Generic Name
ALUMINUM POWDER

SECTION 1. TOXIC CHEMICAL IDENTITY

(Important: DO NOT complete this section if you complete Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	7429-90-5
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	ALUMINUM (FUME OR DUST)
1.3	Generic Chemical Name (Important: Complete **only** if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)
	N/A

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
	N/A

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1	**Manufacture the toxic chemical:**	a. ☐ Produce b. ☐ Import	If produce or import: c. ☐ For on-site use/processing d. ☐ For sale/distribution e. ☐ As a byproduct f. ☐ As an impurity
3.2	**Process the toxic chemical:**	a. ☐ As a reactant b. ☐ As a formulation component	c. ☒ As an article component d. ☒ Repackaging
3.3	**Otherwise use the toxic chemical:**	a. ☐ As a chemical processing aid b. ☐ As a manufacturing aid	c. ☐ Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	04 (Enter two-digit code from instruction package.)

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801FRKNL220MI
Toxic Chemical, Category, or Generic Name
ALUMINUM POWDER

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	☒ NA			
5.2	Stack or point air emissions	☐ NA	310	C	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name				
	N/A				
5.3.2	Stream or Water Body Name				
	N/A				
5.3.3	Stream or Water Body Name				
	N/A				
5.4	Underground injections on-site	☒ NA			
5.5	Releases to land on-site				
5.5.1	Landfill	☒ NA			
5.5.2	Land treatment/ application farming	☒ NA			
5.5.3	Surface impoundment	☒ NA			
5.5.4	Other disposal	☒ NA			

☐ Check here only if additional Section 5.3 information is provided on page 5 of this form.

Range Codes: A = 1 - 10 pounds; B = 1 C = 500 - 999 pounds.

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL 220MI
Toxic Chemical, Category, or Generic Name
ALUMINUM POWDER

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3	Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__	Stream or Water Body Name			
	N/A			
5.3.__	Stream or Water Body Name			
	N/A			
5.3.__	Stream or Water Body Name			
	N/A			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)
N/A	

6.1.B POTW Name and Location Information

6.1.B.__ POTW Name		6.1.B.__ POTW Name	
N/A			
Street Address		Street Address	
City	County	City	County
State	Zip Code	State	Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ]
(example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11
C = 500 - 999 pounds.

W/C

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 11801PRKNL220MI

Toxic Chemical, Category, or Generic Name: ALUMINUM POWDER

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: I. GANZ METAL, INC.

Street Address: 96 WHYTHE AVENUE

City: BROOKLYN | County: KINGS

State: NY | Zip Code: 11211 | Is location under control of reporting facility or parent company? ☐ Yes ☒ No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. B	1. M	1. M 24
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: LONI-JO SCRAP METAL

Street Address: 70 KINKEL STREET

City: WESTBURY | County: NASSAU

State: NY | Zip Code: 11590 | Is location under control of reporting facility or parent company? ☐ Yes ☒ No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 1700	1. M	1. M 24
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box ☐ and indicate which Part II, Section 6.2 page this is, here. ☐ (example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11
C = 500 - 999 pounds.

EPA
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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801 PRKNL 220MI
Toxic Chemical, Category, or Generic Name
ALUMINUM POWDER

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

☒ **Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.**

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b 1 2 3 4 5 6 7 8	7A.1c	7A.1d %	7A.1e Yes ☐ No ☐
7A.2a	7A.2b 1 2 3 4 5 6 7 8	7A.2c	7A.2d %	7A.2e Yes ☐ No ☐
7A.3a	7A.3b 1 2 3 4 5 6 7 8	7A.3c	7A.3d %	7A.3e Yes ☐ No ☐
7A.4a	7A.4b 1 2 3 4 5 6 7 8	7A.4c	7A.4d %	7A.4e Yes ☐ No ☐
7A.5a	7A.5b 1 2 3 4 5 6 7 8	7A.5c	7A.5d %	7A.5e Yes ☐ No ☐

If additional copies of page 7 are attached, indicate the total number of pages in this box ☐ and indicate which page 7 this is, here. ☐ (example: 1, 2, 3, etc.)

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United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
ALUMINUM POWDER

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

☒ **Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.**

Energy Recovery Methods [enter 3-character code(s)]

1 ☐ 2 ☐ 3 ☐ 4 ☐

SECTION 7C. ON-SITE RECYCLING PROCESSES

☒ **Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.**

Recycling Methods [enter 3-character code(s)]

1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐

6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 11801PRKNL220MI

Chemical, Category, or Generic Name: ALUMINUM POWDER

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

All quantity estimates can be reported using up to two significant figures.		Column A 1991 (pounds/year)	Column B 1992 (pounds/year)	Column C 1993 (pounds/year)	Column D 1994 (pounds/year)
8.1	Quantity released*	0	0	0	0
8.2	Quantity used for energy recovery on-site	0	0	0	0
8.3	Quantity used for energy recovery off-site	0	0	0	0
8.4	Quantity recycled on-site	0	0	0	0
8.5	Quantity recycled off-site	3700	1800	1800	1800
8.6	Quantity treated on-site	0	0	0	0
8.7	Quantity treated off-site	0	0	0	0
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	N/A			
8.9	Production ratio or activity index	.95			

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	W19	a. T04	b.	c.
8.10.2	W29	a. T04	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11 Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box) YES ☐ NO ☒

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

CycleChem

INVOICE NO.	CUSTOMER NO.	INVOICE DATE	ORDER NO.	GEN COD
W089859	08-1047408	09/05/2008	89859 WW786	94594 -1

FOR ADDITIONAL INFORMATION PERTAINING TO THIS INVOICE PLEASE DIAL
PHONE: 908-355-5800 • FAX: 908-355-0562

Page

PICK UP FROM: SULZER METCO US INC
Attn: JIM Kourkoumelis
1101 PROSPECT AVE
WESTBURY, NY 11590

BILL TO: SULZER METCO US INC
Attn: JIM Kourkoumelis
1101 PROSPECT AVE
WESTBURY, NY 11590

TELEPHONE NUMBER

PO

EPA ID NO.	MANIFEST NO.	DATE RECEIVED	P.O. #
NYD131318651	CVCC113291	8/26/2008	4530114674

PRODUCT CODE	SEQUENCE NUMBER	QUANTITY ORDERED	DESCRIPTION	UNITS	RATE	CONT.	TOTAL
PC04	0036	1	METAL/CERAMIC POWDER & WATER 90%	1917.00	0.90/G	TT	1,725.30

LINE 14

INVOICE

Disposal Subtotal* $1725.30

COMMENTS/ADDITIONAL CHARGES		AMOUNT
Invoice Comment: PO#4530114674	QA/QC Fee	No Charge
	Reg. Admin. Fee	No Charge
	Transportation*	900.00
	Tax On * Items: 8.625% X $2625.30	226.43

Please Remit payment in full to:
Cycle Chem, Inc.
P.O. Box 18173, Newark, N.J. 07191

PAY THIS AMOUNT 2,851.73

PLEASE NOTE: INTEREST CHARGES OF 1.5% PER MONTH (18% PER YEAR WILL ACCRUE ON ALL PAST DUE AMOUNTS. ON UNPAID AMOUNTS, INTEREST AND ALL EXPENSES OF COLLECTIONS INCLUDING A REASONABLE ATTORNEY FEE IN AN AMOUNT OF 20% WILL BE CHARGED.

THE WASTE LISTED ON THIS INVOICE HAS BEEN RECEIVED BY OUR HAZARDOUS WASTE FACILITY AND IS BEING HANDLED IN FULL COMPLIANCE WITH THE RCRA REGULATIONS CONCERNING THE TREATMENT, STORAGE AND DISPOSAL OF THE DESCRIBED MATERIAL

Form Approved OMB Number: 2070-0092
Approval Expires: 11/92

(IMPORTANT: Type or print; read instructions before completing form)

EPA United States Environmental Protection Agency	FORM R Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act	TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

TRI FACILITY ID NUMBER: 11801PRKNL220MI

Chem., Cat., or Gen. Name: CHROMIUM COMPOUNDS

WHERE TO SEND COMPLETED FORMS:
1. EPCRA Reporting Center, P.O. Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

For EPA use only

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR: 1995

Section 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?
[ ] Yes (Answer question 2.2; Attach substantiation forms)
[X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [ ] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hearby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official
LAURENCE F. MILES, FACILITY MANAGER

Signature: [signature]

Date Signed: 10/07/96

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: SULZER METCO (US) INC.	TRI Facility ID Number: 11801PRKNL220MI
Street Address: 220 MILLER PLACE	
City: HICKSVILLE	County: NASSAU
State: NY	Zip Code: 11801-
Mailing Address (if different from street address): 1101 PROSPECT AVENUE	
City: WESTBURY	PUT LABEL HERE
State: NY	Zip Code: 11590-0201

EPA United States Environmental Protection Agency	EPA FORM R PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)	TRI FACILITY ID NUMBER 11801PRKNL220MI Chem., Cat., or Gen. Name CHROMIUM COMPOUNDS

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check only one)	a. [ ] An entire facility b. [X] Part of a facility c. [ ] Federal Facility
4.3	Technical Contact	Name: CONSTANCE L. CONROY CConroy — Telephone Number (include area code): (516)338-2337
4.4	Public Contact	Name: LAURENCE F. MILES — Telephone Number (include area code): (516)338-2374

4.5	SIC Code (4-digit)	a. 3399	b. NA	c.	d.	e.	f.

4.6	Latitude and Longitude	Latitude Degrees	Latitude Minutes	Latitude Seconds	Longitude Degrees	Longitude Minutes	Longitude Seconds
		086	13	00	003	47	00

4.7	Dun & Bradstreet Number(s) (9 digits)	a.	152084398
		b.	NA
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a.	NYD981558570
		b.	NA
4.9	Facility NPDES Permit Number(s) (9 characters)	a.	NA
		b.	
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a.	NA
		b.	

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	
	[ ] NA	SULZER INC.
5.2	Parent Company's Dun & Bradstreet Number	
	[ ] NA	(9 Digits) 001826957

EPA Form 9250-1 (Rev. 12/4/94) - Previous editions are obsolete.

EPA United States Environmental Protection Agency	EPA FORM R PART II. CHEMICAL-SPECIFIC INFORMATION	TRI FACILITY ID NUMBER 11801PRKNL220MI Chem., Cat., or Gen. Name CHROMIUM COMPOUNDS

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you complete Section 2 below.)

1.1 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list.

N090 - -

1.2 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)

CHROMIUM COMPOUNDS

1.3 Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes."

NA

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete Section 1 above.)

2.1 Generic Chemical Name Provided by Supplier (Important: Max. of 70 chars., including numbers, letters, spaces, and punct.)

NA

SECTION 3. ACTIVITIES AND USES OF THE CHEMICAL AT THE FACILITY (Important: Check all that apply.)

			If produce or import:
3.1	Manufacture the toxic chemical:	a. [ ] Produce b. [X] Import	c. [X] For on-site use/processing d. [X] For sale/distribution e. [ ] As a byproduct f. [ ] As an impurity
3.2	Process the toxic chemical	a. [ ] As a reactant b. [ ] As a formulation component	c. [X] As an article component d. [X] Repackaging
3.3	Otherwise use the toxic chemical:	a. [ ] As a chemical processing aid b. [ ] As a manufacturing aid	c. [ ] Ancillary or other use

Section 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1 03 (Enter two-digit code from instruction package.)

EPA United States Environmental Protection Agency	EPA FORM R PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)	TRI FACILITY ID NUMBER 11801PRKNL220MI Chem., Cat., or Gen. Name CHROMIUM COMPOUNDS

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X]NA	NA		
5.2	Stack or point air emissions	[ ]NA	A	C	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name				
NA					
5.3.2	Stream or Water Body Name				
5.3.3	Stream or Water Body Name				
5.4	Underground injections on-site	[X]NA	NA		
5.5	Releases to land on-site				
5.5.1	Landfill	[X]NA	NA		
5.5.2	Land treatment/ application farming	[X]NA	NA		
5.5.3	Surface impoundment	[X]NA	NA		
5.5.4	Other disposal	[X]NA	NA		

[ ] Check here only if additional Section 5.3 information is provided on page 5 of this form.

Range Codes: A = 1-10 pounds; B = 11-499 pounds; C = 500 - 999 pounds.

EPA United States Environmental Protection Agency	EPA FORM R PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)	TRI FACILITY ID NUMBER 11801PRKNL220MI Chem., Cat., or Gen. Name CHROMIUM COMPOUNDS

Section 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3	Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.4	Stream or Water Body Name			
5.3.5	Stream or Water Body Name			
5.3.6	Stream or Water Body Name			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B POTW Name and Location Information

6.1.B.1 POTW Name		6.1.B.2 POTW Name	
Street Address		Street Address	
City	County	City	County
State	Zip Code	State	Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [1] (example: 1,2,3,etc.)

 Range Codes: A = 1-10 pounds; B = 11-499 pounds; C = 500 - 999 pounds.

EPA United States Environmental Protection Agency	EPA FORM R PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)	TRI FACILITY ID NUMBER: 11801PRKNL220MI Chem., Cat., or Gen. Name: CHROMIUM COMPOUNDS

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.1 Off-site EPA Identification Number (RCRA ID No.)
NJD089216790

Off-Site Location Name CHEMICAL WASTE MANAGEMENT

Street Address 100 LISTER AVENUE

City: NEWARK | County:

State NJ | Zip Code 07105- | Is location under control of reporting [X] YES [ ] NO

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 9403	1. M	1. M10
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.2 Off-site EPA Identification Number (RCRA ID No.)
NYD049836679

Off-Site Location Name CHEMICAL WASTE MANAGEMENT

Street Address 1550 BALMER ROAD

City: MODEL CITY | County:

State NY | Zip Code 14107- | Is location under control of reporting [X] YES [ ] NO

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 18670	1. M	1. M72
2.	2.	2.
3.	3.	3.
4.	4.	4.

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [2] and indicate which Part II, Sections 6.2 page this is, here. [1]
(example: 1,2,3,etc.)

Range Codes: A = 1-10 pounds; B = 11-499 pounds; C = 500 - 999 pounds.

EPA United States Environmental Protection Agency	EPA FORM R PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)	TRI FACILITY ID NUMBER 11801PRKNL220MI Chem., Cat., or Gen. Name CHROMIUM COMPOUNDS

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.3 Off-site EPA Identification Number (RCRA ID No.)
NJD980536593

Off-Site Location Name ADVANCED ENVIRONMENTAL TECHNOL OGY CORPORATION

Street Address 1 EDEN LANE

City FLANDERS | County

State NJ | Zip Code 07836- | Is location under control of reporting [X] YES [ ] NO

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 400	1. M	1. M10
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.4 Off-site EPA Identification Number (RCRA ID No.)
NA

Off-Site Location Name LONI-JO METAL CORPORATION

Street Address 70 KINKEL STREET

City WESTBURY | County NASSAU

State NY | Zip Code 11590- | Is location under control of reporting [ ] YES [X] NO

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 533	1. M	1. M24
2.	2.	2.
3.	3.	3.
4.	4.	4.

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [2] and indicate which Part II, Sections 6.2 page this is, here. [2]
(example: 1,2,3,etc.)

EPA United States Environmental Protection Agency	EPA FORM R PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)	TRI FACILITY ID NUMBER 11801PRKNL220MI Chem., Cat., or Gen. Name CHROMIUM COMPOUNDS

Section 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] Not Applicable (NA) - Check here if no on-site treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b	7A.1c	7A.1d	7A.1e
NA	1 2 3 4 5 6 7 8		%	Yes [ ] No [ ]
7A.2a	7A.2b	7A.2c	7A.2d	7A.2e
	1 2 3 4 5 6 7 8		%	Yes [ ] No [ ]
7A.3a	7A.3b	7A.3c	7A.3d	7A.3e
	1 2 3 4 5 6 7 8		%	Yes [ ] No [ ]
7A.4a	7A.4b	7A.4c	7A.4d	7A.4e
	1 2 3 4 5 6 7 8		%	Yes [ ] No [ ]
7A.5a	7A.5b	7A.5c	7A.5d	7A.5e
	1 2 3 4 5 6 7 8		%	Yes [ ] No [ ]

If additional pages are attached, indicate the total number of pages in this box [ ] and indicate which page this is, here [1].

EPA United States Environmental Protection Agency	EPA FORM R PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)	TRI FACILITY ID NUMBER 11801PRKNL220MI Chem., Cat., or Gen. Name CHROMIUM COMPOUNDS

Section 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [enter 3-character code(s)]

1	2	3	4
NA			

Section 7C. ON-SITE RECYCLING PROCESSES

[X] Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [enter 3-character code(s)]

1	2	3	4	5
NA				

6	7	8	9	10

EPA	EPA FORM R	TRI FACILITY ID NUMBER
United States Environmental Protection Agency	PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)	11801PRKNL220MI
		Chem., Cat., or Gen. Name
		CHROMIUM COMPOUNDS

Section 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

	All estimates can be reported using up to two significant figures.	Column A 1994 (pounds/year)	Column B 1995 (pounds/year)	Column C 1996 (pounds/year)	Column D 1997 (pounds/year)
8.1	Quantity released *	1	28474	1	1
8.2	Quantity used for energy recovery on-site	0	0	0	0
8.3	Quantity used for energy recovery off-site	0	0	0	0
8.4	Quantity recycled on-site	0	0	0	0
8.5	Quantity recycled off-site	3900	533	2800	0
8.6	Quantity treated on-site	0	0	0	0
8.7	Quantity treated off-site	0	0	0	0
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)				0
8.9	Production Ratio or Activity Index				0001.37

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" In Section 8.10.1 and answer Section 8.11.

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11 Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box) YES [ ] NO [X]

* Report releases pursuant to EPRCA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

TRI FACILITY ID: 11590-PRKNL-1101P
DATE: 11/15/94

PERKIN-ELMER CORP. METCO DIV.
1101 PROSPECT AVE.
WESTBURY, NY 11590

R E L E A S E V A L U E R E P O R T

Document Control Nbr.	Chemical Name	CAS Number
13-93-07524990-6-NY	NICKEL	007440-02-0

5.1	Fugitive or non-point air emissions	NA
5.2	Stack or point air emissions	500 - 999
5.3.A	Discharges to water bodies NA	NA
5.4	Underground injections on-site	NA
5.5.1	Releases to landfill	NA
5.5.2	Releases to land treatment/application farming	NA
5.5.3	Releases to surface impoundment	NA
5.5.4	Releases to other land disposal	NA
6.2.01	Transfer to other off-site LONI-JO METAL CORP.	3,700
6.2.02	Transfer to other off-site	NA
6.1.A	Total quantity transferred to POTWs	NA
8.1.A	Quantity released	0
8.1.B	Quantity released	0
8.1.C	quantity released	0
8.1.D	Quantity released	0
8.2.A	Quantity used for energy recovery on-site	0
8.2.B	Quantity used for energy recovery on-site	0
8.2.C	Quantity used for energy recovery on-site	0
8.2.D	Quantity used for energy recovery on-site	0
8.3.A	Quantity used for energy recovery off-site	0
8.3.B	Quantity used for energy recovery off-site	0
8.3.C	Quantity used for energy recovery off-site	0
8.3.D	Quantity used for energy recovery off-site	0
8.4.A	Quantity recycled on-site	0
8.4.B	Quantity recycled on-site	0
8.4.C	Quantity recycled on-site	0
8.4.D	Quantity recycled on-site	0
8.5.A	Quantity recycled off-site	3,000
8.5.B	Quantity recycled off-site	3,700
8.5.C	Quantity recycled off-site	4,000
8.5.D	Quantity recycled off-site	4,000
8.6.A	Quantity treated on-site	0
8.6.B	Quantity treated on-site	0
8.6.C	Quantity treated on-site	0
8.6.D	Quantity treated on-site	0
8.7.A	Quantity treated off-site	0
8.7.B	Quantity treated off-site	0
8.7.C	Quantity treated off-site	0
8.7.D	Quantity treated off-site	0
8.8	Quantity released from catastrophic/remedial action	NA
8.9	Production ratio or activity index	.89

General

1. (a) Name and address of the plant. DUFFY AVENUE FACILITY

METCO DIVISION PERKIN-ELMER
325 DUFFY AVENUE
HICKSVILLE NEW YORK 11801

1. (b). Outline below the chain-of-command for environmental matters relating to your plant site. (Provide name and telephone numbers.)

PATRICK A. TIGHE 516-334-1300 EXT. 495
JIM ZANETTI 516-938-1661
BILL BOUCHARD 516-938-1661

2. Give a brief explanation of the plant processing, assembly or manufacturing operations.

MANUFACTURE OF PARTS AND EQUIPMENT FOR THE THERMAL SPRAY COATINGS INDUSTRY

3. a. Attach a site map showing all buildings and site boundaries.

b. What year was each building constructed?

1959

4. On the above site map, locate and note:
   a. Storage areas and facilities (e.g., drum storage, lagoons, etc.)
   b. Tanks (active, inactive and removed)
   c. Areas of known past spills or discharges
   d. Floor drains (with point of discharge) SEE SITE MAP
   e. Septic tanks
   f. Wastewater discharge points
   g. Air pollution control devices

5. List all known previous owners of your site. Include name. years operated. type of business and current telephone number, if known.

BUILDING CONSTRUCTED 1959
PURCHASED 1978

6. Identify and describe any process modifications or expansions currently being planned.

POSSIBLE ADDITION OF SPRAY BOOTHS WITH ROBOTIC SYSTEMS AND WATER WASH COLLECTOR SYSTEMS

7. Describe the major pollution control apparatus in use at the site.

WATER WASH COLLECTOR SYSTEMS

8. List below all findings of environmental noncompliance by governmental agencies in the last two years; attach any relevant documents.

NONE TO MY KNOWLEDGE

DUFFY AVENUE FACILITY

9. Attach copies of previous environmental and health and safety survey reports.
NONE TO MY KNOWLEDGE

10. Describe the businesses of any adjacent properties.
AGWAY FUEL OIL SUPPLIER
MALVESE HEAVY EQUIPMENT SUPPLIER
JODEE PLASTICS INC.
TOMA ENTERPRISES
CHASE LOGEMAN
AMERICAN PERMACLINC - BOWE CORP.

11. Highlight your major environmental concerns, including any areas for which you desire more information and/or training.
WOULD LIKE TO SEE INFORMATION ON CLEANING EQUIPMENT TO DEGREASE MACHINE PARTS WITH BIODEGRADABLE CLEANERS.

12. Please check the appropriate column for the items below. If the item is available, please attach it to your response. If it is difficult to provide copies of the documents requested below please have the documents available for the audit team while they are on site.

AIR

Item		Attached	Not Applicable	Not Available
a.	Emissions permits (e.g., permit to construct and operate)	✓		
b.	Emissions test results			✓
c.	Record of citizen complaints		✓	
d.	Communications with governmental entities regarding emissions	✓		
e.	Emissions inventory	✓		

WASTEWATER

Item		Attached	Not Applicable	Not Available
a.	Discharge permits, and applications	✓		
b.	Discharge monitoring reports for the last year	✓		
c.	Communications with governmental entities (including notices or violations).	✓		
d.	Spill prevention, control and countermeasures (SPCC) plan			✓

DUFFY AVENUE FACILITY

HAZARDOUS WASTE

Item		Attached	Not Applicable	Not Available
a.	List of volume and type of hazardous waste generated, per month	✓		
b.	Generator notification form (USEPA 8700-12).	✓		
c.	RCRA permits			✓
d.	Manifests for the past year	✓		
e.	Communications with governmental entities	✓		
f.	List of past disposal sites	✓		
g.	List of on-site disposal sites (active or abandoned)		✓	
h.	Waste minimization plan		✓	

DRINKING WATER

Item		Attached	Not Applicable	Not Available
a.	Description of any well on site		✓	
b.	Well sample analytical results for the past year		✓	
c.	Drinking water sample analytical results for the past years			✓

PCBs

Item		Attached	Not Applicable	Not Available
a.	List of PCB-contaminated equipment on site		✓	
b.	PCB inspection records		✓	
c.	PCB annual report		✓	

UNDERGROUND TANKS

Item		Attached	Not Applicable	Not Available
a.	Tank registrations	ABANDONED UNDERGROUND FUEL OIL TANK		
b.	Integrity/leak test results	ONE FULL YEAR OBSERVATION WELL MONITORING		
c.	Sizes(s) of tank(s)	10,000 GALLON CAPACITY		

DUFFY AVENUE FACILITY

d.	Age(s) of the tank(s)	✓
e.	Material tank(s) is constructed of	✓
f.	Material(s) stored in tank(s)	✓
g.	Corrossion or leak detection systems	✓

EMPLOYEE/COMMUNITY RIGHT-TO-KNOW

		Attached	Not Applicable	Not Available
a.	Written Hazard Communication Standard Program	✓		
b.	Hazard Communication training attendance sheet			✓
c.	Inventory of hazardous chemicals on site			✓
d.	Correspondence with Local Emergency Planning Committee			✓

HEALTH AND SAFETY

		Attached	Not Applicable	Not Available
a.	Written respiration protection program	✓		
b.	Written confined space entry program		✓	
c.	Written laboratory safety program	✓		
d.	Written medical surveillance program	✓		
e.	Worker's compensation claims	✓		
f.	OSHA citations STAR PROGRAM		✓	
g.	Health and Safety training attendance sheets			✓

INTERNAL

Item		Attached	Not Applicable	Not Available
a.	Records retention policy			✓
b.	Environmental, health and safety policies	✓		

Forms Completed by Waste Disposal, Inc.

Form IC (continued)

Section VI	**Box A** code 1 is checked to indicate that the site is a RCRA large quantity generator (LQG). **Box B** is skipped according to the instructions on the form.
Section VII	**Box A** code 5 is enterd to indicate that the site had (other) RCRA-permitted or interim status storage during 1992. Code 3 is entered in **Box B** to indicate that the site treated, disposed, or recycled hazardous waste on-site during 1992 in units subject to RCRA permitting requirements. **One or more Forms PS are completed to describe these systems because the site treated, disposed, or recycled hazardous waste on-site in units subject to RCRA permitting requirements during 1992.** Code 1 is entered in **Box C** to indicate that no units exempt from RCRA permitting requirements were used to treat, dispose, or recycle hazardous waste during 1992.
Section VIII	represents waste minimization activity during 1991 and 1992. **Box A** is checked "Yes" because the site started a source reduction program. "No" is checked in "**Box B.** **Box C** is checked "Yes" to show that the site plans to construct a solvent recovery unit. In **Boxes D and E,** all items are checked "No" to indicate that none of the factors listed delayed or limited the site's ability to initiate new or additional source reduction or recycling activities during 1991 or 1992.

Modern Landfill
4499 Mount Pisgah Road
York, PA 17402
EPA ID#: PAD987395803
York County

Giant Cement Corporation
Highway 453 North at I-26
Harleyville, SC 29448
EPA ID#: SCD003351699
Dorchester County

Clean Harbors Environmental Services, Inc.
5 Miles South of Kimball on Highay 71
Kimball, NE 69145
EPA ID#: NED981723513
Kimball County

Clean Harbors Environmental Services, Inc.
7515 Harvest Road
Hopewell, VA 23875
EPA ID#: VAD988175055
Prince George County

Spring Grove Resource Recovery, Inc. (CHES – Cincinatti, OH)
4879 Spring Grove Avenue
Cincinatti, OH 45232
EPA ID#: OHD000816629
Hamilton County

Pine Grove Landfill
5131 Drinkle Road
Amanda, OH 43102
No EPA ID #
Fairfield County

Michigan Disposal
49350 North I-94 Service Drive
Belleville, MI 48111
EPA ID#: MID000724831
Wayne County

Covered facilities should calculate emissions of the *mixture* then adjust for concentration. Convert chemical fractions from weight to mole, calculate the *mixture*'s true vapor pressure, calculate the chemical's vapor mole fraction, calculate the average vapor molecular weight, and use storage tank equations to calculate *mixture* emissions. Then calculate the gaseous weight fraction and multiply by total *mixture* emissions to get each chemical's emissions. *Facilities* may choose to refer to EPA's technical guidance entitled Estimating Releases and Waste Treatment Efficiencies (1999 version)

B. Transfers to Off-site Locations for Further Waste Management

Off-site Transfer, Waste Broker, Recycle

554. How should a *covered facility* report a transfer in which it sends wastes containing a *toxic chemical* off-site to a waste broker who in turn sends the wastes to a recycling *facility*?

Covered facilities are required to report information on off-site transfers for purposes of recycling in both Sections 6 and 8 of the Form R. In Section 6, the *facility* should report the final disposition of which it has knowledge of the *toxic chemical* in the waste. When a *facility* knows that a *toxic chemical* in wastes sent to a broker is ultimately being recycled, but does not know the location of the recycler, the waste broker is considered the final destination, and the transfer should be reported as M93 (transfer to waste broker-recycling) along with the location of the waste broker. If the location of the recycler to whom the broker sends wastes containing the *toxic chemical* is known, the recycler is considered the final destination, and the transfer should be reported as recycling with the appropriate code. The location of the recycler, not the waste broker, should be reported. The *facility* would also report the amount of the listed *toxic chemical* sent off-site for recycling in Section 8.5 (Quantity Recycled Off-Site).

RELEASE/WASTE MANAGEMENT

Off-site Transfer

555. The Form R instructions require the listing of different types of on-site waste treatment for a particular wastestream. Does this apply to sequential treatment of a *toxic chemical* sent off-site? Should the same estimate for amount sent off-site be entered for both waste treatment steps or just the final treatment step?

The reporting *facility* is not required to list sequential waste treatment steps for waste sent off-site. The *facility* should report in Part II, Section 6.2 the one code that best describes the primary type of *waste management* activity occurring within the sequence and report the total quantity of the listed *toxic chemical* sent to this off-site location.

Off-site Transfer, RCRA ID Number, Landfill

566. What RCRA identification number does a *facility* list if it sends a non-hazardous waste containing a Section 313 *toxic chemical* to a solid waste landfill?

If an off-site location such as a solid waste landfill does not have a RCRA identification number, the *facility* would enter "NA" in the space provided. If the *facility* does have such a RCRA identification number, it must list the number, if known, even though the waste being transferred may not be a regulated RCRA hazardous waste.

Off-site Transfer, Release Reporting, Part II Section 6.2

567. A *covered facility* produces 200,000 pounds of a listed *toxic chemical* in waste annually. Of that amount, the *facility* treats 100,000 pounds on-site and sends 100,000 pounds to an off-site treatment plant that has a 99.9 percent efficiency. Can the *facility* factor in the efficiency when it reports the off-site transfer amount in Part II, Section 6.2 of the Form R?

Section 6.2 of the Form R requires you to report the actual amount of listed *toxic chemical* you send off-site. The efficiency would be taken into account by the off-site *facility* if they are reporting under Section 313. The 100,000 pounds of the *toxic chemical* that are treated on-site should be reported in Part II, Section 7A and in Section 8.

RELEASE/WASTE MANAGEMENT

Off-site Transfer, Fuel Blending, Heat Value, Energy Recovery, Metals, Ultimate Disposition

568. A *covered facility* sends a *toxic chemical* in a paint thinner waste to a firm for fuel blending purposes. Should the amount of toluene and xylene in the waste be reported on the Form R, Part II, Section 6 as a transfer off-site?

A *toxic chemical* in a wastestream sent off-site for waste fuel blending is considered combusted for energy recovery if the listed *toxic chemical* has a significant heat value and is combusted in an energy recovery device. EPA believes that waste blended into fuel will be combusted in an integrated energy recovery device. Where both elements are met, the quantity of the *toxic chemical* must be reported as an off-site transfer for purposes of energy recovery on the Form R. However, other reportable *toxic chemicals* in the waste (e.g., metal pigments) that are incombustible or that do not add significant heat value to energy recovery upon combustion must be reported as off-site transfers for purposes of waste treatment or *disposal*, as appropriate. Please note that metals cannot be treated or combusted for energy recovery purposes and, therefore, should be reported as *disposed* in Section 8 of the Form R, unless the *facility* has knowledge the metals are being recycled.

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threshold for this chemical, the owner or operator would also report the method and amount of energy recovery in Part II, Sections 7 and 8 on the Form R

Waste Management Activities, Recycle, Reuse, Metals

588. If a *covered facility* sends metal scraps containing chromium off-site to be remelted and subsequently reused, does it report the amount of *toxic chemical* in the metal as recycled off-site?

Assuming no contaminants are removed during the melting process, the chromium in the metal scraps is not actually being recovered but merely melted and reused. Therefore, the amount of the *toxic chemical* in the metal scraps would not be reportable in Part II, Sections 6.2 or 8 of the Form R. However, because the *facility* is repackaging and distributing the *toxic chemicals* in commerce, it should consider these amounts of the *toxic chemical* towards the *facility's processing* threshold. If the *covered facility* exceeds a chemical activity threshold, it is required to file a TRI Report for that chemical.

RELEASE/WASTE MANAGEMENT

PACs, Energy Recovery

589. EPCRA Section 313 listed polyaromatic compounds (PACs) are used as binders for coke in carbon anodes. The anodes are baked in a ring furnace and the PACs are combusted. The heating value of the PACs allow for a reduction in the use of natural gas. Should the amount of PACs combusted be reported as burned for energy recovery on the Form R?

In this scenario, EPCRA Section 313 chemicals are being burned in the process, not in a *waste management* activity. *Toxic chemicals* reported as *released* or otherwise managed as waste on the Form R, including quantities reported for energy recovery, should not include chemicals consumed during processing activities. Therefore, the PACs combusted as part of the process in a ring furnace, should not be included as combusted for energy recovery under EPCRA Section 313. These quantities should, however, be considered when making the *facility's otherwise use* threshold.

Waste Management Activities, Release Reporting, Waste Treatment, POTW, Metals, Part II Section 8

590. If I send ten pounds of chromium (or any metal) to a POTW or other wastewater treatment *facility* where should I report the ten pounds in Section 8 of the Form R?

Because metals cannot be destroyed, they should not be reported as treated in Part II, Section 8.6 or 8.7 of the Form R. If you do not know what the POTW does with the metal constituents they receive, you should assume they are *released* and report the ten pounds sent to a POTW in Part II, Section 8.1 on the Form R.

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exceed an activity threshold for only elemental lead, the report would only have to be based on *releases* and other *waste management* estimates from activities involving elemental lead only.

Compounds, Metals, Metal Compounds, Form R Submissions, Lead Compounds, Lead

422. A *covered facility* has determined that it needs to report under EPCRA Section 313 for both elemental lead and lead compounds. Can this *facility* file one Form R that takes into account both the *releases* and other *waste management* activities of lead and lead compounds, or is it required to report separately?

If a *covered facility* exceeds thresholds for both the parent metal and compounds of that same metal, it is allowed to file one joint Form R (e.g., one report for both lead compounds and elemental lead). EPA allows this because the *release* and other *waste management* information reported in connection with metal compounds will be the total pounds of the parent metal *released* and otherwise managed as a waste.

Compounds, Threshold Determination, Metal Compounds

423. An oxidation/reduction reaction that occurs as part of a waste treatment operation results in the formation of 2,500 pounds of lead chromate. How must a threshold determination be made for this compound?

Lead chromate meets the criteria for both a lead compound and a chromium compound. In such cases, the total amount of the compound *manufactured, processed,* or *otherwise used* must be applied to the threshold determination for both metal compound categories. The weight of the entire compound, not the weight of the parent metal, is applied for the threshold determination of each metal compound category.

Mining, Fertilizer, Nitrate Compounds, Ammonia, Chemical Conversion

424. A mining *facility* applies a commercial fertilizer that contains dry ammonium nitrate to the land as part of a mine reclamation project. Is the *facility* required to count the ammonium nitrate toward the *manufacturing* threshold for the ammonia listing and nitrate compounds listing when it rains on the fertilizer?

No. Ammonium nitrate is only converted to reportable chemicals when in solution and in this case the solutions are not created until after the chemical has been *released* into the *environment*. Therefore, the *facility* would not have to report for this activity since facilities are not required to report on conversions that take place in the *environment*.

Fume or Dust

Compounds, Chemical Qualifier, Fume or Dust

425. There are three chemicals on the list with the qualifier "fume or dust" (zinc, aluminum, and vanadium). What exactly is a "fume" or a "dust?"

TOXIC CHEMICALS

CONSTITUENT CONCENTRATION RANGE CODES:

01 — ≥ 90%
02 — ≥ 75% < 90%
03 — ≥ 50% < 75%
04 — ≥ 25% < 50%
05 — ≥ 10% < 25%
06 — ≥ 1% < 10%
07 — ≥ 0.1% < 1%
08 — ≥ 500 ppm < 0.1%
09 — ≥ 100 ppm < 500 ppm
10 — ≥ 10 ppm < 100 ppm
11 — ≥ 1 ppm < 10 ppm
12 — ≥ 0.1 ppm < 1 ppm
13 — ≥ 1 ppb < 0.1 ppm
14 — < 1 ppb

Hazardous Waste No. 3

Constituent Code	Concentration Range Code	Basis for Data
Y 311	05	2
Y		
Y		
Y		
Y		
Y		
Y		
Y		
Y		
Y		

Hazardous Waste No. 4

Constituent Code	Concentration Range Code	Basis for Data
Y 245	01	2
Y		
Y		
Y		
Y		
Y		
Y		
Y		
Y		
Y		

Hazardous Waste No. 5

Constituent Code	Concentration Range Code	Basis for Data
Y 245	01	2
Y		
Y		
Y		
Y		
Y		
Y		
Y		
Y		
Y		

Section III (Continued)

Continue to Box B if you checked "Yes".
Skip to Section IV if you checked "No".

Box B: EPA ID of facility waste was shipped to
Enter the 12-digit EPA ID of the facility to which the waste was shipped. If the facility does not have an EPA ID or is located in a foreign country, see the Special Instructions beginning on page 47. Be sure you double check the EPA ID Number for accuracy, it is very easy to make typographical errors when entering this number.

Box C: System type shipped to
Review the System Type Codes that begin on page 90. Enter the System Type Code that best describes the way in which the waste was managed at the facility reported in Box B. If you do not know how the waste was managed by the receiving facility you must contact them to find out. Blank values are not permitted.

Box D: Off-site availability code
Review the codes listed below. Enter the code that best describes the availability of the off-site facility for commercial hazardous waste management.

Code	Off-site availability
1	The off-site facility is a commercial treatment facility.
2	The off-site facility is available only to firms owned by the same company.
8	Don't know

Box E: Total quantity shipped in 1992
Enter the total quantity of the waste shipped to the facility during 1992. Report in the same unit of measure entered in Section II, Box C. Shipment quantities should equal the total quantity recorded on Uniform Hazardous Waste Manifests for this site during 1992, unless there were rejections or other complications.

Section IV: New Waste Reduction Activities in 1992

Section IV requests information on any new activities undertaken during 1992 that resulted in waste reduction. This information is collected to obtain a national cross section of waste reduction activity in 1992. It is not intended to provide a chronology of activity at your site. Detailed definitions of waste reduction and its component parts, source reduction and recycling, are provided below.

Source reduction means the reduction or elimination of hazardous waste stream at the source, usually within a process. Source reduction measures include process modifications, feedstock substitutions, improvements in feedstock purity, housekeeping and management practices, increases in the efficiency of machinery, and recycling within a process. Source reduction implies any action that reduces the toxicity or the amount of waste exiting a process.

Recycling means the use or reuse of waste as an effective substitute for a commercial product, or as an ingredient or feedstock in an industrial process. It also refers to the reclamation of useful constituent fractions within a waste material or the removal of contaminants from a waste to

EPA United States Environmental Protection Agency

FORM R

TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

WHERE TO SEND COMPLETED FORMS: 1. TRI Data Processing Center P.O.Box 1513 Lantham, MD 20703-1513 2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision

For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2002

SECTION 2. TRADE SECRET INFORMATION

2.1	Are you claiming the toxic chemical identified on page 2 trade secret? [ ] Yes (Answer question 2.2; Attach substantiation forms) [X] NO (Do not answer 2.2; Go to Section 3)	2.2	Is this copy [ ] Sanitized [ ] Unsanitized (Answer only if "YES" in 2.1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data availble to the preparers of this report.

Name and official title of owner/operator or senior management official:	Signature:	Date Signed:
CHARLES HAUGH VICE PRESIDENT		06/30/2003

SECTION 4. FACILITY IDENTIFICATION

4.1		TRI Facility ID Number	11801PRKNL220MI
Facility or Establishment Name	SULZER METCO (US), INC.	Facility or Establishment Name or Mailing Address (if different from street address)	SULZER METCO (US), INC.
Street	220 MILLER PLACE	Mailing Addres	1101 PROSPECT AVENUE
City/County/State/Zip Code	HICKSVILLE NASSAU NY 11801	City/State/Zip Code	WESTBURY NY 11590
		Country (Non-US	

4.2	This report contains information for: (Important: check a or b; check c or d if applicable)	a. [X] An entire facility	b. [ ] Part of a facility	c. [ ] A Federal facility	d. [ ] GOCO
4.3	Technical Contact Name	PETER DIPIETRANTONIO		Telephone Number (include area code)	(516) 338-2337
	Email Address	peterdipietrantonio@sulzer.com			
4.4	Public Contact Name	CHARLES HAUGH		Telephone Number (include area code)	(516) 338-2249

4.5	SIC Code (s) (4 digits)	Primary					
		a. 3499	b.	c.	d.	e.	f.

4.6	Latitude	Degrees	Minutes	Seconds	Longitude	Degrees	Minutes	Seconds
		40	47	10		073	31	00

4.7 Dun & Bradstreet Number(s) (9 digits)	4.8 EPA Identification Number (RCRA I.D. No.) (12 characters)	4.9 Facility NPDES Permit Number(s) (9 characters)	4.10 Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)
a. 152084398	a. NYD981558570	a. NA	a. NA
b.	b.	b.	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA [ ]	SULZER US INDUSTRIES HOLDING INC.
5.2	Parent Company's Dun & Bradstreet Number	NA [ ]	001826957

Copy - Data Submitted

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION

TRI Facility ID Number
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
Cobalt

SECTION 1. TOXIC CHEMICAL IDENTITY
(Important: DO NOT complete this section if you completed Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.) 7440-48-4
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Cobalt
1.3	Generic Chemical Name (Important: Complete only if Part 1, Section 2.1 is checked "Yes". Generic Name must be structurally descriptive.) NA

1.4 Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.
(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0.01 and 100. Distribution should be reported in percentages and the total should equal 100%. If you do not have speciation data available, indicate NA.)

NA	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17

SECTION 2. MIXTURE COMPONENT IDENTITY
(Important: DO NOT complete this section if you completed Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.) NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY
(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:	3.2 Process the toxic chemical:	3.3 Otherwise use the toxic chemical:
a. [ ] Produce b. [ ] Import		
If produce or import:	a. [ ] As a reactant	a. [ ] As a chemical processing aid
c. [ ] For on-site use/processing	b. [X] As a formulation component	b. [ ] As a manufacturing aid
d. [ ] For sale/distribution	c. [ ] As an article component	c. [ ] Ancillary or other use
e. [ ] As a byproduct	d. [X] Repackaging	
f. [ ] As an impurity	e. [ ] As an impurity	

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	03	(Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

			A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	NA	0	O	
5.2	Stack or point air emissions	NA	27	E	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
	Stream or Water Body Name				
5.3.1	NA				
5.3.2					
5.3.3					

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box and indicate the Part II, Section 5.3 page number in this box. **(example: 1,2,3, etc.)**

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1- 10 pounds; B= 11- 499 pounds; C= 500 - 999 pounds.

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
Cobalt

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		NA	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite to Class I Wells	X		
5.4.2	Underground Injection onsite to Class II-V Wells	X		
5.5	Disposal to land onsite			
5.5.1.A	RCRA Subtitle C landfills	X		
5.5.1.B	Other landfills	X		
5.5.2	Land treatment/application farming	X		
5.5.3	Surface Impoundment	X		
5.5.4	Other disposal	X		

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B. 1	POTW Name	NA					
POTW Address							
City		State		County		Zip	
6.1.B.	POTW Name						
POTW Address							
City		State		County		Zip	

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box [ ] **and indicate the Part II, Section 6.1 page number in this box** [ ] **(example: 1,2,3, etc.)**

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1 Off-Site EPA Identification Number (RCRA ID No.)	PAD987395803							
Off-Site Location Name	MODERN LANDFILL							
Off-site Address	4499 MOUNT PISGAH ROAD							
City	YORK	State	PA	County	YORK	Zip	17402	Country (Non-US)
Is location under control of reporting facility or parent company?						Yes	X	No

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1- 10 pounds; B= 11- 499 pounds; C= 500 - 999 pounds.

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
Cobalt

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 12934	1. C	1. M41
2. NA	2.	2.
3.	3.	3.
4.	4.	4.

6.2. 2 Off-Site EPA Identification Number (RCRA ID No.) MID000724831

Off-Site location Name	MICHIGAN DISPOSAL
Off-site Address	49350 NORTH I-94 SERVICE DRIVE

City	BELLEVILLE	State	MI	County	WAYNE	Zip	48111	Country (Non-US)	

Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 34	1. C	1. M41
2. NA	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data ?
7A.1a	7A.1b 1 2 3 4 5 6 7 8	7A.1c	7A.1d %	7A.1e Yes No
7A.2a	7A.2b 1 2 3 4 5 6 7 8	7A.2c	7A.2d %	7A.2e Yes No
7A.3a	7A.3b 1 2 3 4 5 6 7 8	7A.3c	7A.3d %	7A.3e Yes No
7A.4a	7A.4b 1 2 3 4 5 6 7 8	7A.4c	7A.4d %	7A.4e Yes No
7A.5a	7A.5b 1 2 3 4 5 6 7 8	7A.5c	7A.5d %	7A.5e Yes No

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box [ ]
and indicate the Part II, Section 6.2/7A page number in this box: [ ] **(example: 1,2,3, etc.)**

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1- 10 pounds; B= 11- 499 pounds; C= 500 - 999 pounds.

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
Cobalt

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [enter 3-character code(s)]

1	2	3	4

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] Not Applicable (NA) - Check here if no on-site recyling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [enter 3-character code(s)]

1	2	3	4	5
6	7	8	9	10

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1	Quantity released ***	12672	12995	10000	NA
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	NA	NA	NA	NA
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	NA	NA	NA	NA
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)			NA	
8.9	Production ratio or activity index			1.03	

8.10	Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.			
	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.
8.11	Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one Box)			Yes [ ] No [X]

EPA Form 9350-1 (Rev. 03/2003) - Previous editions are obsolete.

*For Dioxin or Dioxin-like compounds, report in grams/year

***Report releases pursuant to EPCRA Section 329 (8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated onsite.

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
REGULATORY FEE DETERMINATION UNIT
Box 5973 GPO
New York, New York 10087-5973

INVOICE NUMBER: 253541150000

INVOICE DATE: 09/10/2007

PAGE: 1

MAIL TO: SULZER METCO (US) INC
1101 PROSPECT AVE
WESTBURY, NY 11590

Legally Responsible Party (LRP):
SULZER METCO (US) INC
1101 PROSPECT AVE
WESTBURY, NY 11590-2724

RETURN THIS PAGE WITH YOUR CHECK MADE PAYABLE TO

"NYS ENVIRONMENTAL CONSERVATION" TO THE FOLLOWING ADDRESS:

NYS Department of Environmental Conservation
Regulatory Fee Determination Unit
Box 5973 GPO
New York, New York 10087-5973

Note: State agencies may charge a returned check fee of $ 20.00 per returned check.

>>>> TOTAL ENVIRONMENTAL REGULATORY PROGRAM FEE

TOTAL FEE ASSESSED	PAYMENTS/CREDITS TO DATE	BALANCE
$ 1,440.00	$ 0.00	$ 1,440.00

AMOUNT DUE THIS STATEMENT	PAST DUE AMOUNT	PENALTIES	INTEREST	TOTAL AMOUNT DUE
$ 1,440.00	$ 0.00	$ 0.00	$ 0.00	$ 1,440.00

*** YOUR PAYMENT MUST BE RECEIVED BY 10/10/2007 ***

< Invoice Number 253541150000 continued on page 2 >

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
REGULATORY FEE DETERMINATION UNIT
Box 5973 GPO
New York, New York 10087-5973

INVOICE NUMBER: 253541150000

INVOICE DATE: 09/10/2007

MAIL TO: SULZER METCO (US) INC
1101 PROSPECT AVE
WESTBURY, NY 11590

BILLING PERIOD: 01/01/2007-12/31/2007

>>>> 2007 AIR POLLUTION PROGRAM FEES

DEC ID/ EP ID	FACILITY NAME AND ADDRESS	COMB (MMBTU)	PROC (TPY)	INCIN (LBS)	FEE AMOUNT
1282200776	SULZER METCO US INC 1101 PROSPECT AVE WESTBURY, NY 11590				
00031			< 25		$ 160.00
00028			< 25		160.00
00024			< 25		160.00
00023			< 25		160.00
00029			< 25		160.00
00022			< 25		160.00
00021			< 25		160.00
00030			< 25		160.00
00027			< 25		160.00

TOTAL AIR QUALITY CONTROL PROGRAM FEE: $ 1,440.00

2007 TOTAL AIR POLLUTION PROGRAM FEES: $ 1,440.00

< Invoice Number 253541150000 continued on page 3 >

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
REGULATORY FEE DETERMINATION UNIT
Box 5973 GPO
New York, New York 10087-5973

INVOICE NUMBER: 253541150000

>>>> 2007 ENVIRONMENTAL REGULATORY PROGRAM FEE

TOTAL FEE ASSESSED	PAYMENTS/CREDITS TO DATE	BALANCE
$ 1,440.00	$ 0.00	$ 1,440.00

AMOUNT DUE THIS STATEMENT	PAST DUE AMOUNT	PENALTIES	INTEREST	TOTAL AMOUNT DUE
$ 1,440.00	$ 0.00	$ 0.00	$ 0.00	$ 1,440.00

THIS INVOICE INCLUDES PAYMENTS RECEIVED AND CREDITED AS OF 08/29/2007.

*** YOUR PAYMENT MUST BE RECEIVED BY 10/10/2007 ***

PLEASE TAKE NOTICE THAT PURSUANT TO 6 NYCRR SECTION 481.9 (c), THE DEPARTMENT SHALL DENY CHALLENGES TO THE AMOUNT OF THE REGULATORY PROGRAM FEE IF (1) YOU FAIL TO MAKE YOUR REQUEST FOR A RECALCULATION OF THE FEE WITHIN 30 BUSINESS DAYS OF THE DATE OF THE DEPARTMENT'S ORIGINAL INVOICE; (2) YOU FAIL TO MAKE PAYMENT IN FULL OF THE UNDISPUTED AMOUNT OF THE ANNUAL PROGRAM FEE; AND (3) YOU FAIL TO GIVE A SPECIFIC REASON FOR CHALLENGING THE FEE. A NEW FEE RECALCULATION REQUEST MUST BE SUBMITTED FOR EACH YEAR'S ASSESSMENT, REGARDLESS OF THE STATUS OF A RECALCULATION REQUEST YOU HAVE FILED FOR THE PREVIOUS YEAR(S).

A person failing to pay an annual program fee within 30 days of the date prescribed in 6 NYCRR section 481.3 must pay interest under section 481.6. Interest will continue to accrue during a challenge. There is no provision for challenging interest assessed.

A person failing to pay an annual program fee within 45 days of the date prescribed in 6 NYCRR section 481.3 must pay a penalty under section 481.5. Penalties assessed will include the time period for a challenge if the challenge is resolved in favor of the Department.

If you have any questions regarding this bill, you may call the Regulatory Fee Determination Unit's TOLL FREE INFORMATION NUMBER (1-800-225-2566) between 9:00 a.m. - 12:00 p.m. and 1:30 p.m. - 4:00 p.m. Monday through Friday.

Forms to dispute the Department's Environmental Regulatory Fee or forms to have the permit(s) transferred to a new owner may be obtained in person at any of the Department's Regional Offices, or by telephoning the Department's 24-hour TOLL FREE FORMS NUMBER (1-800-544-5252). THE TOLL FREE FORMS NUMBER IS RESERVED FOR REQUESTING DISPUTE OR TRANSFER FORMS ONLY.

To: Accounting Department

SULZER

SULZER METCO

REQUEST #

CHECK REQUEST

DATE	VOUCHER #	VENDOR CODE
09/24/07		2902230

NAME
NYS Dept. of Environmental Conservation

STREET	CITY	STATE	ZIP
Box 5973 GPO	New York	NY	10087-5973

AMOUNT		AMOUNT WRITTEN
$$	$1,440.00	Fourteen hundred forty dollars and 00 cents

REASON
2007 air pollution program fees for 1101 Prospect Avenue

CHARGE ACCOUNT	ACCOUNT EXTENSION:	REQUESTED BY	APPROVAL BY
3000393	53112060		

SPECIAL INSTRUCTIONS
Please return check to Marian Feldhusen

Monday, September 24, 2007

To: Accounting Department

SULZER

SULZER METCO

REQUEST #

CHECK REQUEST

DATE	VOUCHER #	VENDOR CODE
09/24/07		2902230

NAME
NYS Dept. of Environmental Conservation

STREET	CITY	STATE	ZIP
Box 5973 GPO	New York	NY	10087-5973

AMOUNT		AMOUNT WRITTEN
$$	$1,440.00	Fourteen hundred forty dollars and 00 cents

REASON
2007 air pollution program fees for 1101 Prospect Avenue

CHARGE ACCOUNT	ACCOUNT EXTENSION:	REQUESTED BY	APPROVAL BY
3000393	53112060		

SPECIAL INSTRUCTIONS
Please return check to Marian Feldhusen

RECEIVED
SEP 25 2007
ACCOUNTING

SCANNED
SEP 25 2007

Monday, September 24, 2007

Sulzer Metco (US) Inc.

Remittance Advice

Invoice Date	Vendor Invoice Payment Explanation	Our PO Number	Gross Amount	Discount	Net Amount
09/10/2007	253541150000	200125700	1,440.00	0.00	1,440.00
				TOTAL	1,440.00

ATTACHED CHECK IS TENDERED IN FULL PAYMENT AS NOTED ABOVE

Check no. **71736**

DETACH BEFORE DEPOSITING CHECK

Vendor no. **2902230**

SULZER

Sulzer Metco (US) Inc.
1101 Prospect Avenue
Westbury, NY 11590

Bank of America
Controlled Disbursement
Bank of America, N.A.
Atlanta, Dekalb County, Georgia

Date
09/26/2007

64-1278
611 GA

No. 71736

Amount
$1,440.00

ONE THOUSAND FOUR HUNDRED FORTY USD

PAY TO THE ORDER OF
NYS ENVIRONMENTAL CONSERVATION
REGULATORY FEE DETERMINATION UNIT
PO Box 5973 GPO
NEW YORK NY 10087-5973

Void after 90 days

Two(2) signatures required over $50,000.00

⑈71736⑈ ⑆061112788⑆ 3299032666⑈

See Reverse Side For Easy Opening Instructions

SULZER

Sulzer Metco (US) Inc.
1101 Prospect Avenue
Westbury, NY 11590

NYS ENVIRONMENTAL CONSERVATION
REGULATORY FEE DETERMINATION UNIT
PO Box 5973 GPO
NEW YORK NY 10087-5973

MATERIAL SAFETY DATA SHEET

EFFECTIVE DATE: November 1, 1983

Union Carbide Corporation urges the customer receiving this Material Safety Data Sheet to study it carefully to become aware of hazards, if any, of the product involved. In the interest of safety you should (1) notify your employees, agents, and contractors of the information on this sheet, (2) furnish a copy to each of your customers for the product, and (3) request your customers to inform their employees and customers as well.

PRODUCT NAME: UCAR® LATEX 879

CHEMICAL NAME:

CHEMICAL FAMILY: Styrene Acrylic Latex

DEPARTMENT OF TRANSPORTATION		
	Hazard Classification	None
	Shipping Name	None

CAS #	CAS NAME	Not Available (mixture)

BOILING POINT, 760 mm Hg	~100°C (212°F)	FREEZING POINT	~0°C
SPECIFIC GRAVITY (H_2O = 1)	~1.07	VAPOR PRESSURE at 20°C.	~17.5mm Hg
VAPOR DENSITY (air = 1)	<1 (Water)	SOLUBILITY IN WATER, % by wt.	Dilutable
PERCENT VOLATILES BY VOLUME	~54 wt.% (Water)	EVAPORATION RATE (Butyl Acetate = 1)	~1
APPEARANCE AND ODOR	White, milky fluid; mild odor.		

MATERIAL	%	TLV	HAZARD
See Page 4			

FLASH POINT [TEST METHOD(S)]	Closed Cup Not Determined (Aqueous System) None Open Cup			
FLAMMABLE LIMITS IN AIR, % by volume	LOWER	Not Determined (Aqueous System)	UPPER	Not Determined (Aqueous System)
EXTINGUISHING MEDIA	The latex will not burn until water has evaporated. For residual solids: use water spray, carbon dioxide, dry chemical, alcohol-type or universal-type foams applied by manufacturers recommended techniques.			
SPECIAL FIRE FIGHTING PROCEDURES	None			
UNUSUAL FIRE AND EXPLOSION HAZARDS	None			

See Section III. Values from ACGIH, 1982, Notice of Intended Changes; OSHA CFR 29, para, 1910.1045, exemption (a) 2 (ii) and para. 1910.1000, Table Z-2

SWALLOWING	None currently known. May cause some nausea.
SKIN ABSORPTION	None currently known.
INHALATION	None currently known.
SKIN CONTACT	May cause transient reddening of skin.
EYE CONTACT	None currently known.

None currently known.

None currently known.

This latex may contain small amounts (about 0.3%) of free formaldehyde, which has been shown to cause cancer in laboratory animals but for which there is no evidence that it may cause cancer in humans. There should be minimal risk when used with ventilation adequate to keep the atmospheric concentration of formaldehyde below the recommended exposure limit of 1 ppm.

SWALLOWING	No harmful effects expected.
SKIN	Wash with soap and water.
INHALATION	No emergency care anticipated.
EYES	Flush with water.

NOTES TO PHYSICIAN
Toxicology studies have shown similar material to be of very low acute toxicity. There is no specific antidote. Treatment of overexposure should be directed at the control of symptoms and the clinical condition.
ADDITIONAL COMMENTS: 1) Contains a maximum of 10 ppm acrylonitrile, classified by OSHA as a human carcinogen. Avoid breathing vapors in the top of the shipping container.

STABILITY		CONDITIONS TO AVOID	None
UNSTABLE	STABLE		
	X		

INCOMPATIBILITY (materials to avoid)	None
HAZARDOUS COMBUSTION OR DECOMPOSITION PRODUCTS	When water evaporates, polymer can burn and produce carbon monoxide, carbon dioxide and oxides of nitrogen.

HAZARDOUS POLYMERIZATION		CONDITIONS TO AVOID	None
May Occur	Will Not Occur		
	X		

STEPS TO BE TAKEN IF MATERIAL IS RELEASED OR SPILLED	Major spills should be collected for disposal. Minor spills may be flushed to sewer if local regulations permit.
WASTE DISPOSAL METHOD	Bury in suitable landfill where permitted under appropriate government regulations.

RESPIRATORY PROTECTION	None required.
VENTILATION	General (mechanical) room ventilation is expected to be satisfactory.

PROTECTIVE GLOVES	Recommended	EYE PROTECTION	Safety glasses
OTHER PROTECTIVE EQUIPMENT	Eye Bath		

PRECAUTIONS TO BE TAKEN IN HANDLING AND STORING
Avoid breathing vapors, particularly those in the top of the shipping container.
Keep container closed.
Use with adequate ventilation.

FOR INDUSTRY USE ONLY

OTHER PRECAUTIONS
None

The opinions expressed herein are those of qualified experts within Union Carbide Corporation. We believe that the information contained herein is current as of the date of this Material Safety Data Sheet. Since the use of this information and these opinions and the conditions of use of the product are not within the control of Union Carbide Corporation, it is the user's obligation to determine the conditions of safe use of the product.

MATERIAL	%	TLV	HAZARD
Styrene-Acrylic Copolymer	~46	None Established	None Currently Known.
Formaldehyde	~0.3	1 ppm, ACGIH 3 ppm, OSHA	Toxic, irritant, animal carcinogen.
Acrylonitrile	<0.001	2 ppm (skin)	Carcinogen
Water	~54	--	--

Site Address:
SAME

9/20/05

PPW 08/25/2005
WORK ORDER NO. 331028720

DOCUMENT NO. 63483

STRAIGHT BILL OF LADING

TRANSPORTER 1 Clean Harbors Env Services Inc VEHICLE ID #

EPA ID # M A D 0 3 9 3 2 2 2 5 0 TRANS. 1 PHONE (781) 849-1800

TRANSPORTER 2 VEHICLE ID #

EPA ID # TRANS. 2 PHONE

DESIGNATED FACILITY			SHIPPER		
Spring Grove Resource Recovery			Sulzer Metco US Inc		
FACILITY EPA ID #			SHIPPER EPA ID #		
O H D 0 0 0 8 1 6 6 2 9			N Y D 1 3 1 3 1 8 6 5 1		
ADDRESS			ADDRESS		
4879 Spring Grove Avenue			1101 Prospect Avenue		
CITY	STATE	ZIP	CITY	STATE	ZIP
Cincinnati	OH	45232	Westbury	NY	11590

CONTAINERS NO. & SIZE	TYPE	HM	DESCRIPTION OF MATERIALS	TOTAL QUANTITY	UNIT WT/VOL
			A. NON DOT REGULATED MATERIAL, (ABSORBENT PADS, OIL FILTERS), N/A, NONE		
			B. NON DOT REGULATED MATERIAL, (MAGNESIUM OXIDE, TITANIUM OXIDE), N/A, NONE		
			C. NON DOT REGULATED MATERIAL, (WATER SOLUBLE OIL), N/A, NONE		
			D. NON DOT REGULATED MATERIAL, (NYLON SOLIDS), N/A, NONE		
			E. NON DOT REGULATED MATERIAL, (METAL/CERAMIC POWDER & WATER), NONE, NONE		
			F. NON DOT REGULATED MATERIAL, (UNIVERSAL WASTE LIGHT TUBES), NONE, NONE		
			G. NON DOT REGULATED MATERIAL, (PETROLEUM OIL), NONE, NONE		
			H.		

SPECIAL HANDLING INSTRUCTIONS EMERGENCY PHONE #: (800) 483-3718
A: CH189102 B: CH189107 C: CH189141 D: CH189144 E: CH189134 F: CHCFL1-63 G: CH189111
NJDEP#07259 DECAL#

SHIPPERS CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

	PRINT	SIGN	DATE
SHIPPER			
TRANSPORTER 1			
TRANSPORTER 2			
RECEIVED BY			

1

CHI 107

NYG 3704418

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

D31028720
PPW 08/25/2005
(Amended Waste Manifest 1/23/03)

Please type or print. Do not staple

GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No. NYD131318651	Manifest Doc. No.	2. Page 1 of 1	Information within heavy bold line is not required by Federal Law.

3. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Telephone Number (516 338-2337

A. NYG 3704418

B. Generator's ID SAME

5. Transporter 1 (Company Name) Clean Harbors Env Services Inc

6. US EPA ID Number MAD039322250

C. State Transporter's ID

D. Transporter's Telephone (781 849-1800

7. Transporter 2 (Company Name)

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4879 Spring Grove Avenue
Cincinnati, OH, 45232

10. US EPA ID Number OHD000816629

G. State Facility ID

H. Facility Telephone (513 681-5738

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II					EPA D002 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
ERG#154 (L)(C,E)
COPPER CLEANER/CHROMIC ACID
a. c.
b. d.

K. Handling Codes for Wastes Listed Above
a. c.
b. d.

15. Special Handling Instructions and Additional Information
11a: CH189142 D006 D007 D008 NJDEP#07259 DECAL#

EMERGENCY PHONE #: (800) 483-3718

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Mo. Day Year

COPY 1—Disposer State—Mailed by TSD Facility

COPY 2—Disposer State—Mailed by Generator

Emergency Spill Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

PERKIN ELMER

The Perkin-Elmer Corporation
Metco Division
1101 Prospect Avenue — PO Box 1006
Westbury New York 11590-0201
Phone (516) 334-1300
Fax (516) 338-2477
RCA 229913

February 28, 1994

Fire Chief
Hicksville Fire Department
E. Marie Street
Hicksville, NY 11801

Ref: SARA TITLE III - Tier II Reports

Dear Sir/Madam:

Enclosed please find the SARA TITLE III - Tier II Reports for our three facilities.

If we could be of further assistance, please contact me.

Sincerely,

Joseph Macri
Manager Facilities

JM:amm
Enclosures
cc: A.B. Mazzone
C.L. Conroy

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee

3. Article Addressed to:

Fire Chief
Hicksville Fire Department
E. Marie Street
Hicksville, NY 11801

4a. Article Number

P 617 295 569

4b. Service Type

☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

PS Form **3811**, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

Print your name, address and ZIP Code here

Joseph Macri
Perkin-Elmer Metco Division
1101 Prospect Avenue
Westbury, NY 11590

42

Fire Chief
Hicksville Fire Department
E. Marie Street
Hicksville, NY 11801

P 617 295 569

Certified Mail Receipt
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

UNITED STATES POSTAL SERVICE

Sent to Fire Chief
Hicksville Fire Department
Street & No. E. Marie Street
P.O., State & ZIP Code Hicksville, NY 11801

Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form **3800**, June 1990

Fold at line over top of envelope to the right of the return address.

CERTIFIED MAIL

P 617 295 569

Is your **RETURN ADDRESS** completed on the reverse side?

SENDER:
- Complete items 1 and/or 2 for additional services
- Complete items 3, and 4a & b
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
Fire Chief
Hicksville Fire Department
E. Marie Street
Hicksville, NY 11801

4a. Article Number
P 617 295 569

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form **3811**, December 1991 ★U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

Form Approved OMB No. 2050-0072

Tier Two
EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: PERKIN-ELMER CORPORATION METCO DIVISION
Street: 1101 PROSPECT AVENUE
City: WESTBURY County: NASSAU State: NY Zip: 11590
SIC Code: 3542 Dun & Brad Number: 05-773-1663

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name
Name: JOSEPH MACRI Phone: 516 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact
Name: JOSEPH MACRI Title: MANAGER FACILITIES
Phone: 516 334-1300 EXT. 2374 24 Hr Phone: 800 424-9300
CHEMTREC
Name: Title:
Phone: 24 Hr Phone:

Important Read all instructions before completing form

Reporting Period: From January 1 to December 31 19 93

[X] Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential)	Optional
CAS 7429-90-5 Trade Secret [ ] Chem Name: ALUMINUM Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name:	[X] Fire [ ] Sudden Release of Pressure [X] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	Container Type: N; Pressure: 1; Temperature: 4 Storage Locations: STOCK WAREHOUSE	[ ]
CAS 13444-28-1 Trade Secret [ ] Chem Name: ALUMINUM OXIDE Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name:	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	Container Type: N; Pressure: 1; Temperature: 4 Storage Locations: STOCK WAREHOUSE	[ ]
CAS 7439-89-6 Trade Secret [ ] Chem Name: IRON Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name:	[X] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	Container Type: N; Pressure: 1; Temperature: 4 Storage Locations: STOCK WAREHOUSE	[ ]

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 2 and that based on my inquiry of those individuals responsible for obtaining the information I believe that the submitted information is true accurate and complete

JOSEPH MACRI — MANAGER FACILITIES — Joseph Macri — 02-28-94
Name and official title of owner operator OR owner operator s authorized representative — Signature — Date signed

Optional Attachments
[ ] I have attached a site plan
[ ] I have attached a list of site coordinate abbreviations
[ ] I have attached a description of dikes and other safeguard measures

Form Approved OMB No 2050 0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name PERKIN-ELMER CORPORATION METCO DIVISION
Street 1101 PROSPECT AVENUE
City WESTBURY County NASSAU State NY Zip 11590
SIC Code 3542 Dun & Brad Number 05-773-1663

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name
Name JOSEPH MACRI Phone 516 334-1300
Mail Address 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact
Name JOSEPH MACRI Title MANAGER FACILITIES
Phone 516 334-1300 EXT. 2374 24 Hr Phone 800 424-9300
CHEMTREC
Name Title
Phone 24 Hr Phone

Important Read all instructions before completing form

Reporting Period From January 1 to December 31 19 93

[X] Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7440 02 0 Trade Secret [ ] Chem Name NICKEL Check all that apply: Pure [X] Mix [X] Solid [X] Liquid [ ] Gas [ ] EHS [ ] EHS Name	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 STOCK WAREHOUSE	[ ]
CAS [ ] Trade Secret [ ] Chem Name Check all that apply: Pure [ ] Mix [ ] Solid [ ] Liquid [ ] Gas [ ] EHS [ ] EHS Name	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [ ] Immediate (acute) [ ] Delayed (chronic)	Max. Daily Amount (code) Avg. Daily Amount (code) No. of Days On-site (days)		[ ]
CAS [ ] Trade Secret [ ] Chem Name Check all that apply: Pure [ ] Mix [ ] Solid [ ] Liquid [ ] Gas [ ] EHS [ ] EHS Name	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [ ] Immediate (acute) [ ] Delayed (chronic)	Max. Daily Amount (code) Avg. Daily Amount (code) No. of Days On-site (days)		[ ]

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Form Approved OMB No 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: PERKIN-ELMER CORPORATION METCO DIVISION
Street: 220 MILLER PLACE
City: HICKSVILLE County: NASSAU State: NY Zip: 11801
SIC Code: 3399 Dun & Brad Number: 05-773-1663

FOR OFFICIAL USE ONLY — ID #: ____ Date Received: ____

Owner/Operator Name

Name: JOSEPH MACRI Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact

Name: JOSEPH MACRI Title: MANAGER FACILITIES
Phone: (516) 334-1300 EXT. 2374 24 Hr Phone: (800) 424-9300
CHEMTREC
Name: ____ Title: ____
Phone: ( ) ____ 24 Hr Phone: ( ) ____

Important Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19 93

[X] Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) — Storage Locations	Optional
CAS 7440-02-0 Trade Secret [ ] Chem Name: NICKEL Check all that apply: Pure [X] Mix [X] Solid [X] Liquid [ ] Gas [ ] EHS [ ] EHS Name:	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 WAREHOUSE, PRODUCTION FLOOR N 1 4 PRODUCTION FLOOR R 1 4 PRODUCTION FLOOR - HARDENED STEEL HOPPERS E 1 4 WAREHOUSE, PRODUCTION FLOOR I 1 4 PRODUCTION FLOOR	[ ]
CAS 7440-47-3 Trade Secret [ ] Chem Name: CHROMIUM Check all that apply: Pure [X] Mix [X] Solid [X] Liquid [ ] Gas [ ] EHS [ ] EHS Name:	[X] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 WAREHOUSE, PRODUCTION FLOOR N 1 4 PRODUCTION FLOOR R 1 4 PRODUCTION FLOOR - HARDENED STEEL HOPPERS E 1 4 WAREHOUSE, PRODUCTION FLOOR I 1 4 PRODUCTION FLOOR	[ ]
CAS 7440-48-4 Trade Secret [ ] Chem Name: COBALT Check all that apply: Pure [X] Mix [X] Solid [X] Liquid [ ] Gas [ ] EHS [ ] EHS Name:	[X] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 WAREHOUSE, PRODUCTION FLOOR N 1 4 PRODUCTION FLOOR R 1 4 PRODUCTION FLOOR - HARDENED STEEL HOPPERS E 1 4 WAREHOUSE, PRODUCTION FLOOR I 1 4 PRODUCTION FLOOR	[ ]

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Name and official title of owner/operator OR owner/operator's authorized representative — Signature — Date signed

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[ ] I have attached a description of dikes and other safeguard measures

Form Approved OMB No 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: PERKIN-ELMER CORPORATION METCO DIVISION
Street: 220 MILLER PLACE
City: HICKSVILLE County: NASSAU State: NY Zip: 11801
SIC Code: 3999 Dun & Brad Number: 05-773-1663

FOR OFFICIAL USE ONLY — ID #: ____ Date Received: ____

Owner/Operator Name

Name: JOSEPH MACRI Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact

Name: JOSEPH MACRI Title: MANAGER FACILITIES
Phone: (516) 334-1300 EXT. 2374 24 Hr Phone: (800) 424-9300
CHEMTREC
Name: ____ Title: ____
Phone: ( ) ____ 24 Hr Phone: ( ) ____

Important Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19 93

[X] Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Confidential
CAS 7429-90-5 Trade Secret [ ] Chem Name: ALUMINUM Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name:	[X] Fire [ ] Sudden Release of Pressure [X] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 14 WAREHOUSE, PRODUCTION FLOOR N 14 PRODUCTION FLOOR R 14 PRODUCTION FLOOR - HARDENED STEEL HOPPERS E 14 PRODUCTION FLOOR I 14 PRODUCTION FLOOR	[ ]
CAS 1344-25-1 Trade Secret [ ] Chem Name: ALUMINUM OXIDE Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name:	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 14 WAREHOUSE, PRODUCTION FLOOR N 14 PRODUCTION FLOOR R 14 PRODUCTION FLOOR - HARDENED STEEL HOPPERS E 14 PRODUCTION FLOOR I 14 PRODUCTION FLOOR	[ ]
CAS 1314-23-4 Trade Secret [ ] Chem Name: ZIRCONIUM OXIDE Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name:	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [ ] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 14 WAREHOUSE, PRODUCTION FLOOR N 14 PRODUCTION FLOOR R 14 PRODUCTION FLOOR - HARDENED STEEL HOPPERS E 14 PRODUCTION FLOOR I 14 PRODUCTION FLOOR	[ ]

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JOSEPH MACRI — MANAGER FACILITIES — Joseph Macri — 02-28-94
Name and official title of owner/operator OR owner/operator's authorized representative — Signature — Date signed

Optional Attachments

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[ ] I have attached a list of site coordinate abbreviations
[ ] I have attached a description of dikes and other safeguard measures

MATERIAL SAFETY DATA SHEET

PRODUCT NAME: PUTTY BROWN W/P S.G BE
PRODUCT CODE: 71-72995

HMIS CODES: H F R P
2 2 0 J

SECTION I - MANUFACTURER IDENTIFICATION

MANUFACTURER'S NAME: HARTIN PAINT & FILLER CO.
ADDRESS: 225 BROAD STREET. CARLSTADT NEW JERSEY 07072
EMERGENCY PHONE: 201-438-3300 **INFORMATION PHONE:** SAME
DATE REVISED : 09-20-89 **NAME OF PREPARER** :

SECTION II - HAZARDOUS INGREDIENTS/SARA III INFORMATION

HAZARDOUS COMPONENTS	CAS NUMBER	OCCUPATIONAL EXPOSURE LIMITS OSHA PEL	ACGIH TWA	TLV STEL	VAPOR PRESSURE mm Hg	@ TEMP	WEIGHT PERCENT
*GLYCOL ETHER	111-76-2	50	25	(75)	1.0	68F	2
*ALCOHOL	67-63-0	400	400	500	33.0	68F	2

* Indicates toxic chemical(s) subject to the reporting requirements of section 313 of Title III and of 40 CFR 372.
MAY ALSO CONTAIN THE FOLLOWING PRODUCTS: TITANIUM DIOXIDE [CAS # 13463-67-7] CARBON BLACK [CAS # 1333-86-4]
MAGNESIUM SILICATE [CAS #14807-96-6]

SECTION III - PHYSICAL/CHEMICAL CHARACTERISTICS

BOILING RANGE: 181 to 340 Deg F **SPECIFIC GRAVITY (H2O=1):** 1.1
VAPOR DENSITY: LIGHTER THAN AIR **EVAPORATION RATE:** SLOWER THAN ETHER
COATING V.O.C. : 2.10 LB/GL (252 G/L)
SOLUBILITY IN WATER:
APPEARANCE AND ODOR:

SECTION IV - FIRE AND EXPLOSION HAZARD DATA

FLASH POINT: 53 Deg F **METHOD USED:** TCC
FLAMMABLE LIMITS IN AIR BY VOLUME- LOWER: 1.1% **UPPER:** 12.0%

EXTINGUISHING MEDIA: FOAM. ALCOHOL FOAM. CO2. DRY CHEMICAL. WATER FOG

SPECIAL FIREFIGHTING PROCEDURES
MATERIALS BURNS RAPIDLY WITH INTENSE HEAT. USE SELF-CONTAINED BREATHING APPARATUS AND PROTECTIVE CLOTHING.

UNUSUAL FIRE AND EXPLOSION HAZARDS
AVOID UNNECESSARY EXPOSURE TO HEAT. VAPORS MAY TRAVEL TO SOURCE OF IGNITION AND FLASH BACK.

SECTION V - REACTIVITY DATA

STABILITY: STABLE

CONDITIONS TO AVOID

HIGH HEAT. SPARKS. OPEN FLAME

INCOMPATIBILITY (MATERIALS TO AVOID)

ALKALINE METALS. STRONG ACIDS. OXIDIZING AGENTS

HAZARDOUS DECOMPOSITION OR BYPRODUCTS

OXIDES OF NITROGEN-CARBON DIOXIDE/MONOXIDE

HAZARDOUS POLYMERIZATION: WILL NOT OCCUR

SECTION VI - HEALTH HAZARD DATA

INHALATION HEALTH RISKS AND SYMPTOMS OF EXPOSURE

VAPORS MAY BE IRRITATING AND CAUSE DIZZINESS. HEADACHE. NAUSEA. VOMITTING AND NARCOSIS

SKIN AND EYE CONTACT HEALTH RISKS AND SYMPTOMS OF EXPOSURE

BREIF CONTACT WITH SKIN SHOULD NOT PRODUCE ANY HARMFUL EFFECTS. BUT PROLONGED CONTACT. AS FROM CLOTHING WET WITH CHEMICAL. MAY CAUSE IRRITATION. EYE CONTACT CAUSES SEVERE IRRITATION.

SKIN ABSORPTION HEALTH RISKS AND SYMPTOMS OF EXPOSURE

NONE CURRENTLY KNOWN.

INGESTION HEALTH RISKS AND SYMPTOMS OF EXPOSURE

MAY CAUSE TOXICOLOGICAL AND NEUROLOGICAL EFFECTS.

HEALTH HAZARDS (ACUTE AND CHRONIC)

ACUTE INGESTION CAN CAUSE HEADACHE. DROWSINESS AND UNCONSCIOUSNESS. ACUTE INHALATION OF VAPORS ARE IRRITATING TO NASAL PASSAGES AND THROAT. ACUTE REPEATED OR PROLONGED SKIN CONTACT CAN CAUSE DRYING OF THE SKIN. AND ACUTE VAPOR OR LIQUID EYE CONTACT MAY BE INHALED TO THE EYES.

CARCINOGENICITY: NTP? NO **IARC MONOGRAPHS?** NO **OSHA REGULATED?** NO

MEDICAL CONDITIONS GENERALLY AGGRAVATED BY EXPOSURE

EMPHYSEMA. ASTHMA. DERMATITIS.

EMERGENCY AND FIRST AID PROCEDURES

IF SWALLOWED CALL A PHYSICIAN SKIN - FLUSH WITH WATER. IF INHALED REMOCE TO FRESH AIR AND CALL A PHYSICIAN. GIVE ARTIFICIAL RESPIRATION IF BREATHINMG IS DIFFICULT. EYES - FLUSH WITH PLENTY OF WATER FOR AT LEAST 15 MINUTES. TREATMEN SHOULD BE DIRECTED AT THE CONTROL OF SYMPTOMS AND THE CLINICAL CONDITION. THERE IS NO SPECIFIC ANTIDOTE

SECTION VII - PRECAUTIONS FOR SAFE HANDLING AND USE

STEPS TO BE TAKEN IN CASE MATERIAL IS RELEASED OR SPILLED
WEAR SUITABLE PROTECTIVE EQUIPMENT. SPILLS SHOULD BE COLLECTED FOR DISPOSAL BY APPROPRIATE METHODS.

WASTE DISPOSAL METHOD
DISPOSE OF WASTE BY APPROPRIATE METHODS OR INCENERATE IN A FURNACE WHERE PERMITTED UNDER APPROPRIATE FEDERAL. STATE. AND LOCAL REGULATIONS.

PRECAUTIONS TO BE TAKEN IN HANDLING AND STORING
STORE LARGE QUANITIES ONLY IN BUILDINGS DESIGNED TO COMMPLY WITH OSHA 1910.106. STORE IN COOL AREA.

OTHER PRECAUTIONS
KEEP CLOSURE TIGHT AND CONTAINER UPRIGHT TO PREVENT LEAKAGE . DO NOT STORE OR USE HEAT. SPARKS OR OPEN FLAME. STORE DRUM OUT OF SUN AND AWAY FROM HEAT. STORE AND USE ONLY IN WELL-VENTILATED AREAS. DRUMS OF THIS MATERIAL SHOULD BE GROUNDED WHEN POURING. NEVER USE PRESSURE TO EMPTY. DRUM IS NOT A PRESSURE VESSESL. DO NOT PUNCTURE CONTAINER OR LEAVE OPENED OR UNCOVERED. DRUMS SHOULD NOT BE WASHED OUT OR USED FOR OTHER PURPOSES. DO NOT GET IN EYES. AVOID SKIN CONTACT. HARMFUL IF INHALED. PREVENT PROLONGED OR REPEATED BREATHING OR VAPOR OR MIST. READ INSTRUCTIONS BEFORE USING

SECTION VIII - CONTROL MEASURES

RESPIRATORY PROTECTION
IN OPEN AREAS: USE APPROVED MECHANICAL FILTER RESPIRATORS TO REMOVE SOLID AIR-BORNE PARTICLES. IN RESTRICTED VENTILATION AREAS: USE OSHA APPROVED CHEMICAL/MECHANICAL FILTER RESPIRATORS DESIGNED TO REMOVE A COMBINATION OF PARTICLES AND VAPOR. IF LOCAL EXHAUST IS NOT SUFFICIENT TO KEEP LEL BELOW STATED IN SECTION III.

VENTILATION
ALL APPLICATION AREAS SHOULD BE VENTILATED IN ACCORDANCE WITH OSHA REGULATION 29CFR.1910 TO KEEP AIR CONTAMINANT CONCENTRATION LEVELS BELOW APPLICATION OSHA PERMISSABLE EXPOSURE LIMIT OR ACGIH'S TLV LIMIT.

PROTECTIVE GLOVES
REQUIRED FOR PROLONGED OR REPEATED CONTACT

EYE PROTECTION
USE SAFETY EYEWEAR WITH SPLASH GUARDS OR SIDE SHEILDS.

OTHER PROTECTIVE CLOTHING OR EQUIPMENT
EYE BATH. SAFETY SHOWER. APRONS

WORK/HYGIENIC PRACTICES
WEAR PROTECTIVE CLOTHING WHEN NECESSARY. WASH THOROUGHLY BEFORE HANDLING FOOD PRODUCTS.

SECTION IX - DISCLAIMER

DISCLAIMER
WHILE HARTIN PAINT AND FILLER CORP. BELEIVES THAT THE DATA CONTAINED HEREIN ARE FACTUAL AND THE OPINIONS EXPRESSED ARE THOSE OF QUALIFIED EXPERTS REGARDING THE RESULTS OF THE TESTS CONDUCTED. THE DATA ARE NOT TO BE TAKEN AS A WARRANTY OR REPRESENTATION FOR WHICH THE HARTIN ASSUMES LEGAL RESPONSIBILITY. IT IS THE USERS RESPONSIBILITY FOR SAFE USE.

MILLER PLACE FIRE
SAMPLES

SAMPLE
CHAIN-OF-CUSTODY RECORD

08-22-90

7 SAMPLES FLOOR/SPRINKLER SYSTEM WATER

#32700 LAB DESTINATION 1

UPS/Frank Solano CARRIER/WAYBILL NO.

TCL METAL SCREEN
ALL METALS
~ $250- PER SAMPLE

1 FIRE DEPT DECON POOLS COMPOSITE

1 FLOOR MOP WATER COMPOSITE

1 TRUCK RINCATE

10 SAMPLES TOTAL

LAB SAMPLES TO H2M 08-22-90

	Date and Time Collected	Sample Type	Container Type
water	8/21/90		1PE
	"		"
	"		"
	"		"
	"		"
	"		"
	"		"
Is	"	Composite	"
	"	Composite	"
	"		"

EP TOXICITY
HEAVY METALS
~ $150- PER SAMPLE

METCO REQUEST
TCL METAL SCREEN ON ALL SAMPLES- EXPEDITE ANALYSIS

Special Instructions:

Possible Sample Hazards:

SIGNATURES: (Name, Company, Date and Time) Metco 305

1. Relinquished By: [signature] 8/22/90
   Received By: [signature] AETC 8/22/90 3:05
2. Relinquished By:
   Received By:
3. Relinquished By:
   Received by:
4. Relinquished By:
   Received By:

WHITE - To accompany samples
YELLOW - Field copy

AETC
ADVANCED ENVIRONMENTAL® TECHNOLOGY CORPORATION

SAMPLE CHAIN-OF-CUSTODY RECORD

CUSTOMER NAME/NUMBER Metco #32700 LAB DESTINATION H2M; Melville NY

SAMPLE TEAM MEMBERS Gerry Lanza/Frank Soldano CARRIER/WAYBILL NO. ETC

Sample Number	Sample Location and Description	Date and Time Collected	Sample Type	Container Type	Condition on Receipt (Name and Date)	Disposal Record No.
PE001	Floor/Sprinkler system water	8/21/90		1PE		
PE002	"	"		"		
PE003	"	"		"		
PE004	"	"		"		
PE005	"	"		"		
PE006	"	"		"		
PE007	"	"		"		
PE008	Fire dept Pecon Pools	"	Composite	"		
PE009	Floor Mop water	"	Composite	"		
PE010	Truck Rinsate	"		"		

Special Instructions:

Possible Sample Hazards:

SIGNATURES: (Name, Company, Date and Time) Metco 305

1. Relinquished By: 8/22/90
   Received By: AETC 8/22/90 3:05
2. Relinquished By:
   Received By:
3. Relinquished By:
   Received by:
4. Relinquished By:
   Received By:

WHITE - To accompany samples
YELLOW - Field copy

ACCEPTANCE LETTER

June 9, 1995

Ms. Constance Conroy
SULZER (US) METCO INC.
1101 Prospect Avenue
Westbury, NY 11590-0201

Re: **CWM Proposal No. NWK.0695.09.01R**
Scope of Work: Lab Pack & Drum Handling Services

Dear Ms. Conroy:

The Technical Services Division of Chemical Waste Management, Inc. (CWM) is pleased to present the following revised proposal for the turn-key management of the packaging, profiling, transport, and disposal of lab chemicals and drums from your facilities located in Hicksville and Westbury NY.

As the project stands, CWM will provide a technically trained field team consisting of two men to inspect, package, and profile lab chemicals and drums for appropriate disposal. The disposal site to which the waste is shipped will be a CWM/USEPA approved facility.

If this service described is satisfactory, please sign one copy of this Acceptance Letter, and return it in the enclosed envelope. Upon receipt, CWM will promptly schedule this project. All work will be performed under the terms/conditions of Svc. Agreement # NWK.0791.28.

Thank you for your continued interest in Chemical Waste Management, Inc.'s Technical Services Division for your disposal needs. As the nation's leader in chemical waste disposal, we can offer your company the assurance that your waste will be properly and safely managed for your protection against future liabilities. Please do not hesitate to contact me at 1-800-253-3090 with an questions you may have.

Sincerely,
CHEMICAL WASTE MANAGEMENT, INC.
Technical Services Division

Lorissa Dashkiewicz
Operations Manager

ACCEPTED BY: SULZER (US) METCO INC.

Name: Daniel Morascletti

Title: V.P. Finance / Controller

Date: June 27, 1995

1.0 SCOPE OF WORK

CWM understands the Scope of Work (SOW) for this project to be the following:

- Phase I: Labor - Packaging and Profiling of laboratory chemicals for disposal at a CWM/USEPA approved disposal facility according to DOT and USEPA regulations. (2 sites)

- Phase II: Loading, Transportation, and Disposal of Profiled labpack, and other approved (active profiles) drummed waste streams.

- CWM requests that SULZER (US) METCO leave all the drummed wastes in there present locations until all profiling and packaging is complete at the two sites. CWM will supply a trailer on the last day of the project to pickup all the profiled and packaged containers.

2.0 TECHNICAL APPROACH

Personnel	Equipment
1-Field Chemist	Level "C & D" P.P.E.
1-Field Analyst	(1) Midline Supply Truck
	Safety Gear/Equipment

CWM-Technical Services will mobilize a crew consisting of a Field Chemist and Field Analyst to perform the lab packaging, profiling, and site evaluation. The crew will be mobilized from the Technical Services' operations headquarters in Newark, New Jersey.

Lab Packaging

All waste will be classified to insure proper packaging based on procedures found in the CWM Corporate Lab Pack Manual. Chemicals will be segregated based on their DOT class compatibility, and then placed into separate groups. Once segregation is complete, there will be various hazard class groups. This procedure is utilized to enable DOT groups to be packed one at a time, allowing for an economical pack. Chemicals will be packed into 5, 16, 30, & 55-gallon DOT-approved open head drums. If chemicals are corrosive, the drum will be lined with a polyethylene insert and lid, 10mm in thickness. The appropriate absorbent material will be placed in the drum before any chemicals are placed inside. The chemicals will be subsequently manifested, loaded, and transported depending on their applicable disposal/treatment methods. The field team will supply all necessary documents for this process. Possible disposal outlets that may be utilized listed in the Unit Pricing Summary.

4.0 HEALTH AND SAFETY

No chemicals will be handled by CWM Technical Services personnel unless they are wearing, at a minimum, steel-toe boots with shanks, safety goggles, a particle/light splash holdout tyvek suit and latex gloves taped to the tyvek at the wrist. Should the risk of harm increase, our personnel have the equipment and understanding required to upgrade to the proper level of protection. Prior to the start of on-site work, the field team will write a site contingency plan outlining procedures to follow in the case of an accident.

5.0 PROJECT SCHEDULE

CWM-Technical Services anticipates this project will be completed in three days. All drums will be removed after approval from the appropriate disposal facility is secured. All approved profiles will be removed from the 2 locations on the last day of the project.

PROJECT ESTIMATION

PROJECT LABOR:	Unit Cost	Quantity	Sub-Total
-Daily labor rate to include on site labor, sampling, profiling, PPE (Level C and/or D), and truck rental for a two man team; provision and completion of certain necessary paperwork:	$1,350.00	3 days	= $4050.00
-Per Diem (Travel >50 miles):	$85.00	2 nights x 2	= $340.00

(PROSPECT AVENUE FACILITY-DRUM AND LAB PACK SERVICES)

LAB PACK DISPOSAL SERVICES:

Supplies, classification, packaging, documentation, labeling, and loading necessary to provide transportation, disposal, and lab pack services for Non-Reactive & Reactive chemicals in quantities of less than or equal to five (5) gallons of liquid or forty (40) pounds of solid:

Incineration (CWM/TWI - Sauget, IL):

-Fingerprinting Unknowns-Lab Pack materials	$45.00/test	3 field tests	= $135.00
-Five gallon fiber drum:	$85.00	12 drums	= $1020.00
-Fourteen gallon fiber drum:	$190.00	15 drums	= $2850.00
-Fifty-five gallon steel drum for repack:	$925.00	6 drums	= $5550.00

DRUM HANDLING SERVICES

Profile #	Waste Description			
TBD - RR	Blue Print Room Waste Liquid	$200.00	1 dr	= $200.00
TBD - RR	Waste Oil	$85.00	2 dr	= $170.00
BD7910-recert	Antifreeze	$175.00	1 dr	= $175.00
TBD - EML	Waste Sand Blast Grit	$180.00	1 dr	= $180.00
TBD - MDC	Empty Containers from Met Lab	$100.00	1 dr	= $100.00
TBD - TWI	Oil Soaked Rags/debris	$600.00	1 dr	= $600.00

CYLINDER HANDLING SERVICES

Profile #	Waste Description			
TBD	Anhydrous Ammounia (10# Flask)	$375.00/flask	1	= $375.00**

**This pricing is based on the assumption that valves are in good operating condition and there are no pot or smudge marks on the cylinder.

(325 DUFFY AVENUE-DRUM HANDLING SERVICES)

DRUM HANDLING SERVICES

Profile #	Waste Description			
AB2880-recert	Burnable Oil	$90.00	17 dr	= $1530.00
AB2881-recert	Water Sol	$185.00	11 dr	= $2035.00
AB1618-recert	1,1,1-Trichlor.	$300.00	3 dr	= $900.00
TBD	Speedi with AB2880	$145.00	3 dr	= $435.00
TBD	Waste Thinner	$200.00	1 dr	= $200.00
BD7911	Waste Paint	$200.00	1 dr	= $200.00
AB1694-recert	Tumbling Sludge	$600.00	1 dr	= $600.00
TBD	Tumbling Media	$600.00	1 dr	= $600.00

WASTE APPROVAL FEES:
To be determined upon final approval by disposal sites and invoiced off the attached rate sheets.

TRANSPORTATION SERVICES:

-Transshipment/Storage (Newark, NJ):$35.00 x 78 drums	= $2730.00
-LTL Rate (Drums-Non Lab Pack):$157.00 x 45 drums	= $7065.00
-Pick-Up Fee:$450.00 x 1 pickup	= $450.00
-Pick-Up Fee-Cylinder to BDT in Clarence, NY	= $225.00**

**Will be scheduled on a Milk Run following completion of the project

PROJECT TOTAL: $32715.00

* Note: Additional Time or materials required for the completion of this project will be addressed with a Change Order and billed off the attached Unit Pricing Summary and/or Schedule A Standard Rates. Pricing does not include the approval fees for newly generated profiles. **Existing profiles which have expired will be recerted at NO CHARGE.**

NOTES:

The above estimate is based upon the following:

(1) This proposal and all attachments and exhibits are considered confidential and proprietary and shall not be loaned, copied, distributed, or published, in whole or in part, or used for any purpose other than for which they were intended, without prior written consent of CWM.

(2) Pricing is firm for thirty (30) days following the date of the proposal.

(3) Invoices submitted by CWM-Technical Services Division are payable within thirty (30) days from the date of receipt unless otherwise stated. Invoices not settled within 30 days are subject to a 1.5% per month service charge on the outstanding balance.

(4) CWM will not be responsible for project delays that are beyond its direct control.

(5) Any waste which the disposal facility cannot receive, treat, store, process, handle or dispose of for any reason whatsoever is outside the scope of the contract and CWM Technical Services will have no obligation to receive, treat, store, process, handle or dispose of such waste.

(6) Generator is responsible for Federal, State and Local taxes which are not included in the transportation or disposal pricing.

(7) Acceptance at facilities noted via designated disposal methods.

(8) Any permits which are required for on-site services are the client's responsibility.

(9) Wastes for incineration may incur additional charges for TCLP analysis and other analysis, if performed by the designated disposal facility.

(10) Electricity and water required for the operation of equipment used by CWM shall be supplied by the customer. Otherwise, further equipment will be needed and the customer will be billed accordingly.

(11) Services rendered resulting from an increase in the scope of this project, and not covered in this Unit Pricing Summary, will be billed on a time and materials basis according to the latest version of the Schedule A Price List.

(12) Pricing will be verified upon receipt of approval and will include any applicable surcharges.

(13) Customer will provide information such as MSDS's and other product info. if available.

(14) Possible Surcharges:

- Drummed waste liquids for incineration containing >5% ash will be surcharged $.05/gal for each 1% over 5%. Drummed liquids containing >5% chlorine will be surcharged $.11/gal for each 1 % over 5%.
- $79.00 per drum for any waste overpacked in an 85 gallon overpack.
- $26.00/drum for any material received and/or overpacked in a 15-55 gal.
- $10.50 per drum for a 16 gallon plastic overpack.
- Solidified drums for incineration/fuels blending that cannot be processed will be returned.

CWM reserves the right to exclude from services, at a minimum, dioxin (and its derivatives), radioactives, and explosives.

UNIT PRICING SUMMARY

LABOR

-Daily labor rate including on site labor, PPE (Level C and/or D), and truck rental for a two man team; provision and completion of certain necessary paperwork:	$1,350.00/day
-Per Diem (Travel >50 miles):	$85.00/man/night

ANALYTICAL/SAMPLING

-Field fingerprint testing of unknown material:	$45.00/ea
-Sampling of non-lab pack chemicals	
Waste stream approval-Fuels, W/W Treatment, Direct Landfill:	$300.00/ws
Stabilization:	$500.00/ws
Waste stream approval-Incineration:	$1,100.00/ws
-TCLP Analysis:	$1,500.00/ea

LAB PACK SERVICES

Supplies, classification, packaging, documentation, labeling, and loading necessary to provide transportation, disposal, and lab pack services for Non-Reactive & Reactive chemicals in quantities of less than or equal to five (5) gallons of liquid or forty (40) pounds of solid:

Incineration (CWM/TWI - Sauget, IL):	
-Five gallon fiber drum:	$85.00/drum
-Ten gallon fiber drum:	$150.00/drum
-Fourteen gallon fiber drum:	$190.00/drum
-Thirty gallon fiber drum:	$490.00/drum
-Fifty-five gallon steel drum for repack:	$925.00/drum
Incineration (Aptus - Coffeyville, KS):	
-Five gallon fiber drum (Listed Dioxin Wastes):	$675.00/drum
Aqueous Treatment (CWM Chemical Services - Model City, NY)	
-Five gallon metal drum (Inorganic Liquids):	$85.00/drum
-Fifty-five gallon metal drum (Inorganic Liquids):	$250.00/drum
Fuels Blending (CWMRR - W. Carrollton, OH)	
-Five gallon drum (Blendable Liquids):	$125.00/drum
-Fifty-five gallon drum (Blendable Liquids):	$425.00/drum
Mercury (Hg) Reclamation (CWM - Memphis, TN)	
-Five gallon metal drum (Hg >99% pure):	$300.00/drum
-Five gallon metal drum (Hg and debris):	$500.00/drum
Mercury Reclamation/Retort (Bethlehem Apparatus - Hellertown, PA)	
-Five gal metal drum (Hg and/or: Debris/Iodide/Oxide/Sulfide):	$1,900.00/drum
Mercury Treatment/Secure Landfill (Stablex Canada, Inc. - Quebec, Canada)	
-Five gallon metal drum (Inorganic Hg Salts):	$1,800.00/drum
Secure Landfill (CWM - Emelle, AL)	
-Five gallon metal drum:	$280.00/drum
-Fifty-five gallon metal drum:	$475.00/drum

TRANSPORTATION:

-Transshipment/Storage (Lab Packs):	$35.00/drum
-Less Than Truckload Rate (Non Lab Packs):	$157.00/drum
-Pick-Up Fee:	$450.00/stop

ASSUMPTIONS AND CONDITIONS

1.) The customer shall be responsible for all state, local, and federal taxes and fees, which are not included herein, for transportation, storage, treatment, and disposal of all waste materials covered in this agreement.

2.) CWM-Technical Services reserves the right to exclude from service, at a minimum: radioactives, explosives, and certain pressurized cylinders.

3.) Services rendered resulting from an increase in the scope of this project, and not covered in the project pricing summary, will be billed on a time and materials basis according to the latest version of the Schedule A price list and Unit Pricing Summary.

4.) This proposal and all attachments and exhibits are considered confidential and proprietary, and shall not be loaned, copied, distributed, or published, in whole or in part, or used for any purpose other for which they were intended, without prior written consent of CWM-Technical Services Division.

5.) Prices quoted above are effective for thirty (30) days from the date of this proposal.

6.) CWM-Technical Services will not be responsible for project delays beyond its control.

7.) Any permits which are required for on-site services are the responsibility of the client.

8.) Invoices submitted by CWM-Technical Services Division are payable within thirty (30) days from the date of invoice unless otherwise stated. Invoices not settled within 30 days are subject to a 1.5% per month service charge on the outstanding balance.

9.) Any waste which the disposal facility cannot receive, treat, store, process, handle or dispose of for any reason whatsoever is outside the scope of the contract, and CWM-Technical Services will have no obligation to handle such waste.

10) Waste chemicals must be located in a central area, and accessible.

11) Should you choose to issue a Purchase Order in addition to the execution of this document, you must indicate that the Purchase Order is for billing purposes only and that any preprinted terms and conditions found in the body of the Purchase Order are to be considered null and of no effect.

CR	J-K 10/22
FS	
OFFC	

Site Address:
SAME

PPW 09/22/2004
WORK ORDER NO. D3866332

DOCUMENT NO. 58039

STRAIGHT BILL OF LADING

TRANSPORTER 1 Clean Harbors Env Services Inc — VEHICLE ID # 5182 087643

EPA ID # M A D 0 3 9 3 2 2 2 5 0 — TRANS. 1 PHONE (781) 849-1800

TRANSPORTER 2 Maumee Express, Inc. — VEHICLE ID # 5079/082863

EPA ID # NJD986607380 — TRANS. 2 PHONE 800-742-5543

DESIGNATED FACILITY			SHIPPER		
Spring Grove Resource Recovery			Sulzer Metco US Inc		
FACILITY EPA ID #			SHIPPER EPA ID #		
O H D 0 0 0 8 1 6 6 2 9			N Y D 1 3 1 3 1 8 6 5 1		
ADDRESS			ADDRESS		
4879 Spring Grove Avenue			1101 Prospect Avenue		
CITY	STATE	ZIP	CITY	STATE	ZIP
Cincinnati	OH	45232	Westbury	NY	11590

CONTAINERS NO. & SIZE	TYPE	HM	DESCRIPTION OF MATERIALS	TOTAL QUANTITY	UNIT WT/VOL
4X55	DM		A. NON DOT REGULATED MATERIAL, (MAGNESIUM OXIDE, TITANIUM OXIDE), NON DOT HAZARDOUS, NONE	2175	P
1X55	DM		B. NON DOT REGULATED MATERIAL, (WATER SOLUBLE OIL), NON DOT HAZARDOUS, NONE	509	P
2X55	DF		C. NON DOT REGULATED MATERIAL, (ORGANIC BINDER SOLUTION), NON DOT HAZARDOUS, NONE	783	P
2X PALLETS	CF		D. NON DOT REGULATED MATERIAL, (FILTERS, PPE, CERAMIC POWDER), NON DOT HAZARDOUS, NONE	1,311	P
1X55	DM		E. NON DOT REGULATED MATERIAL, (PETROLEUM OIL), NON DOT HAZARDOUS, NONE	358	P
5X55	DM		F. NON DOT REGULATED MATERIAL, NON DOT HAZARDOUS, NONE	2,768	P
2X PALLETS	CF		G. NON DOT REGULATED, (HEPA FILTERS), NONE, NONE	703	P
			H.		

SPECIAL HANDLING INSTRUCTIONS EMERGENCY PHONE #: (800) 483-3718
A: CH189107 B: CH189141 C: CH66106 D: CH189109 E: CH189111 F: CH189134 G: CH64862
PEPE07259 HT DECAL #087643

SHIPPERS CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

	PRINT	SIGN	DATE
SHIPPER	DAVID WALZAK	David Walzak	10/22/04
TRANSPORTER 1	FRANK RICCIARDELLI	Frank Ricciardelli	10/22/04
TRANSPORTER 2	THOMAS TAYLOR	Thomas Taylor	10-25-04
RECEIVED BY	Sarah Fritz	Sarah Fritz	10/29/04

1

CHI 107

CycleChem

INVOICE NO.	CUSTOMER NO.	INVOICE DATE	ORDER NO.	GEN COD
W091406	08-1047408	10/29/2008	91406 WW888	94594 -1

FOR ADDITIONAL INFORMATION PERTAINING TO THIS INVOICE PLEASE DIAL
PHONE: 908-355-5800 • FAX: 908-355-0562

Page

PICK UP FROM: SULZER METCO US INC
Attn: JIM Kourkoumelis
1101 PROSPECT AVE
WESTBURY, NY 11590

BILL TO: SULZER METCO US INC
Attn: JIM Kourkoumelis
1101 PROSPECT AVE
WESTBURY, NY 11590

TELEPHONE NUMBER

POR

EPA ID NO.	MANIFEST NO.	DATE RECEIVED	P.O. #
NYD131318651	CVCC108249	10/21/2008	4530114674

PRODUCT CODE	SEQUENCE NUMBER	QUANTITY ORDERED	DESCRIPTION	UNITS	RATE	CONT.	TOTAL
PC08	0036	1	METAL/CERAMIC POWDER & 90% WATER → LINE 14	2036.00	0.90/G	TT	1,832.40

SULZER METCO (US) INC.
NOV 04 2008
EHS DEPARTMENT

INVOICE

Disposal Subtotal* $1832.40

COMMENTS/ADDITIONAL CHARGES		AMOUNT
	QA/QC Fee	No Charge
	Reg. Admin. Fee	No Charge
	Transportation*	900.00
	Demurrage*	75.00
	Tax On * Items: 8.625% X $2807.40	242.13

Please Remit payment in full to:
Cycle Chem, Inc.
P.O. Box 18173, Newark, N.J. 07191

PAY THIS AMOUNT 3,049.53

PLEASE NOTE: INTEREST CHARGES OF 1.5% PER MONTH (18% PER YEAR WILL ACCRUE ON ALL PAST DUE AMOUNTS. ON UNPAID AMOUNTS, INTEREST AND ALL EXPENSES OF COLLECTIONS INCLUDING A REASONABLE ATTORNEY FEE IN AN AMOUNT OF 20% WILL BE CHARGED.

THE WASTE LISTED ON THIS INVOICE HAS BEEN RECEIVED BY OUR HAZARDOUS WAST FACILITY AND IS BEING HANDLED IN FULL COMPLIANCE WITH THE RCRA REGULATION CONCERNING THE TREATMENT, STORAGE AND DISPOSAL OF THE DESCRIBED MATERIAL

SULZER

Sulzer Metco (US) Inc.
1101 Prospect Avenue
Westbury, NY 11590
United States of America
www.sulzermetco.com
(516) 334-1300

FEDERAL EXPRESS

December 9, 2005

Ms. Candy DeVito Kirsch
Occupational Health Services
Nassau University Medical Center
2201 Hempstead Turnpike
Room A110
East Meadow, NY 11554

Subject: Hazardous Waste Compliance

Dear Ms. DeVito Kirsch:

In accordance with the ***Official Compilation Code Rules and Regulations of the State of New York*** NYCRR 373-3.3(g)(1)(iv), *Arrangements with local authorities*, this letter is intended to notify Nassau University Medical Center that Sulzer Metco (US), Inc., located at 1101 Prospect Avenue, Westbury, NY, is a small quantity generator of hazardous waste. Therefore, due to the nature of this waste and in case of an emergency requiring assistance, it is necessary to make arrangements with local hospitals as appropriate to describe the properties of the hazardous waste handled at this facility.

Sulzer Metco requests that Nassau University Medical Center be familiarized with the layout of this facility, properties of hazardous waste handled at this facility and associated hazards, places where facility personnel would normally be working, entrances and roads inside this facility, and possible evacuation routes.

Sulzer Metco has satellite storage areas where a hazardous waste in each location is accumulated into a 55 gallon drum. Those locations have one drum which is under the control of an employee working in that area. Those areas are shown on the attached facility diagram. A description of each hazardous waste is as follows:

Dust Collectors: Highlighted in yellow on the facility diagram. This material is a powder which contains chromium and may also contain nickel, aluminum, cobalt, iron, and other metals and ceramics. Nickel and cobalt are possible carcinogens. Hexavalent chromium is a known carcinogen. Please see the attached Material Safety Data Sheet for other hazards.

Machine Shop: Highlighted in blue on the facility diagram. This waste is a liquid which contains approximately 98% water and 2% chromic acid. Hexavalent chromium is a known carcinogen. Chromic acid is corrosive and causes burns to eyes and skin.

Analytical Lab: Highlighted in green on the facility diagram. This waste is a liquid which contains approximately 15% acid, 85% water and trace quantities of metals. The acids in this liquid, including sulfuric, hydrochloric, nitric, hydrofluoric and phosphoric acids, are corrosive and cause burns to eyes and skin.

Sulzer Metco has designated a hazardous waste accumulation area to hold the above waste materials. That area is also shown on the facility diagram and is highlighted in orange. Notices are posted outside this area with many emergency response telephone numbers, including those of Nassau University Medical Center and the Westbury Fire Department.

If you have any questions regarding this matter please feel free to contact me at (516) 338-2337. Thank you for your cooperation.

Sincerely,
Sulzer Metco (US) Inc.

Peter DiPietrantonio
Environmental, Health & Safety Specialist

WASTE CONTROL
SPECIALISTS LLC

Certificate of Disposal

Date of Certificate: 10/18/07

WCS
9998 W Hwy 176
Andrews, TX 79714
EPA ID No. TXD988088464

Reference
Sulzer-Metco (US), Inc.
1101 Prospect Ave
Westbury, NY 11590

WCS Profile #: WP-019353
Manifest: 001251037JJK
Received On: 10/16/07

This is to certify that the waste shipped to WCS on the above mentioned manifest was disposed of on 07-JAN-2002 in accordance with all applicable state, federal, and local regulations. The waste was disposed of in a WCS permitted chemical waste landfill.

I certify that the information contained in or accompanying this document is true, accurate, and complete. As to the identified section(s) of this document for which I cannot personally verify truth an accuracy, I certify as the company official having supervisory responsibility for the persons who, actin under my direct instructions, made the verification that this information is true, accurate, and complet

Sincerely,
WCS

per Sherrod Mavis

Technical Services Manager

Corporate
5430 LBJ Freeway, Ste. 1700
Three Lincoln Centre
Dallas, TX 75240
Ph. 972.715.9800
Fx. 972.448.1419

Facility
P.O. Box 1129
Andrews, TX 79714
Ph. 888.789.2783
Fx. 505.394.3427

√

C 282200 1828 00046 W I
LOCATION FAC EP

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0092
RUN DATE: 08/01/88

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/07/87
(5) 11590	(10) REP: A TEICHER 334-1300	PRIOR CO ISSUE DATE 11/16/87
		PRIOR CO EXPIRATION DATE 11/15/88

FACILITY EMIS-CLASS / PGM-CODE: A2 POINT EMIS-CLASS / PGM-CODE:

EMISSION POINT 00046
(41)UTM-E: 622.2 KM. (42)STACK HEIGHT: 18 FT. (43)EXIT VELOCITY: 22.00 FT/SEC (44)SIC: 3569 (45)AGENCY-CODE-1: C (COUNTY)
(46)UTM-N: 513.4 KM. (47)HT ABV STRUC: 3 FT. (48)EXIT FLOW: 462.00 ACFM (49)CO FEE: $25.00 (50)AGENCY-CODE-2: C (COUNTY)
(51)GRND ELEV: 139 FT. (52)STK DIAM: 8 IN. (53)EXIT TEMP: 72 DEGR F (54)CO CONDITIONS: 1

UNIT I
(55)HOURS/DAY: 4.0 (56)DAYS/YEAR: 250 (57)% OP BY SEASON: 25 25 25 25 (58)SOURCE CODE: A1105 SAND BLASTING- ENCLO
(59)BLDG: (60)FLOOR NAME: (61)RULE 1: 212.00 (62)RULE 2:

PROCESS/UNIT DESCRIPTION (72)DESCRIPTION
1. GRIT BLASTING BY USE OF STEEL GRITS INSIDE TOTALLY
2. ENCLOSED GRIT CABINET

CONTROL EQUIPMENT
(73)TYPE: 004 BAFFLE CHAMBER (74)MFG: NEW MARS BAFFLE CHAMBER (75)ID: (76)DATE INSTALLED: 01/70
(77)DISPOSAL METHOD: 09 OTHER (78)USEFUL LIFE: 20 YEARS

AIR CONTAMINANTS	CAS NUMBER	ENV RATING	EMISSIONS ACTUAL	UNIT	HOW DET	PERMISSIBLE	% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR	ANNUAL EMISSIONS (LBS/YEAR) ACTUAL	10x	PERMISSIBLE
STEEL PEARLITIC	(085) 12597-69-2	(086) C	(087) .001	(088) 01	(089) 06	(090) .001	(091)	(092) .001	(093) 1.000	(094) 0	(095) 1.000

SPECIAL CONDITIONS (151)CONDITION
1. AG1 COMPLIANCE

(15)PRIOR COMMENTS (16)BY 816CAP (17)DATE 10/02/84
1. 2:20PM SATIS OPER
2.
3.
4.
5.

(18)CURRENT COMMENTS (19)BY 414WO (20)DATE 09/26/88
1. 2:30 p oper satis
2.
3.
4.
5.

(27)LAST INSPECTION DATE 09/26/88
(21)INSPECTION STATUS S
(22)DATE OF NEXT ACTION / /
(23)ISSUE DATE 11/16/88
(24)EXPIRATION DATE 11/15/89
(25)CO FEE $50

FIRM REP'S SIGNATURE: K. L. Teichman DATE:
ISSUING OFFICER'S SIGNATURE: Bruce B. Smith P.E. (CP) DATE: 010389

EPHM-2 REV. 5/97

TRUCK # 4114

STATE OF CONNECTICUT

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST PROGRAM
79 Elm St., Hartford, CT 06106-5127

BK027823

Please type (or print) *(Form designed for use on elite (12-pitch) typewriter.)*

PPW 11/19 2004 FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No. CRW	Manifest Document No. 172733	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but may be required by State law.

3. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Phone (516 338-2337)

5. Transporter 1 Company Name: Clean Harbors Env Services Inc — 6. US EPA ID Number: MAD039322260

7. Transporter 2 Company Name — 8. US EPA ID Number

9. Designated Facility Name and Site Address
Clean Harbors Of Conn Inc
51 Broderick Road
Bristol, CT 06010 — 10. US EPA ID Number: CTD000604486

A. State Manifest Document Number: CT F 1172733
B. G.S.I. (Gen. Site Address): SAME
C. S.T.I. (Trans. Lic. Plate #): 13014 (MA)
D. Tran. Phone ( )
E. S.T.I. (Trans. Lic. Plate #): 201 640-1800
F. Tran. Phone ( )
G. State Facility's ID (Not Required)
H. Facility's Phone: (860) 583-6917

11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*	12. Containers No.	Type	13. Total Quantity	Unit Wt/Vol	Waste No.
a. NON DOT REGULATED MATERIAL, (CERAMIC OXIDE), NON DOT HAZARDOUS, NONE	XX 1	T.T	XX 9.50 EST	G	EPA / STATE NONE
b.					EPA CHOM / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above: a. (1) b. c. d.

K. Handling Codes for Wastes Listed Above: a. Interim / Final b. Interim / Final c. Interim / Final d. Interim / Final

15. Special Handling Instructions and Additional Information
EMERGENCY PHONE #: (800) 483-3718
11a: chd2414bb

Point of Departure:

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR**, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: X Joe Diaka — Signature: X — Month 03 Day 23 Year 05

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Freddy Estevez — Signature — Month 03 Day 23 Year 05

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

GENERATOR — TRANSPORTER — FACILITY

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802. FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILL RESPONSE AT (860) 424-3338

COPY 6: GENERATOR MAILS TO DESTINATION STATE

CT F 11/2/33

EPA Form 8700-22 (Rev. 9/91) Form Approved OMB No.2050-0039.

COPY 6: GENERATOR MAILS TO DESTINATION STATE

PARTIAL INSTRUCTIONS
FOR COMPLETING THE CONNECTICUT UNIFORM HAZARDOUS WASTE MANIFEST

IMPORTANT: READ ALL INSTRUCTIONS ON THE COVER SHEET BEFORE COMPLETING THIS FORM. ALL 8 COPIES MUST BE TOTALLY LEGIBLE.

GENERAL INFORMATION

The Hazardous Waste Manifest is designed to track waste from the point of generation to final disposal ("cradle to grave"). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete, incorrect or illegible manifests are violations of the law, and could subject you to civil or criminal liabilities as specified in Connecticut Hazardous Waste Management Regulations.

The Connecticut manifest contains 8 copies. ALL COPIES MUST BE LEGIBLE! (Illegible manifests submitted to the State will be returned to the Generator for proper completion). This form is designed for use on a 12 pitch (elite) typewriter. A firm ball point pen may also be used only if you press down HARD. The eight copies must be filed with the appropriate parties as they are completed.

* Be aware that hazardous wastes manifested into or out of Connecticut are subject to a hazardous waste assessment per C.G.S. 22a-132. Please contact the Dept. of Revenue Services at (860) 541-3225 for more information.

COPY DISTRIBUTION is as follows:

COPY 1: FACILITY MAILS TO DESTINATION STATE: This copy is mailed by the Facility to the responsible state agency in the state in which the facility is located, upon receipt of the waste.

COPY 2: FACILITY MAILS TO GENERATOR STATE: This copy is mailed by the facility to the appropriate agency in the Generator's state, upon receipt of the waste.

COPY 3: FACILITY MAILS TO GENERATOR: This copy is mailed to the generator by the facility upon receipt of the waste. This copy is the generator's documentation that the facility received the waste.

COPY 4: FACILITY RETAINS: This copy is retained by the facility for his records.

COPY 5: TRANSPORTER 1 RETAINS: This copy is retained by the Transporter for his records. This copy is the Transporter's documentation that this shipment was transported from the generator to the facility.
NOTE: If a continuing Transporter is used, the generator is responsible for supplying him with a legible photocopy of the manifest, which must contain signatures where required.

COPY 6: GENERATOR MAILS TO DESTINATION STATE: This copy is mailed by the generator to the appropriate agency in the destination state (the state in which the facility is located).

COPY 7: GENERATOR MAILS TO GENERATOR STATE: This copy is mailed by the generator to the appropriate state agency in his state.

COPY 8: GENERATOR RETAINS: This copy is retained by the generator for his records.

GENERATOR SECTION

Item 12: CONTAINERS (NO. & TYPE) - Enter the number of containers for each waste and the appropriate abbreviation from TABLE 1 (below) for the type of container used.

TABLE 1 - CONTAINER TYPE

DM = Metal drums, barrels, kegs	TP = Tanks, Portable	CM = Metal boxes, cartons, cases (incl. roll-offs)
DW = Wooden drums, barrels, kegs	TT = Cargo Tanks (tank trucks)	CW = Wooden boxes, cartons, cases
DF = Fiberboard or plastic drums, barrels, kegs	TC = Tank Cars	CF = Fiber or plastic boxes, cartons, cases
CY = Cylinders	DT = Dump Trucks	BA = Burlap, cloth, paper, plastic bags

Item 13: TOTAL QUANTITY - Enter the total quantity of waste described on each line, relative to the units used in Item 14.

Item 14: UNIT (Wt./Vol.) - Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line. DO NOT use fractions.

TABLE II - UNITS OF MEASURE

G = Gallons (liquids only)	L = Liters (liquids only)	Y = Cubic Yards
P = Pounds	K = Kilograms	N = Cubic Meters
T = Tons (2000 lb.)	M = Metric Tons (1000 kg.)	

TRANSPORTER SECTION

Item 17: TRANSPORTER 1 ACKNOWLEDGEMENT - Print or type the name of the person accepting the waste on behalf of the 1st transporter. That person must acknowledge acceptance of the waste described on the manifest by signing & entering the date of receipt.

Item 18: TRANSPORTER 2 ACKNOWLEDGEMENT - If applicable, follow instructions for Item 17 for Transporter 2.

DESIGNATED FACILITY (TSDF) SECTION

Item K: HANDLING CODES (TSDF COMPLETES) - Refer to Item K in full instructions.

TABLE III - PROCESS CODES/HANDLING METHOD CODES

STORAGE:	S01 (Containers)	S02 (Tank)	S03 (Waste Pile)	S04 (Surface Impoundment)	S05 (Other - Specify)
TREATMENT:	T01 (Tank)	T02 (Surface Impoundment)	T03 (Incinerator)	(Other Treatment - specify code from 40 CFR 265 Appendix I).	
DISPOSAL:	D80 (Injection well)	D81 (Landfill)	D82 (Land Application)	D84 (Surface Impoundment)	
			D83 (Ocean Disposal)	D85 (Other - Specify)	

Item 19: DISCREPANCY INDICATION SPACE - The authorized representative of the designated facility's owner or operator must note in this space any significant discrepancy between the waste described on the manifest & the waste actually received at the facility. Any rejected materials should be listed here, along with an indication of the disposition of the rejected materials. **Any applicable Discrepancy or Rejection reporting requirements must also be complied with. Federal & State regulations vary.**

Item 20: FACILITY OWNER OR OPERATOR CERTIFICATION - Print or type the name of the person accepting the waste on behalf of the owner or operator of the designated TSDF. That person must acknowledge acceptance of the waste described on the manifest by signing (by hand) & entering the date of the receipt. The signature of the authorized TSDF agent indicates acceptance (except for items specified in Item 19) & agreement with the statements on this manifest.

* NOTE: FOR INTERSTATE SHIPMENTS (between different states) YOU MAY BE REQUIRED TO COMPLY WITH THE MANIFESTING REQUIREMENTS OF BOTH THE DESTINATION & GENERATOR STATES REGARDING THE COMPLETION OF SPECIFIC INFORMATION INCLUDED IN LETTERED ITEMS A-K. You may wish to contact State agencies for more information on this subject.

REMINDER: ALL 8 COPIES OF THIS FORM MUST BE TOTALLY LEGIBLE.

Public reporting burden for this collection of information is estimated to average: 37 minutes for generator, 15 minutes for transporter, 10 minutes for treatment, storage and disposal facility. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to CHIEF, INFORMATION POLICY BRANCH, PM-223, U.S. ENVIRONMENTAL PROTECTION AGENCY, 401 M STREET SW; WASHINGTON, D.C. 20460; and to the OFFICE OF INFORMATION AND REGULATORY AFFAIRS, OFFICE OF MANAGEMENT AND BUDGET, WASHINGTON, D.C. 20503.

NYG 3918501

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple

(Hazardous Waste Manifest 1/23/03)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Doc. No.	2. Page 1 of	Information within heavy bold line is not required by Federal Law.
NYD 1 3 1 3 1 8 0 9 1	1645 1	1	

3. Generator's Name and Mailing Address
Gilsar Metro US Inc
1161 Prospect Avenue
Westbury, NY 11590

4. Generator's Telephone Number (516) 752-2237

A. NYG 3918501

B. Generator's ID SAME

5. Transporter 1 (Company Name): Clean Harbors Env Services Inc
6. US EPA ID Number: MAD 0 3 9 3 2 2 2 5 0
C. State Transporter's ID: NJ/NY 006
D. Transporter's Telephone (781) 849-1800

7. Transporter 2 (Company Name)
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4979 Spring Grove Avenue
Cincinnati, OH, 45232

10. US EPA ID Number: OHD 0 0 8 8 1 0 9 2 9
G. State Facility ID
H. Facility Telephone (513) 681-2738

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CORROSIVE ACID SOLUTION, 9, UN1760, PGII	003	DF	01417	P	EPA D002 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
EROSION CONTROL
a. c.
b. d.

K. Handling Codes for Wastes Listed Above
a. c.
b. d.

15. Special Handling Instructions and Additional Information
EMERGENCY PHONE # (518) 482-9718
116 OH159142 D008 D007 D009
2x55

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: DAVID WALZAK | Signature | Mo. 0 2 Day 0 4 Year 0 5

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Frank Ricciardelli | Signature | Mo. 0 2 Day 0 4 Year 0 5

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Mo. Day Year

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

COPY 8—Generator—Retained by Generator

INSTRUCTIONS FOR THE NEW YORK STATE UNIFORM HAZARDOUS WASTE MANIFEST

General Information

New York State regulation requires proper completion of all information on a manifest. Omissions, false coding or illegibility is considered a violation. All generators are responsible under New York State and Federal Law for the proper identification, labeling, manifesting and ultimate disposal of all hazardous waste they generate. The manifest system is designed to track hazardous waste from the point of generation until its final disposal (cradle to grave). In order to accomplish this goal, it is essential that all **items on a manifest be properly completed.**

Distribution

Distribution of each copy of the manifest is indicated on the bottom of the form. Copies of the manifest must be mailed promptly. New York State regulations provide five (5) working days for generator and two (2) for a TSDF. The disposer's state is the state in which the designated TSD facility is located. Generator's state is the state in which the installation generating the hazardous waste is located. TSD facility is a treatment, storage or disposal facility.

Generator Section

Item 1-Enter the US EPA ID number (twelve digit number issued by the federal government). The generator must assign a sequential unique, five digit number different for each manifest, as the manifest document number.

Item 2-If a continuation sheet is used, please enter the total number of sheets here. Any EPA approved continuation sheet may be used, but distribution and completion must meet New York manifest requirements. The document number in Item A must be placed in Item L of each continuation sheet.

Items 3-and 4-Self explanatory. These must correspond to the generator's US EPA ID number.

Items 5, 6, 7 and **8-** These are self-explanatory. These numbers must be secured from the transporter. If more than one transporter is used, the generator must supply additional copies of this manifest for each transporter copy (#5).

Items 9 and **10-**The designated TSD facility, name, address and ID number should appear here.

NOTE: All US EPA ID numbers are a twelve digit code starting off with the letters corresponding to the state in which the facility or transporter is located.

NOTE: Only New York State authorized transporters and TSD facilities are allowed to transport or receive hazardous waste in New York State. The generator shall check for authorization.

Item 11-USDOT requires the word "waste" before or in the shipping name for all hazardous waste. See 49 CFR 171 thru 177. Contact USDOT office for description assistance. Any waste in this box is considered a hazardous waste.

Item 12-

Number-indicate number of containers (use whole numbers).

Containers/Type

DM-Metal drums, barrels, kegs	DT-Dump trucks
DW-Wooden drums, barrels, kegs.	CY-Cylinders
DF-Fiberboard or plastic drums, kegs	CM-Metal boxes, cartons, cases, roll-offs
TP-Tanks, portable	CW-Wooden boxes, cartons, cases
TT-Cargo tank, tank trucks	CF-Fiber or plastic boxes, cartons, cases
TC-Tank cars	BA-Burlap, cloth, paper or plastic bags

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to: Chief Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street S.W., Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503

Item 13-Actual number of units indicated in box 14. (Do not use fractions or decimals).

Item 14-Units (wt/vol)

G-Gallons (liquids only)	L-Liters (liquids only)
P-Pounds	K-Kilograms
T-Tons (2,000 pounds)	M-Metric Tons (1,000 kilograms)
Y-Cubic Yards	N-Cubic Meters

Item 15-Use this space to indicate special transportation, treatment, storage or disposal or Bill of Lading information. If an alternate facility is designated, note it here. For international shipments, enter point of departure. Emergency response telephone numbers, or similar information may be included here.

Item 16-The authorized agent of the generator must read and then sign (by hand) and date this certification. The date is the date of receipt by transporter.

NEW YORK STATE REQUIRES THIS ADDITIONAL INFORMATION

Item A-Number preprinted by New York State Department of Environmental Conservation (NYSDEC).

Item B-Generator site address if different from mailing address. If same, write in same.

Item C and **E-**State of registration and motor vehicle license plate number of waste carrying portion of vehicle used to transport.

Item D and **F-**Telephone number of authorized agent.

Item G-No entry required by NYSDEC

Item H-Telephone number at site of TSD facility.

Item I-Hazardous waste numbers (letter and three digits) as assigned by 6 NYCRR Part 371 or 40 CFR 261 must be used to identify hazardous waste. Enter in top box by EPA. If waste is not hazardous in New York but regulated by another state, enter that state's waste code in bottom box.

Item J-If description in Item 11 (a,b,c,d) contains NOS or other general-term, the hazardous waste constituent must be provided here for each. The specific gravity assumed to be one (1.00) unless indicated in lower right of each box.

Item K-Each material **must** be assigned an ultimate disposal method code as follows: L=Landfill, B=Incineration, heat recovery, burning, T=Chemical, physical, or biological treatment, R=Material recovery of more than 75 percent of the total material. Both the generator and the TSDF should agree on codes assigned in this item.

Transporter Section

Items 17 and **18-**Print or type the full name of person accepting responsibility and acknowledging receipt of material as listed on manifest for transport. Enter date of receipt and signature.

TSDF Section

Item 19-The authorized representative of the TSDF must note in the space any discrepancy between waste described on manifest and waste actually received. Any rejected materials should be listed and destination of those materials provided.

Item 20-The signature (by hand) of the authorized TSDF agent indicates acceptance (except for Item 19) and agreement with statements on this manifest. The date is the date of signature and receipt of shipment. A TSDF not providing ultimate disposal agrees to transfer waste to a TSDF authorized to provide ultimate disposal as indicated in Item K.

Additional Information

1. If the disposer-state supplies a manifest, that state's form must be used. In any case, New York requires that both the generator and TSDF mail copies to the generator's state and the disposer's state, with the ultimate disposal method indicated in Item K.
2. There may be variations in the requirements between various states regarding Items A thru K, therefore, the generator should contact the disposer's state for specific details.
3. If assistance is needed in completion of this manifest, please contact NYSDEC Data Management Section at 518/402-8738 weekdays from 9:00 a.m. to 4:00 p.m.

PERKIN ELMER

The Perkin-Elmer Corporation
Metco Division
1101 Prospect Avenue — PO Box 1006
Westbury New York 11590-0201
Phone (516) 334-1300
Fax (516) 338-2477
RCA 229913

February 28, 1994

Environmental Protection Agency
P.O. Box 70266
Washington, DC 20024-0266

Ref: SARA TITLE III - Tier II Reports

Dear Sir/Madam:

Enclosed please find the SARA TITLE III - Tier II Reports for our three facilities.

If we could be of further assistance, please contact me.

Sincerely,

Joseph Macri
Manager Facilities

JM:amm
Enclosures
cc: A.B. Mazzone
C.L. Conroy

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Environmental Protection Agency
P.O. Box 70266
Washington, DC 20024-0266

4a. Article Number

P 617 295 570

4b. Service Type

☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

3-7-94

5. Signature (Addressee)

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, $300

U.S. MAIL

MERRIFIELD VA 22116
MAR 7 1994
USPS

Print your name, address and ZIP Code here

Joseph Macri
Perkin-Elmer Metco Division
1101 Prospect Avenue
Westbury, NY 11590

Environmental Protection Agency
P.O. Box 70266
Washington, DC 20024-0266

P 617 295 570

Certified Mail Receipt
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

UNITED STATES POSTAL SERVICE

Sent to	Environmental Protection Agency
Street & No	P.O. Box 70266
PO., State & ZIP Code	Washington, DC 20024-0266
Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form 3800, June 1990

Fold at line over top of envelope to the right of the return address.

CERTIFIED MAIL

P 617 295 570

Is your RETURN ADDRESS completed on the reverse side?

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
Environmental Protection Agency
P.O. Box 70266
Washington, DC 20024-0266

4a. Article Number
P 617 295 570

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

Form Approved OMB No 2050 0072

Tier Two
EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY
Specific Information by Chemical

Facility Identification
Name PERKIN-ELMER CORPORATION METCO DIVISION
Street 1101 PROSPECT AVENUE
City WESTBURY County NASSAU State NY Zip 11590
SIC Code 3542 Dun & Brad Number 05-773-1663

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name
Name JOSEPH MACRI Phone 516 334-1300
Mail Address 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact
Name JOSEPH MACRI Title MANAGER FACILITIES
Phone 516 334-1300 EXT. 2374 24 Hr Phone 800 424-9300
CHEMTREC
Name Title
Phone ( ) 24 Hr Phone ( )

Important: Read all instructions before completing form
Reporting Period From January 1 to December 31 19 93
[X] Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7429905 Trade Secret [ ] Chem Name ALUMINUM Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[X] Fire [ ] Sudden Release of Pressure [X] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 STOCK WAREHOUSE	[ ]
CAS 13444281 Trade Secret [ ] Chem Name ALUMINUM OXIDE Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 STOCK WAREHOUSE	[ ]
CAS 7439896 Trade Secret [ ] Chem Name IRON Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[X] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 STOCK WAREHOUSE	[ ]

Certification *(Read and sign after completing all sections)*
I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 2 and that based on my inquiry of those individuals responsible for obtaining the information I believe that the submitted information is true, accurate, and complete.

JOSEPH MACRI MANAGER FACILITIES Joseph Macri 02-28-94
Name and official title of owner operator OR owner operator's authorized representative Signature Date signed

Optional Attachments
[ ] I have attached a site plan
[ ] I have attached a list of site coordinate abbreviations
[ ] I have attached a description of dikes and other safeguard measures

Form Approved OMB No 2050 0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: PERKIN-ELMER CORPORATION METCO DIVISION
Street: 1101 PROSPECT AVENUE
City: WESTBURY County: NASSAU State: NY Zip: 11590
SIC Code: 3542 Dun & Brad Number: 05-773-1663

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name
Name: JOSEPH MACRI Phone: 516 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact
Name: JOSEPH MACRI Title: MANAGER FACILITIES
Phone: 516 334-1300 EXT. 2374 24 Hr Phone: 800 424-9300
CHEMTREC
Name: Title:
Phone: 24 Hr Phone:

Important Read all instructions before completing form

Reporting Period From January 1 to December 31 19 93

[X] Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7440 02 0 Trade Secret [ ] Chem Name NICKEL Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	Container Type: N Pressure: 1 Temperature: 4 STOCK WAREHOUSE	[ ]
CAS Trade Secret [ ] Chem Name Check all that apply: [ ] Pure [ ] Mix [ ] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [ ] Immediate (acute) [ ] Delayed (chronic)	Max. Daily Amount (code) Avg. Daily Amount (code) No. of Days On-site (days)		[ ]
CAS Trade Secret [ ] Chem Name Check all that apply: [ ] Pure [ ] Mix [ ] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [ ] Immediate (acute) [ ] Delayed (chronic)	Max. Daily Amount (code) Avg. Daily Amount (code) No. of Days On-site (days)		[ ]

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JOSEPH MACRI MANAGER FACILITIES — Joseph Macri — 02-28-94
Name and official title of owner operator OR owner operator s authorized representative — Signature — Date signed

Optional Attachments

[ ] I have attached a site plan
[ ] I have attached a list of site coordinate abbreviations
[ ] I have attached a description of dikes and other safeguard measures

Form Approved OMB No 2050 0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: PERKIN-ELMER CORPORATION METCO DIVISION
Street: 220 MILLER PLACE
City: HICKSVILLE County: NASSAU State: NY Zip: 11801
SIC Code: 3399 Dun & Bradstreet Number: 05-773-1663

FOR OFFICIAL USE ONLY — ID #: ____ Date Received: ____

Owner/Operator Name

Name: JOSEPH MACRI Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact

Name: JOSEPH MACRI Title: MANAGER FACILITIES
Phone: (516) 334-1300 EXT. 2374 24 Hr Phone: (800) 424-9300 CHEMTREC
Name: ____ Title: ____
Phone: ( ) ____ 24 Hr Phone: ( ) ____

Important Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19 93

[X] Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) — Storage Locations	Optional
CAS 7440-02-0; Trade Secret [ ] Chem Name: NICKEL Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name:	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D14 WAREHOUSE, PRODUCTION FLOOR N14 PRODUCTION FLOOR R14 PRODUCTION FLOOR - HARDENED STEEL HOPPERS E14 WAREHOUSE, PRODUCTION FLOOR I14 PRODUCTION FLOOR	[ ]
CAS 7440-47-3; Trade Secret [ ] Chem Name: CHROMIUM Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name:	[X] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D14 WAREHOUSE, PRODUCTION FLOOR N14 PRODUCTION FLOOR R14 PRODUCTION FLOOR - HARDENED STEEL HOPPERS E14 WAREHOUSE, PRODUCTION FLOOR I14 PRODUCTION FLOOR	[ ]
CAS 7440-48-4; Trade Secret [ ] Chem Name: COBALT Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name:	[X] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D14 WAREHOUSE, PRODUCTION FLOOR N14 PRODUCTION FLOOR R14 PRODUCTION FLOOR - HARDENED STEEL HOPPERS E14 WAREHOUSE, PRODUCTION FLOOR I14 PRODUCTION FLOOR	[ ]

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 2 and that based on my inquiry of those individuals responsible for obtaining the information I believe that the submitted information is true, accurate and complete.

JOSEPH MACRI — MANAGER FACILITIES — Joseph Macri — 02-28-94

Name and official title of owner/operator OR owner/operator's authorized representative — Signature — Date signed

Optional Attachments

[ ] I have attached a site plan
[ ] I have attached a list of site coordinate abbreviations
[ ] I have attached a description of dikes and other safeguard measures

Form Approved OMB No 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: PERKIN-ELMER CORPORATION METCO DIVISION
Street: 220 MILLER PLACE
City: HICKSVILLE County: NASSAU State: NY Zip: 11801
SIC Code: 3399 Dun & Brad Number: 05-773-1663

FOR OFFICIAL USE ONLY
ID #:
Date Received:

Owner/Operator Name

Name: JOSEPH MACRI Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact

Name: JOSEPH MACRI Title: MANAGER FACILITIES
Phone: (516) 334-1300 EXT. 2374 24 Hr Phone: (800) 424-9300
CHEMTREC
Name: Title:
Phone: ( ) 24 Hr Phone: ( )

Important Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 93

[X] Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) — Storage Locations	Optional
CAS 7429-90-5 Trade Secret [ ] Chem Name: ALUMINUM Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name:	[X] Fire [ ] Sudden Release of Pressure [X] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 WAREHOUSE, PRODUCTION FLOOR N 1 4 PRODUCTION FLOOR R 1 4 PRODUCTION FLOOR - HARDENED STEEL HOPPERS E 1 4 PRODUCTION FLOOR I 1 4 PRODUCTION FLOOR	[ ]
CAS 1344-25-1 Trade Secret [ ] Chem Name: ALUMINUM OXIDE Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name:	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 WAREHOUSE, PRODUCTION FLOOR N 1 4 PRODUCTION FLOOR R 1 4 PRODUCTION FLOOR - HARDENED STEEL HOPPERS E 1 4 PRODUCTION FLOOR I 1 4 PRODUCTION FLOOR	[ ]
CAS 1314-23-4 Trade Secret [ ] Chem Name: ZIRCONIUM OXIDE Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name:	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [ ] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 WAREHOUSE, PRODUCTION FLOOR N 1 4 PRODUCTION FLOOR R 1 4 PRODUCTION FLOOR - HARDENED STEEL HOPPERS E 1 4 PRODUCTION FLOOR I 1 4 PRODUCTION FLOOR	[ ]

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 2 and that based on my inquiry of those individuals responsible for obtaining the information I believe that the submitted information is true, accurate, and complete.

JOSEPH MACRI — MANAGER FACILITIES — Joseph Macri — 02-28-94
Name and official title of owner/operator OR owner/operator's authorized representative — Signature — Date signed

Optional Attachments

[ ] I have attached a site plan
[ ] I have attached a list of site coordinate abbreviations
[ ] I have attached a description of dikes and other safeguard measures

APPROVED BY OMB: NO. 3150-0166
EXPIRES: 06/30/2007

Estimated burden per response to comply with this information collection request: 3.3 hours. This uniform manifest is required by NRC to meet reporting requirements of Federal and State Agencies for the safe transportation and disposal of low-level waste. Send comments regarding burden estimate to the Records and FOIA/Privacy Service Branch (T-5 F52), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to infocollects@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0166), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

NRC FORM 541
(6-2004)

U.S. NUCLEAR REGULATORY COMMISSION

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

CONTAINER AND WASTE DESCRIPTION

Additional Nuclear Regulatory Commission (NRC) Requirements for Control, Transfer and Disposal of Radioactive Waste

1. MANIFEST TOTALS

NUMBER OF PACKAGES/ DISPOSAL CONTAINERS	NET WASTE VOLUME (m3)	NET WASTE WEIGHT (kg)	SPECIAL NUCLEAR MATERIAL (grams) U-233	U-235	Pu	Total
60	12.7440	7269.7252	NP	NP	NP	NP

ACTIVITY (MBq) ALL NUCLIDES	TRITIUM	C-14	Tc-99	I-129	SOURCE (kg)
3.3966E+01	NP	NP	NP	NP	6.0000E-01

2. MANIFEST NUMBER
SM 70319-08

3. PAGE 1 OF 14 PAGE(S)

4. SHIPPER NAME
Sulzer-Metco (US), Inc.

SHIPPER ID NUMBER
NA

DISPOSAL CONTAINER DESCRIPTION / WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER

5. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	6. CONTAINER DESCRIPTION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ☑ (µSv/hr) ☐ (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	11. WASTE DESCRIPTOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	14. CHEMICAL DESCRIPTION CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT IF > 0.1%	15. RADIOLOGICAL DESCRIPTION INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	16. WASTE CLASSIFICATION AS-Class A Stable AU-Class A Unstable B-Class B C-Class C
SM 70320-01/SM	4	0.2124	50.3488	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-02/SM	4	0.2124	55.7919	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-03/SM	4	0.2124	57.1526	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	

Note 1: Container Description Codes. For containers/ waste requiring disposal in approved structural overpacks the numerical code must be followed by "-OP."

1. Wooden Box or Crate
2. Metal Box
3. Plastic Drum or Pail
4. Metal Drum or Pail
5. Metal Tank or Liner
6. Concrete Tank or Liner
7. Polyethlene Tank or
8. Fiberglass Tank or Liner
9. Demineralizer
10. Gas Cylinder
11. Bulk, Unpackaged Waste
12. Unpackaged Components
13. High Integrity Container
19. Other. Describe in Item 6, or additional page

NOTE 2: Waste Descriptor Codes. (Choose up to three which predominate by volume.)

20. Charcoal
21. Incinerator Ash
22. Soil
23. Gas
24. Oil
25. Aqueous Liquid
26. Filter Media
27. Mechanical Filter
28. EPA or State Hazardous
29. Demolition Rubble
30. Cation Ion-exchange Media
31. Anion Ion-exchange Media
32. Mixed Bed Ion-exchange Media
33. Contaminated Equipment
34. Organic Liquid (except oil)
35. Glassware or Labware
36. Sealed Source/Device
37. Paint or Plating
38. Evaporator Bottoms/Sludges/Concentrates
39. Compactible Trash
40. Noncompactible Trash
41. Animal Carcass
42. Biological Material (except animal carcass)
43. Activated Material
59. Other. Describe in item 11, or additional page

Note3: For solidification media that meet disposal site structural stability requirements, the numerical code must be followed by "-S." For all solidification media, the vendor (manufacturer) and brand name must also be identified in Item 13. Code 100=NONE REQUIRED.

Sorption

60. Speedi Dri
61. Celetom
62. Floor Dry/ Superfine
63. Hi Dri
64. Safe T Sorb
65. Safe N Dri
66. Florco
67. Florco X
68. Solid A Sorb
69. Chemsil 30
70. Chemsil 50
71. Chemsil 3030
72. Dicaperl HP200
73. Dicaperl HP500
74. Petroset
75. Petroset II
76. Aquaset
77. Aquaset II
89. Other. Describe in item 13, or additional page.

Solidification

90. Cement
91. Concrete (encapsulation)
92. Bitumen
93. Vinyl Chloride
94. Vinyl Ester Styrene
99. Other. Describe in item 13, or additional page
100. None Required.

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(3-95)

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

CONTAINER AND WASTE DESCRIPTION

U.S. NUCLEAR REGULATORY COMMISSION

2. MANIFEST NUMBER
SM 70319-08

DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
							PHYSICAL DESCRIPTION			14. CHEMICAL DESCRIPTION		15. RADIOLOGICAL DESCRIPTION	16. WASTE CLASSIFICATION AS-Class A Stable AU-Class A Unstable B-Class B C-Class C
5. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	6. CONTAINER DESCRIPTION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ✓ (µSv/hr) (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	11. WASTE DESCRIPTOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT IF > 0.1%	INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	
SM 70320-04/SM	4	0.2124	242.2183	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-05/SM	4	0.2124	45.8128	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-06/SM	4	0.2124	48.0808	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-07/SM	4	0.2124	45.8128	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-08/SM	4	0.2124	65.3173	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU

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UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

CONTAINER AND WASTE DESCRIPTION

U.S. NUCLEAR REGULATORY COMMISSION

2. MANIFEST NUMBER
SM 70319-08

DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
							PHYSICAL DESCRIPTION			CHEMICAL DESCRIPTION		RADIOLOGICAL DESCRIPTION	
5. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	6. CONTAINER DESCRIP-TION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ☑ (µSv/hr) ☐ (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	11. WASTE DESCRIP-TOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT IF > 0.1%	INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	16. WASTE CLASSIFI-CATION AS-Class A Stable AU-Class A Unstable B-Class B C-Class C
												Total 5.6610E-01 MBq	
SM 70320-09/SM	4	0.2124	28.5763	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-10/SM	4	0.2124	252.6510	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-11/SM	4	0.2124	45.8128	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-12/SM	4	0.2124	353.8021	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	

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UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

CONTAINER AND WASTE DESCRIPTION

U.S. NUCLEAR REGULATORY COMMISSION

2. MANIFEST NUMBER
SM 70319-08

DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
							PHYSICAL DESCRIPTION			14. CHEMICAL DESCRIPTION		15. RADIOLOGICAL DESCRIPTION	
5. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	6. CONTAINER DESCRIPTION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ☑ (µSv/hr) ☐ (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	11. WASTE DESCRIPTOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT IF > 0.1%	INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	16. WASTE CLASSIFICATION AS-Class A Stable AU-Class A Unstable B-Class B C-Class C
SM 70320-13/SM	4	0.2124	263.9908	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-14/SM	4	0.2124	54.8847	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-15/SM	4	0.2124	351.9877	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-16/SM	4	0.2124	337.0192	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-17/SM	4	0.2124	188.6944	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU

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UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

U.S. NUCLEAR REGULATORY COMMISSION

2. MANIFEST NUMBER
SM 70319-08

CONTAINER AND WASTE DESCRIPTION

DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
							PHYSICAL DESCRIPTION			14. CHEMICAL DESCRIPTION		15. RADIOLOGICAL DESCRIPTION	16. WASTE CLASSIFICATION AS-Class A Stable AU-Class A Unstable B-Class B C-Class C
5. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	6. CONTAINER DESCRIPTION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ☑ (µSv/hr) ☐ (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	11. WASTE DESCRIPTOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT IF > 0.1%	INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	
												Total 5.6610E-01 MBq	
SM 70320-18/SM	4	0.2124	317.5147	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-19/SM	4	0.2124	45.3592	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-20/SM	4	0.2124	263.9908	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-21/SM	4	0.2124	405.5116	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	

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UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

U.S. NUCLEAR REGULATORY COMMISSION

2. MANIFEST NUMBER
SM 70319-08

CONTAINER AND WASTE DESCRIPTION

DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
							PHYSICAL DESCRIPTION			14. CHEMICAL DESCRIPTION		15. RADIOLOGICAL DESCRIPTION	
5. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	6. CONTAINER DESCRIPTION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ☑ (µSv/hr) (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	11. WASTE DESCRIPTOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT IF > 0.1%	INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	16. WASTE CLASSIFICATION AS-Class A Stable AU-Class A Unstable B-Class B C-Class C
SM 70320-22/SM	4	0.2124	397.8005	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-23/SM	4	0.2124	384.1928	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-24/SM	4	0.2124	44.9056	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-25/SM	4	0.2124	317.5147	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-26/SM	4	0.2124	72.1212	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU

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UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

CONTAINER AND WASTE DESCRIPTION

U.S. NUCLEAR REGULATORY COMMISSION

2. MANIFEST NUMBER
SM 70319-08

DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
							PHYSICAL DESCRIPTION			CHEMICAL DESCRIPTION		RADIOLOGICAL DESCRIPTION	
5. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	6. CONTAINER DESCRIP-TION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ✓ (µSv/hr) (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	11. WASTE DESCRIP-TOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT IF > 0.1%	15. INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	16. WASTE CLASSIFI-CATION AS-Class A Stable AU-Class A Unstable B-Class B C-Class C
												Total 5.6610E-01 MBq	
SM 70320-27/SM	4	0.2124	66.6781	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-28/SM	4	0.2124	55.3383	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-29/SM	4	0.2124	47.6272	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-30/SM	4	0.2124	53.9775	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	

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(3-95)

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

CONTAINER AND WASTE DESCRIPTION

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DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
							PHYSICAL DESCRIPTION			14. CHEMICAL DESCRIPTION		15. RADIOLOGICAL DESCRIPTION	16. WASTE CLASSIFICATION AS-Class A Stable AU-Class A Unstable B-Class B C-Class C
5. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	6. CONTAINER DESCRIPTION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ☑ (µSv/hr) ☐ (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	11. WASTE DESCRIPTOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT IF > 0.1%	INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	
SM 70320-31/SM	4	0.2124	176.4474	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-32/SM	4	0.2124	154.6750	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-33/SM	4	0.2124	55.7919	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-34/SM	4	0.2124	47.6272	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-35/SM	4	0.2124	48.0808	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU

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UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

CONTAINER AND WASTE DESCRIPTION

U.S. NUCLEAR REGULATORY COMMISSION

2. MANIFEST NUMBER
SM 70319-08

DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
							PHYSICAL DESCRIPTION			CHEMICAL DESCRIPTION		RADIOLOGICAL DESCRIPTION	
5. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	6. CONTAINER DESCRIP-TION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ☑ (µSv/hr) ☐ (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	11. WASTE DESCRIP-TOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT IF > 0.1%	INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	16. WASTE CLASSIFI-CATION AS-Class A Stable AU-Class A Unstable B-Class B C-Class C
												Total 5.6610E-01 MBq	
SM 70320-36/SM	4	0.2124	51.2559	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-37/SM	4	0.2124	49.8952	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-38/SM	4	0.2124	61.6886	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-39/SM	4	0.2124	53.9775	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	

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DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
5. CONTAINER IDENTIFICATION NUMBER/ *GENERATOR ID NUMBER(S)	6. CONTAINER DESCRIP-TION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ☑ (µSv/hr) ☐ (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	PHYSICAL DESCRIPTION 11. WASTE DESCRIP-TOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	14. CHEMICAL DESCRIPTION CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT IF > 0.1%	15. RADIOLOGICAL DESCRIPTION INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	16. WASTE CLASSIFI-CATION AS-Class A Stable AU-Class A Unstable B-Class B C-Class C
SM 70320-40/SM	4	0.2124	53.9775	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-41/SM	4	0.2124	395.5326	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-42/SM	4	0.2124	45.3592	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-43/SM	4	0.2124	30.8443	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-44/SM	4	0.2124	27.2155	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU

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(3-95)

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

CONTAINER AND WASTE DESCRIPTION

U.S. NUCLEAR REGULATORY COMMISSION

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SM 70319-08

DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
							PHYSICAL DESCRIPTION			CHEMICAL DESCRIPTION		RADIOLOGICAL DESCRIPTION	
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												Total 5.6610E-01 MBq	
SM 70320-45/SM	4	0.2124	46.2664	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-46/SM	4	0.2124	59.4206	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-47/SM	4	0.2124	51.7095	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-48/SM	4	0.2124	46.7200	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	

NRC FORM 541A
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UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

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SM 70320-49/SM	4	0.2124	41.2769	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-50/SM	4	0.2124	48.9880	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-51/SM	4	0.2124	43.5449	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-52/SM	4	0.2124	296.6494	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-53/SM	4	0.2124	43.0913	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU

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(3-95)

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

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												Total 5.6610E-01 MBq	
SM 70320-54/SM	4	0.2124	54.4311	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-55/SM	4	0.2124	46.7200	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-56/SM	4	0.2124	44.9056	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-57/SM	4	0.2124	51.2559	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	

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SM 70320-58/SM	4	0.2124	63.0493	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-59/SM	4	0.2124	61.2350	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70320-60/SM	4	0.2124	57.6062	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	

• Licensed
• Bonded
• Insured

KG MECHANICAL INC.
Plumbing & Heating
Specializing in Mechanical Piping

162 Milbar Boulevard
Farmingdale, New York 11735
631-777-2627

12/11/2001

Proposal

Selzer-Metco
1101 Prospect Ave.
Westbury, N.Y.
Attn: Hank

Project

Description	
Supply labor and materials to install new 4" gas main to new make up air unit installed by others. Price includes installing 4" tee and companion flange on existing 4" riser with isolation located in the of building. Piping to penetrate roof, continue across roof supported by pressure treated dunnage and tie into new unit with proper isolation valve. All piping to be tested prior to filling. Please note: pitch pocket or sealing of roof penetration to be done by others. After the tie-in is complete at the riser, existing gas piping should be purged and all gas fired equipment re-started by house HVAC contractor. All work to be done during normal business hours.	8,500.00

OK to Proceed
Hank Nelson

Total $8,500.00

PERKIN ELMER

Metco Perkin-Elmer
1101 Prospect Avenue
P.O. Box 1006
Westbury, New York 11590-0201
Phone (516) 334-1300
Fax (516) 334-6692
Telex 967759

April 23, 1991

Ms. Marianne Santarelli
Kemron Environmental Services
33 Walt Whitman Road
Huntington Station, NY 11746

Dear Ms. Santarelli:

Enclosed find a copy of Metco's U.S. Environmental Protection Agency 1989 Machinery Manufacturing and Rebuilding Data Collection Portfolio.

Please review the material and inform my office if you are able to help us finalize this questionnaire.

Sincerely,

Patrick A. Tighe
Superintendent
Facilities

Coordination

PAT:ecb
cc: A.B. Mazzone
C.L. Conroy

5/15

325 Duffy Will EPA accept METCO fiscal year?
Blue Brochard

manufacture components for

guns, controls units

machining, fol

NO casting, NO printed circuit board
NO plating

some heat treating

- spray guns — plasma, combustion, wire arc
- controllers
- replacement parts → standard items 90%
- powder feeders
- heat exchangers - assembly
- (accessory parts)

total = 7000 parts →

→ Barrel tumbling & spray booth sludge gets mixed together – must estimate relative percentages.

17j Machining – records available for machining scrap

must assign relative percentages per machining operation

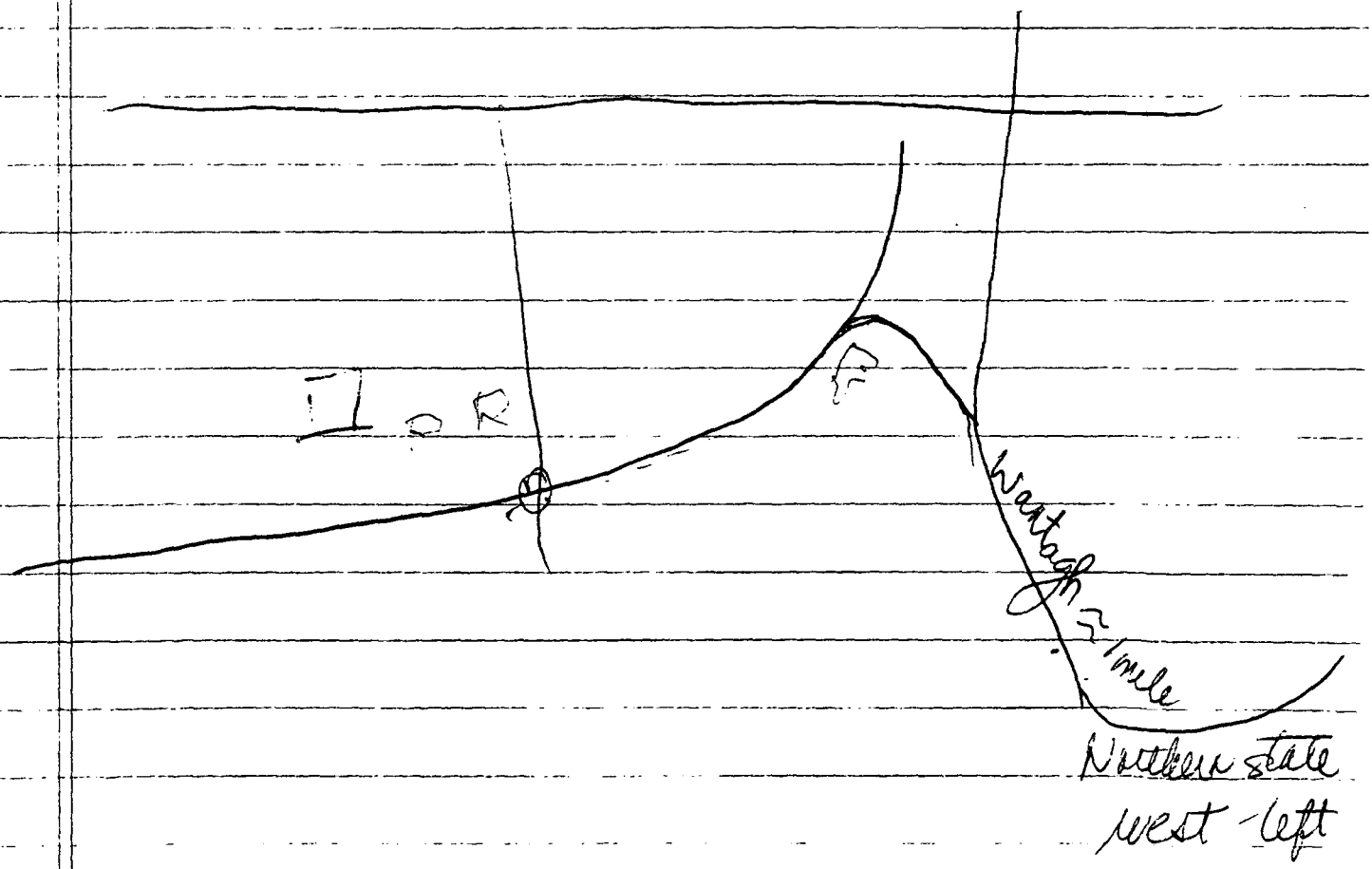
metal spraying – testing – will have

Bute Dip – magnitude is small

Barrel Tumbling – largest undertaking in estimating amounts of tonnage.

T 7:30 AM →

make left on Duffy - pass 1 light
1/4 mile



Duffy Ave 5/16/91

Stock Room - raw material solids, casting tubing
round stock → turning
flat stock → milling

Turret Section

Turning Machines -

3 Hardinge HNC 1 only Black oil soluble

6 Hardinge CHNCI - 1 ~~uses only Black~~ cutting oil

differing sizes NC Lathes - face, turn, thread drill tap, chamfer

4 Hardinge CHNCII 1

3 Star CNC automatic Lathe JNC 25
only 2 uses water sol cut oil
1 uses Black

cutting fluid 30:1 water: protene (Black) holding tank 20 gallons

3 Warner Swazes 1SC NC Lathe
2 uses water sol
1 uses Black

30:1 water: protene

holding tank 58 gallons

Air pollution control dept. Rule filter must - for particulates & aerosol Fab exhausted

[illegible] replaced every 4 months

Lathe

✓ 2 Warner & Swasey # 3 chucker ✓ Both water sol cutting oil

1 INDEX Lathe - cutting oil only ✓ holding tank 9 gallons

1 hydraulic stamper ✓

replenish tank every week

collect waste into 55 gal drums in 4 categories

① Varsol

② Degreaser (ultrasonic) Genesolve (Freon) trichlorotrifluoroethane

③ Burn oil

✓ ④ water sol cutt oil

Drilling Section

✓ 8 Dumore Automatic micro drilling heads - all use oil ✓

✓ 2 Sunnen Honing machines - honing oil ✓

✓ 1 Lapmaster 15 Lapping machine - use Lapping oil ✓ Regal oil R+O 32

✓ 1 Baron Blakeslee Degreasing unit Uses Genesolve freon

✓ 8 Dumore bench top drill press uses wax like acculube PB-8 ✓ drill ream ~~change~~ tap

✓ 1 Rockwell Delta " " ✓

3

3 Hardinge Speed head - turning ✓
1 use water sol
2 use no cutting fluids

1 Northwest stamper - no cutting fluids ✓

1 Hannifin hydraulic press no cut fluids ✓

1 Micromm optical comparator ✓

1 Rockwell Bench grinders 6"
1 Baldor Bench grinders 6"

1 Black Diamond drill sharpener

15 Buffalo drill presses - can use wax or Black

7 Rockwell model 20 Drill press - no cut oil use wax ✓

4 Richards micro drilling machines 2 use water sol ✓
2 use oil

2 Sunnen hydraulic press - no fluids

(12 H2 = gallons)

get MSDS

Chromium trioxide, chromic acid

2x3x2 – ~~wash copper dip off~~ for

Machining Section

1 Copper dip wash sink – ~~water runs into stone~~? filter traps.

✓ 4 Bridgeport milling machines – use wax or black cutting oil out of a

✓ 1 Van Norman milling machine – Black cu

3 Taylor Winfield – thermonic induction heater

✓ 2 Brazing work station – manual torch use Handy flux type containers fumes

✓ 1 South bend manual lathe (10 inch) – use pumice stone

✓ 7 Delta Rockwell drill press ✓

? 1 Torrington 211 Swager hobbing ✓

✓ 1 Hydraulic crimping

Air pollution control for Royal Filter mist – Pollution Fame

? 2 OKUMA + HOWA 3VA milling machine ← Both water soluble

20 gallons

add 10 gallons H_2O week

change tank contents every 2 mos

5

✓ 2 Brown & Sharpe 1000 VC milling machine uses ✓ water sol cutting oil

20 gallon holding tank
add 5 gallons water / week
change tank contents every 2 mos

✓ 1 Reid surface grinder 1 ✓

✓ 1 Coral cylindrical grinder ✓

~~Delta Rockwell~~
✓ 2 Bench grinders (6") 1 ✓
✓ 1 Howell Bench grinder. ✓

✓ 1 Landis cylindrical grinder 1 air pollution control Royal Filter mat - for air mist control only ✓

✓ 1 Jones & Lamson thread grinder
✓ 1 ~~Hobbing~~ machines 1 ✓

✓ 2 Barber Coleman ~~Hobbing~~ machine (gear cutter) use ✓ pick oil

✓ 1 Clausing drill press ✓
✓ 1 Foche drill press ✓

✓ 1 Hardinge speed head - machining Turning ✓

✓ 2 WH Nichols milling machine use wax slotting ✓

1 Startrite H 300 A automatic band saw use water sol
15 gal holding tank
change tank every 2 mos

1 Delta 6" belt sander

1 J-L optical comparator calibration

Tool Room Section

1 abrasive blaster sand

1 Safety Klean - closed loop degreasing machine - uses Varsola

1 Kalamazoo - ~~band saw~~ cutoff saw

1 Electroarc metal disintegrator - use water ~~sol~~ Electric Discharge machining electro arc
1 gallon tank — 40:1 water : primersol primer sol cutting fluid

3 Delta Rockwell drill presses

1 Hossner-Rekord band saw 12"

1 Moore Jig Borer

2 Hardinge 10" tool room lathes turning

7

? 2 Sheldon 15" Lathes - no lubrication ✓

✓ 1 Hardinge Turret lathe ✓

✓ 5 Bridgeport milling machines ✓

✓ 1 Brown & Sharp surface grinder ✓

✓ 1 Okamoto surface grinders 1 ✓

✓ 3 6" pedestal grinders Rockwell ✓

✓ 1 K.O. Lee cylindrical grinder 1 ✓

✓ 1 Porter cable 10" belt sander ✓

air pollution control
Hamnon
Dus Kolector
DK8 model
3 bag collectors

✓ 1 Miller - Arc Welder - uses air pollution ~~control dust~~ Energy Resources Corporation roll away electro static precipitator ✓

1

Air pollution control
Throughout facility

5 Electrostatic precipitators TEPCO

Dressing Department

A) 2 Delta Rockwell Dust presses - wax only ✓

1 Comco mono molding machine electroplating ✓

1 NEFF hydraulic press assembly ✓

1 Hardinge Speed head turning ✓

1 Schauer / Triplex Speed head turning ✓

?/ 1 10 INCH Sheldon lathe ~~molding~~ turning ✓

?/ 1 Clausing 10" lathe turning ✓

B) Painting Room
2 Painting booths - material air filters spray ✓

1 Gehnrich Drying Oven

C) Sanding & Buffing Room

✓ 1 Hammon dual Belt sanders — air pollution control device - Hammon 1 bag → 2 bag house cyclone dust collector, ? ✓

✓ 2 Hammon dual polishing machine — equipped with Hammons Duskolector model DK8 ✓

✓ 3 Hammon single Belt sanders - equipped with Hammon duskolector model TDK655 ✓

✓ 1 Bruce Crane belt sander — equipped with ~~Hammon duskolector~~ model TK8 ✓

✓ 1 A & B Tube sander ✓

✓ 1 A & B belt sander — equipped with Hammon duskolector model DK 4 ✓

✓ 1 cyclo blast abrasive blaster - glass bead media only ✓

D) Tumbling Room

3 large Sueco Tumblers

1 acid 7 ft 3

1 caustic 7 ft 3 Always closed

1 ~~3~~ 4 ft 3

1 ft 3

50% closed
50% flow thru

Tumbling room into sump.

10

Tumbling per week 20 hours 5 hours per tumbler
those that have flow thru & closed capacity ratio would be 60 : 40 flowthru : closed

rough

Basket filter

Process
① ~~Flowthru~~ ultrasheen
② Bleach
③ Burnishing ultrasheen closed

#1 ~~Acid~~ 7ft³ ultrasheen burnishing compound
12 gallons per hour runs max 3 hours

#2 Always closed 7ft³ Aluminum oxide 103-108

#3 1ft³ Aluminum oxide
50% closed Black burnishing
50% ~~open~~ flowthru
24 ounces per minute flowthru runs max 3 hours

Bleach
A) Chemtrol 409 steel
B) Chemtrol 312 ~~Bra~~ Brass aluminum

36
36
30
30
132

#4 4ft³ — same as #1
10 gallons per hour flowthru runs max 3 hours
30

Basket filter to collect sludge - sludge sinks is removed manually, ~~water overflows into basket filter~~ sumpers
All empty into sumps

Not in use

Wall

Cleaning

Wall

Also equipped with a still to purify & recycle solvent by seperating solids from liquid. Employees remove sludge 2x year

Ultrasonic degreaser

pipe for water used for cooling only closed system

1 Finishing Equipment Inc Ultrasonic degreaser

is equipped with air pollution control device

uses Blacothane degreaser (1,1,1 trichloroethane)
50 gallon capacity replenish 55 gallons/month

10

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF AIR

SEQNC NO: 1-R-0253
RUN DATE: 12/03/90

282400 5161 00005 W I
LOCATION FAC EP

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 325 DUFFY AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) HICKSVILLE (9) 11801	DATE OF LAST CHANGE 04/13/90
(5) 1590	(10) REP: MR PATRICK TIGHE 334-1300 X495	PRIOR CO ISSUE DATE 03/16/90
		PRIOR CO EXPIRATION DATE 03/15/91

EMISSION POINT 00005
(41)UTM-E: 624.0 KM. (42)STACK HEIGHT: 19 FT. (43)EXIT VELOCITY: 18.00 FT/SEC (44)SIC: 3561 (45)AGENCY-CODE-1:
(46)UTM-N: 513.6 KM. (47)HT ABV STRUC: 3 FT. (48)EXIT FLOW: 800.00 ACFM (49)CO FEE: $50.00 (50)AGENCY-CODE-2:
(51)GRND ELEV: 139 FT. (52)STK DIAM: 10 IN. (53)EXIT TEMP: 120 DEGR F (54)CO CONDITIONS: 1 3 EDIT: REV. REQ.

UNIT I
(55)HOURS/DAY: 8.0 (56)DAYS/YEAR: 250 (57)% OP BY SEASON: 25 25 25 25 (58)SOURCE CODE: A1203 DEGREASING AND CLEAN
(59)BLDG: 1 (60)FLOOR NAME: 1 (61)RULE 1: 226.00 (62)RULE 2:

PROCESS/UNIT DESCRIPTION
(72)DESCRIPTION 1. VAPOR DEGREASER USED TO CLEAN MANUFACTURED PARTS
2. AREA 2X6

CONTROL EQUIPMENT
(73)TYPE: 020 VAPOR CONDENSER (74)MFG: FINISHING EQUIPMENT INC (75)ID: 01 (76)DATE INSTALLED: 01/86
(77)DISPOSAL METHOD: 09 OTHER (78)USEFUL LIFE: 20 YEARS

AIR CONTAMINANTS	CAS NUMBER	ENV RATING	EMISSIONS ACTUAL	UNIT	HOW DET	PERMISSIBLE	% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR	ANNUAL EMISSIONS (LBS/YEAR) ACTUAL	10x	PERMISSIBLE
TETRACHLOROETHYLENE	(085) 00127-18-4	(086) D	(087) 1.610	(088) 01	(089) 06	(090) 1.610	(091) 5.0	(092) 1.610	(093) 32.200	(094) 2	(095) 32.200

SPEC CONDITIONS
(151)CONDITION 1. AAL COMPLIANCE

(15)PRIOR COMMENTS (16)BY 428VI (17)DATE 03/26/90
1. 3:30PM OPER SATIS
2.
3.
4.
5.

(18)CURRENT COMMENTS (19)BY 428 VSI (20)DATE 01/04/91
1. 3:00 PM OPER SATIS
2.
3.
4.
5.

(27)LAST INSPECTION DATE 01/04/91
(21)INSPECTION STATUS 5
(22)DATE OF NEXT ACTION / /
(23)ISSUE DATE 03/16/91
(24)EXPIRATION DATE 03/15/92
(25)CO FEE $50

FIRM REP'S SIGNATURE: ✓ James Barrett DATE: 1/4/91
ISSUING OFFICER'S SIGNATURE: Bruce B. Smith, P.E. DATE: 4/25/91

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF AIR

SEQNC NO: 1-R-0254
RUN DATE: 12/03/90

282400 5161 00005 W I
LOCATION FAC EP

T O X I C I T Y A N A L Y S I S

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 325 DUFFY AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) HICKSVILLE (9) 11801	DATE OF LAST CHANGE 04/13/90
(5) 11590	(10) REP: MR PATRICK TIGHE 334-1300 X495	PRIOR CO ISSUE DATE 03/16/90
		PRIOR CO EXPIRATION DATE 03/15/91

EMISSION POINT 00005					
(41)UTM-E: 624.0 KM.	(42)STACK HEIGHT: 19 FT.	(43)EXIT VELOCITY: 18.00 FT/SEC	RATIO STK HT / BLDG HT: 1.18
(46)UTM-N: 513.6 KM.	(47)HT ABV STRUC: 3 FT.	(48)EXIT FLOW: 800.00 ACFM	PLUME RISE: NA FT.
(51)GRND ELEV: 139 FT.	(52)STK DIAM: 10 IN.	(53)EXIT TEMP: 120 DEGR F	EFFECTIVE STACK HEIGHT: 19.00 FT.

N O T E - S O U R C E C O D E I N D I C A T E S C A S E S P E C I F I C E X A M I N A T I O N N E C E S S A R Y

AIR CONTAMINANTS	CAS NUMBER	EMISSIONS ACTUAL	UNIT	PERMISSIBLE	% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR	AAL DATA (UG/M3) AAL	TOXIC LVL	SOURCE	MAX CALC AMB LEVEL	REMARKS
ETRACHLOROETHYLENE	(085) 00127-18-4	(087) 1.610	(088) 01	(090) 1.610	(091) 5.0	(092) 1.610	.075	MODERATE		11.7442	AAL EXCEEDED

E N D O F T O X I C I T Y A N A L Y S I S

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF AIR

SEQNC NO: 1-R-0255
RUN DATE: 12/03/90

C 282400 5161 00005 W I
LOCATION FAC EP

E R R O R A N A L Y S I S

R E G I O N 1 B Y P A S S

O W N E R	F A C I L I T Y	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTI
(2) 1101 PROSPECT AVE	(7) 325 DUFFY AVE	(12) APPLICATION STATUS IN COMPLIANCI
(3) WESTBURY (4) NY	(8) HICKSVILLE (9) 11801	DATE OF LAST CHANGE 04/13/90
(5) 11590	(10) REP: MR PATRICK TIGHE 334-1300 X495	PRIOR CO ISSUE DATE 03/16/90
		PRIOR CO EXPIRATION DATE 03/15/91

FORM TYPE	LINE NUMBER	BOX NUMBER	ERROR NUMBER	FATAL/ WARNING FLAG	DESCRIPTION	SIZE OF FIELD
I	1	085	0982	W	MCAL (MAX CALC AMBIENT LEVEL) EXCEEDS AAL	

E N D O F E R R O R A N A L Y S I S

10/18

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF AIR

SEQNC NO: 1-R-0254
RUN DATE: 12/03/90

C 282400 5161 00005 W I
LOCATION FAC EP

T O X I C I T Y A N A L Y S I S

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 325 DUFFY AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) HICKSVILLE (9) 11801	DATE OF LAST CHANGE 04/13/90
(5) 11590	(10) REP: MR PATRICK TIGHE 334-1300 X495	PRIOR CO ISSUE DATE 03/16/90
		PRIOR CO EXPIRATION DATE 03/15/91

EMISSION POINT 00005							
(41)UTM-E:	624.0 KM.	(42)STACK HEIGHT:	19 FT.	(43)EXIT VELOCITY:	18.00 FT/SEC	RATIO STK HT / BLDG HT:	1.18
(46)UTM-N:	513.6 KM.	(47)HT ABV STRUC:	3 FT.	(48)EXIT FLOW:	800.00 ACFM	PLUME RISE:	NA FT.
(51)GRND ELEV:	139 FT.	(52)STK DIAM:	10 IN.	(53)EXIT TEMP:	120 DEGR F	EFFECTIVE STACK HEIGHT:	19.00 FT.

N O T E - S O U R C E C O D E I N D I C A T E S C A S E S P E C I F I C E X A M I N A T I O N N E C E S S A R Y

AIR CONTAMINANTS	CAS NUMBER	EMISSIONS ACTUAL	UNIT	PERMISSIBLE	% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR	AAL DATA (UG/M3) AAL	TOXIC LVL	SOURCE	MAX CALC AMB LEVEL	REMARKS
TETRACHLOROETHYLENE	(085) 00127-18-4	(087) 1.610	(088) 01	(090) 1.610	(091) 5.0	(092) 1.610	.075	MODERATE		11.7442	AAL EXCEEDED

Air pollution device specs for ultrasonic degreaser in Finishing Dept

E N D O F T O X I C I T Y A N A L Y S I S

Tumbling

10 19

4 CU. FT BARREL

[redacted]RASIVE CUT

103 – [redacted]16 OZ. TO [redacted]1 1/2 GAL. WATER

108 – [redacted]12 OZ. TO [redacted]1 1/2 GAL. WATER

[redacted]LEACH

409 – [redacted]6 OZ. TO [redacted]4 GAL. WATER (ALUMI. USE 3 OZ.)

312 – 12 OZ. TO [redacted]4 GAL. WATER

[redacted]NISH – 10 OZ. ULTRASHEEN TO [redacted]5 GAL. WATER

1 CU. FT BARREL

ABRASIVE CUT

103 – [redacted]16 OZ TO 2 QT. WATER

108 – [redacted]12 OZ TO 2 QT. WATER

BLEACH

409 – 2 OZ. TO [redacted]1 [redacted]GAL WATER ALL MATL EXCEPT

312 – 4 OZ. TO [redacted]1 GAL WATER NON-STAINLESS STEEL

[redacted]URNISH

ULTRASHEEN – [redacted]3 OZ. TO [redacted]1 GAL WATER

tumbling

10

7 CU. FT. BARREL

7 open & closed

ABRASIVE CUT

103- 56 OZ TO 4 GAL. WATER 8 gal

108- 48 OZ TO 4 GAL. WATER 8 gal

CLOSED SYSTEM

BLEACH

409- 8 OZ. TO 4 GAL. WATER (FOR ALUM. USE 6 OZ. TO 5 GAL 4.5

312- 24 OZ. TO 4 GAL. WATER 5.5

CLOSED SYSTEM

BURNISH

ULTRASHEEN- 18 OZ TO 7 GAL. WATER 8 gal

CLOSED SYSTEM

ULTRASONIC TANK

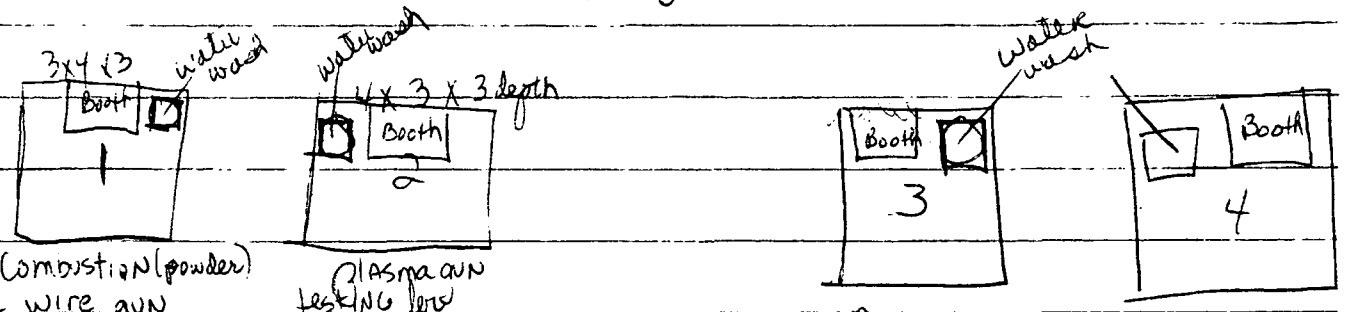
15 OZ. ULTRASHEEN TO 30 GAL. WATER

FLOW-THRU BARREL

1/2 OZ. ULTRASHEEN PER GAL. WATER

Inspection Section - QC

4 walk in METCO spray ~~booth~~ Room



Combustion (powder) & wire gun spray test with powder

Plasma gun testing for electrical specification (NO powder) & water flow

ARC guns
wire guns
Combustion guns

Combustion guns

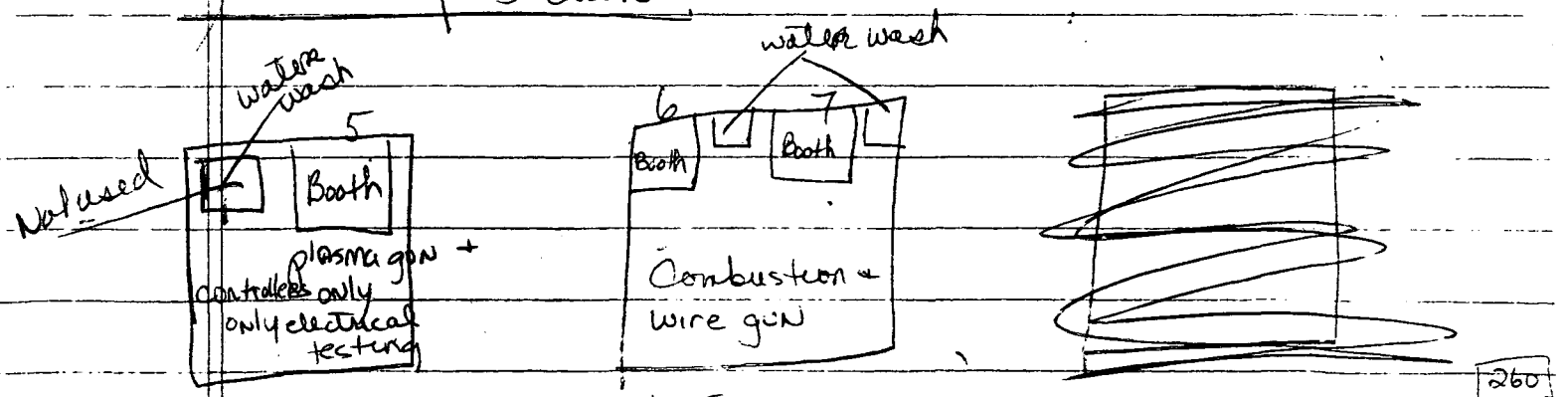
15E powder ~~Nickel base alloy~~

15E powder

450NS powder Nickel al.

water spray → 25 gallons holding tank → closed loop recirculating
~~but~~ changed every 5 days
accumulated in 55 gallon drums

Assembly Section



15E
450NS
4008 - Nickel al
68F - NS1 - cobalt base
Chromium

.0055/d

260

11.6 hours

51 hours

11.6 hours

93 hours

.054

.0058

.005

.0

4.8

Assembly Cont'd

test SINK

SINK
Not used

Heatexchangers
8ME or
4ME

Run well water
12½ gal / minute
test for 2 minutes
goes to sump
water is heated
from 57° to 70°

Freon degreaser

Kerosene

Boron Blackville with 10 spare

uses 55 gallons / year

1 Eubanks wire stripping machine ✓

1 Black & Decker Table saw ✓

1 pedestal Rockwell grinder ✓ 1

1 10" Southbend Lathe ✓

2 Delta Drill Press ✓

1 MAX mill milling machinery ✓

1 NEFF hydraulic press ✓

18 Soldering work stations - uses soldering iron ✓

1 Soldering work station - uses soldering pot ✓

Solder < 60 Tin, 40 lead

NOKORODE soldering paste - contains zinc chloride

Product or Item		Quantity
Spray guns	1 Plasma -	manufacture
	2 Combustion -	"
	3 wire -	"
	4 arc -	"

1 Plasma - ~~high temperature~~ 10,000 to 20000°F gun used to melt high temperature melting point metal powders

2 combustion - gun used to melt low temperature melting point metal powder < 2000°F

3 wire - gun " " single wire thru gas flame
" " metal wire < 2000°F

4 arc - gun electronically arcing 2 wire
use only zinc aluminum ~~used~~ as wires (coating) < 2000°F

Controllers 1 plasma
2 Combustion
3. arc

plasma - controllers flow of air + gases + water + ~~electrical~~ power power

combustion - controls air + gases

arc - controls power level + air

Heat exchangers — 8 ME (1) & 4 ME (2) - size differentiation
Controls temperature of gun by moving water thru the gun

powder feeders — used to supply

Plasma & combustion flames with powder
(1) Low Velocity
(2) High Velocity

replacement parts
nozzles
air caps
electrodes
Syphon plugs
contact tips
drive rollers
90%
accessories

James Zanetti
Plant Manager
Metco Div. Of Perkin Elmer
325 Duffy Ave
Hicksville, NY 11801

7824

26

U.S. ENVIRONMENTAL PROTECTION AGENCY
MACHINERY MANUFACTURING AND REBUILDING SURVEY

Part I. General Information

1. Name of Parent Company or Corporation Perkin Elmer Incorporated
(If none, state "none")

Address of Corporate Headquarters 761 MAIN AVE
Street
Norwalk CONN. 06859
City State Zip

2. Name of Site METCO Incorporated Division of Perkin Elmer

Street Address of Site 325 Duffy Avenue
Street
Hicksville N.Y 11801
City State Zip

Mailing Address
(if different from street address) _____

City State Zip

3. Person to be contacted for information about this site:

Name James Zanetti

Title Plant Manager Telephone (516) 938 1661

Name of alternate William Bouchard

Title Supervisor manufacturing Telephone (516) 938 1661

4. Site Operations

In calendar year 1989 or the last full production year, was this site engaged in:

a. The manufacture of machinery? Machinery manufacturing is the series of operations necessary to produce machines primarily from metal components.

Yes ✓ No ____

Last full production year if other than 1989: 1990

U.S. ENVIRONMENTAL PROTECTION AGENCY
MACHINERY MANUFACTURING AND REBUILDING SURVEY

Company Name METCO INC
Site Name Duffy Ave

4. b. The rebuilding of machinery? Machinery rebuilding is the series of operations necessary to disassemble previously manufactured and used machines into components or subassemblies, replace the components or subassemblies or restore them to original function, and then reassemble the restored machine.

Yes ✓ No ____

Last full production year if other than 1989: 1990

c. The maintenance of machinery? Machinery maintenance includes the various mechanical operations on original or replacement components required to keep machines in operating condition.

Yes ____ No ✓

Last full production year if other than 1989: ____

5. Certification

When Parts I through VI of this data collection portfolio have been completed, you must read and sign the certification statement below.

I certify under penalty of law that this document was prepared under my direction or supervision in accordance with a system designed to assure 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. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature of certifying official ____ Date ____

JAMES
First Name

ZANETTI
Last Name

Plant Manager
Title of certifying official

If the answer to each part of Question 4 (parts a, b, and c) is no, please detach pages 49 and 50 of this data collection portfolio and return them to EPA. If you answered yes to any part of Question 4, complete the remaining questions.

U.S. ENVIRONMENTAL PROTECTION AGENCY
MACHINERY MANUFACTURING AND REBUILDING SURVEY

Company Name METCO INC
Site Name Duffy Ave

6. Number of equivalent full-time employees at this site in ~~1989~~ 1990 during the pay period including the 12th day of:
   a. March 125
   b. May 125
   c. August 125
   d. November 125
   e. Total 125

Complete questions 7 through 9 for machinery manufacturing, rebuilding, and maintenance (if applicable).

	Manufacturing	Rebuilding	Maintenance
7. a. Year this site built	1980	1980	1980
b. Year operations commenced	1990	NONE	NONE
c. Year of latest major modification			
d. Brief description of latest major modification	additional/replacement machinery purchased	—	—

8. Number of equivalent full-time production employees engaged in machinery manufacturing, rebuilding, and maintenance operations at this site in ~~1989~~ 1990 during the pay period including the 12th day of:

	Manufacturing	Rebuilding
a. March	65	20 (18 out of manufacturing population)	5 (5 out of rebuilding population)
b. May	65	20	5
c. August	65	20	5
d. November	65	20	5
e. Total	65	20	5

TOTAL "Real" PRODUCTION POPULATION IS 67 employees

9. Estimate the average monthly energy usage during ~~1989~~ 1990 for the performance of machinery manufacturing, rebuilding, and maintenance operations.

	Manufacturing	Rebuilding	Maintenance
a. Electrical Energy (kwh/month)	114,000	4800	1200
b. Fuel Oil (gal/month)	0	0	0
c. Natural Gas (cubic ft/month)	1350	57	14
d. Other (Specify)	0	0	0

U.S. ENVIRONMENTAL PROTECTION AGENCY
MACHINERY MANUFACTURING AND REBUILDING SURVEY

Company Name METCO INC
Site Name Duffy Ave

10. a. Does this site have a National Pollutant Discharge Elimination System (NPDES) permit? Yes ____ No ✓
If yes, please provide:
Permit Number _____
Expiration Date _____

b. Does this site have a NPDES permit pending? Yes ____ No ✓
If yes, please provide:
Application Number _____
Date of Application _____

11. Does this site discharge to a publicly owned treatment works (POTW)?
Yes ✓ No ____
If yes, please provide:
Name of POTW Town of Hicksville water district
Address 4 Dean Street Hicksville 11801

12. Hazardous waste generator or RCRA EPA ID number (if applicable) _____
EPA ID number NYD 057731663

13. a. Are any wastewaters generated at your site currently regulated under one or more existing national categorical limitation or standard (effluent guideline)? Yes ✓ No ____

If yes, indicate the Industrial Category (or Categories) wastewaters are regulated under:

b. ____ Aluminum Forming, 40 CFR 467
c. ____ Battery Manufacturing, 40 CFR 461
d. ____ Coil Coating, 40 CFR 465
e. ____ Copper Forming, 40 CFR 468
f. ____ Electrical and Electronic Components, 40 CFR 469
g. ____ Electroplating, 40 CFR 413
h. ____ Ferroalloy Manufacturing, 40 CFR 424
i. ✓ Iron and Steel Manufacturing, 40 CFR 420
j. ✓ Metal Finishing, 40 CFR 433
k. ____ Metal Molding and Casting, 40 CFR 464
l. ____ Nonferrous Metals Manufacturing, 40 CFR 421
m. ____ Nonferrous Metals Forming and Metal Powders, 40 CFR 471
n. ____ Plastics Molding and Forming, 40 CFR 463
o. ____ Porcelain Enameling, 40 CFR 466
p. ____ Rubber Processing, 40 CFR 428
q. ____ Other (specify) _____

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U.S. ENVIRONMENTAL PROTECTION AGENCY
MACHINERY MANUFACTURING AND REBUILDING SURVEY

Company Name METCO INC
Site Name Duffy Ave

Part II - Process Information

14. Complete the table below for each product or item manufactured, rebuilt, or maintained at this site in 1989 (additional copies of this page may be necessary[1]). Manufacturing, rebuilding, and maintenance should be described separately. For example, if a product or item is both manufactured and rebuilt at this site, the information should be provided for manufacturing and rebuilding on separate lines of the table.

Product or Item	Brief Description of Product or Item	Indicate Whether Manufactured, Rebuilt or Maintained	Quantity Manufactured, Rebuilt, or Maintained in ~~1989~~ 1990 (indicate units - e.g., lb., ft.)	Site 4-Digit SIC Code
Powder Feeder 4MP	Component part used to supply plasma and combustion flames with powder	manufactured	85 pieces	3399
Powder Feeder 4MP	Component part used to supply plasma and combustion flames with powder	Rebuilt	7 pieces	3399
Powder Feeder 4MP DUAL	" "	manufactured	66 pieces	3399
Powder Feeder 4MP Dual	" "	Rebuilt	3 pieces	3399
Powder Feeder DJP	" "	manufactured	51 pieces	3399

[1]Additional copy of Question 14 is provided in Attachment A. This page can be photocopied if needed.

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U.S. ENVIRONMENTAL PROTECTION AGENCY
MACHINERY MANUFACTURING AND REBUILDING SURVEY

Company Name METCO INC
Site Name Duffy Ave

Part II - Process Information

14. Complete the table below for each product or item manufactured, rebuilt, or maintained at this site in 1989 (additional copies of this page may be necessary[1]). Manufacturing, rebuilding, and maintenance should be described separately. For example, if a product or item is both manufactured and rebuilt at this site, the information should be provided for manufacturing and rebuilding on separate lines of the table.

Product or Item	Brief Description of Product or Item	Indicate Whether Manufactured, Rebuilt or Maintained	Quantity Manufactured, Rebuilt, or Maintained in 1989 (indicate units - e.g., lb., ft.)	Site 4-Digit SIC Code
WIRE SPRAY GUN 11E	GUN USED TO MELT SINGLE WIRE THRU GAS FLAME WITH A METAL WIRE MELTING POINT OF < 2000°F	manufactured	200 GUNS	3399
"	"	Rebuilt	3 GUNS	3399
WIRE SPRAY GUN 12E	"	manufactured	200 GUNS	
"	"	Rebuilt	19 GUNS	
WIRE SPRAY GUN 3APG	"	manufactured	20 GUNS	
PLASMA SPRAY GUN 9MB	GUN USED TO MELT HIGH TEMPERATURE (10,000 - 20,000°F) MELTING POINT METAL POWDERS	Manufactured	20 GUNS	

[1]Additional copy of Question 14 is provided in Attachment A. This page can be photocopied if needed.

U.S. ENVIRONMENTAL PROTECTION AGENCY
MACHINERY MANUFACTURING AND REBUILDING SURVEY

Company Name METCO INC
Site Name Duffy Ave.

Part II - Process Information

14. Complete the table below for each product or item manufactured, rebuilt, or maintained at this site in 1989 (additional copies of this page may be necessary[1]). Manufacturing, rebuilding, and maintenance should be described separately. For example, if a product or item is both manufactured and rebuilt at this site, the information should be provided for manufacturing and rebuilding on separate lines of the table.

Product or Item	Brief Description of Product or Item	Indicate Whether Manufactured, Rebuilt or Maintained	Quantity Manufactured, Rebuilt, or Maintained in 1989 (indicate units - e.g., lb., ft.)	Site 4-Digit SIC Code
plasma spray gun 10MB	gun used to melt high temperature (10,000-20,000 °F) melting point metal powders	manufactured	10 guns	3399
plasma spray gun 3MB	" "	"	10 guns	
combustion spray gun 5PII	gun used to melt low temperature (<2000°F) melting point metal powders	manufactured	130 guns	
"	"	Rebuilt	7 guns	
combustion spray gun DJ	"	manufactured	50 guns	
combustion spray gun 6PII	"	manufactured	115 guns	

[1]Additional copy of Question 14 is provided in Attachment A. This page can be photocopied if needed.

U.S. ENVIRONMENTAL PROTECTION AGENCY
MACHINERY MANUFACTURING AND REBUILDING SURVEY

Company Name METCO INC
Site Name Duffy Ave.

Part II - Process Information

14. Complete the table below for each product or item manufactured, rebuilt, or maintained at this site in 1989 (additional copies of this page may be necessary[1]). Manufacturing, rebuilding, and maintenance should be described separately. For example, if a product or item is both manufactured and rebuilt at this site, the information should be provided for manufacturing and rebuilding on separate lines of the table.

Product or Item	Brief Description of Product or Item	Indicate Whether Manufactured, Rebuilt or Maintained	Quantity Manufactured, Rebuilt, or Maintained in 1989 (indicate units - e.g., lb., ft.)	Site 4-Digit SIC Code
Combustion spray gun 6PII	gun used to melt low temperature (<2000°F) melting point melting powders	Rebuilt	1 gun	3399
Arc wire spray gun 5RE	gun used to electronically arc 2 zinc aluminum wires	manufactured	25 guns	
Arc wire spray gun 4RE	" "	"	400 guns	
Arc wire spray gun 6RE	" "	"	50 guns	
Heat exchanger 8ME	component part that controls temperature of spray gun	manufactured	18 pieces	
Heat exchanger 4ME	" "	manufactured	20 pieces	

[1]Additional copy of Question 14 is provided in Attachment A. This page can be photocopied if needed.

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U.S. ENVIRONMENTAL PROTECTION AGENCY
MACHINERY MANUFACTURING AND REBUILDING SURVEY

Company Name METCO INC
Site Name Duffy Ave.

Part II - Process Information

14. Complete the table below for each product or item manufactured, rebuilt, or maintained at this site in 1989 (additional copies of this page may be necessary[1]). Manufacturing, rebuilding, and maintenance should be described separately. For example, if a product or item is both manufactured and rebuilt at this site, the information should be provided for manufacturing and rebuilding on separate lines of the table.

Product or Item	Brief Description of Product or Item	Indicate Whether Manufactured, Rebuilt or Maintained	Quantity Manufactured, Rebuilt, or Maintained in 1989 (indicate units - e.g., lb., ft.)	Site 4-Digit SIC Code
controller 7MC 2	component part that controls flow of air, gases, water + power (plasma)	manufactured	41 pieces	3399
Controller DJC	component part that controls air and gases (combustion)	manufactured	5 pieces	
controller 6 C	" "	manufactured	8 pieces	
controller 4RC	component part that controls power + air (arc)	manufactured	133 pieces	
Controller 4RC	" "	Rebuilt	1 piece	
Controller 5RC	" "	manufactured	25 pieces	

[1]Additional copy of Question 14 is provided in Attachment A. This page can be photocopied if needed.

6

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U.S. ENVIRONMENTAL PROTECTION AGENCY
MACHINERY MANUFACTURING AND REBUILDING SURVEY

Company Name METCO INC
Site Name Duffy Ave

Part II - Process Information

14. Complete the table below for each product or item manufactured, rebuilt, or maintained at this site in 1989 (additional copies of this page may be necessary[1]). Manufacturing, rebuilding, and maintenance should be described separately. For example, if a product or item is both manufactured and rebuilt at this site, the information should be provided for manufacturing and rebuilding on separate lines of the table.

Product or Item	Brief Description of Product or Item	Indicate Whether Manufactured, Rebuilt or Maintained	Quantity Manufactured, Rebuilt, or Maintained in 1989 (indicate units - e.g., lb., ft.)	Site 4-Digit SIC Code
controller 6RC	Component part that controls power & air (arc)	manufactured	13 pieces	3399
controller MCN	component part that controls flow of air, gases, water + power plasma	manufactured	28 pieces	↓
controller MCN	" "	Rebuilt	1 piece	↓
Replacement parts	Any component or accessory parts for any of the above products	manufactured (or assembled)	100,000 pieces	3399
	includes nozzles air caps, siphon plugs electrodes, hoses, extensions,			

[1]Additional copy of Question 14 is provided in Attachment A. This page can be photocopied if needed.

U.S. ENVIRONMENTAL PROTECTION AGENCY
MACHINERY MANUFACTURING AND REBUILDING SURVEY

Company Name METCO INC
Site Name Duffy Ave

15. Does this site manufacture printed circuit boards? The definition of printed circuit board manufacturing is provided on page 43 of the instructions to this data collection portfolio.
Yes ____ No ✓

16. On pages 55 through 60 indicate which unit operations are performed during manufacturing, rebuilding, or maintenance.

- Report the total number of operations, the number of wet operations, and the number of rinses associated with the operations. Wet operations are those operations that use process water as defined on page 33 of the instructions to this data collection portfolio. Rinses associated with an operation includes rinsing (defined on page 44 of the instructions) subsequent to performing the operation and prior to performing another operation. In cases where multiple operations are followed by a common rinse, report the rinse as associated with each operation. Multiple rinse tanks not separated by a unit operation are considered one rinsing operation.

- Multiple units of the same type of equipment performing the same operation on similar parts or items should be counted as one operation. Operations performed on different metal types or using different equipment types should be counted separately. Examples:

  - The surface grinding of cast iron plates using a set of three similar grinders would be reported as one grinding operation. The response to Question 17e for this operation should indicate the number of machines included in each operation.

  - Cast iron crankshaft grinding conducted in one section of the site and clutch plate surface grinding conducted elsewhere would be counted as two grinding operations.

Definitions of operations 1 through 47 are provided on pages 34 through 47 of the instructions to this data collection portfolio. If an operation or process at your site does not fit any of the terms provided, list the operation or process with as descriptive a name as possible at the end of this table.

Leave blank spaces for operations not practiced at this site.

U.S. ENVIRONMENTAL PROTECTION AGENCY
MACHINERY MANUFACTURING AND REBUILDING SURVEY

Company Name METCO INC
Site Name Duffy avenue

16. (Continued)

Number of Processes

Unit Operations	Manufacturing Total	Manufacturing Wet	Manufacturing Associated Rinse	Rebuilding Total	Rebuilding Wet	Rebuilding Associated Rinse	Maintenance Total	Maintenance Wet	Maintenance Associated Rinse
1. Abrasive Blasting									
a. Bead (4)	1	0	0						
b. Grit									
c. Sand (4)	1	0	0						
d. Shot									
e. Other, specify									
2. Abrasive Jet Machining (Vapor Blasting)									
3. Acid Treatment									
a. Acid Cleaning									
b. Chemical Etching									
i. Bright Dipping (4)	1	0	1						
ii. Other, specify									
c. Pickling									
d. Other, specify									
4. Adhesive Bonding									
5. Alkaline Treatment									
a. Alkaline Cleaning									
b. Chemical Etching									
c. Other, specify									
6. Anodizing									
a. Chemical									
b. Chromic Acid									
c. Phosphoric Acid									
d. Sulfuric Acid									
e. Other, specify									

U.S. ENVIRONMENTAL PROTECTION AGENCY
MACHINERY MANUFACTURING AND REBUILDING SURVEY

Company Name METCO INC.
Site Name Duffy Avenue

16. (Continued)

Number of Processes

Unit Operations	Manufacturing Total	Manufacturing Wet	Manufacturing Associated Rinse	Rebuilding Total	Rebuilding Wet	Rebuilding Associated Rinse	Maintenance Total	Maintenance Wet	Maintenance Associated Rinse
7. Assembly (5) hydraulic press ~~1 assembly~~	4	0	0	1	0	0			
8. Barrel Finishing (Tumbling)	1	1	1						
9. Brazing	1	0	0						
10. Burnishing									
11. Calibration (2) optical comparitors	2	0	0	2	0	0			
12. Chemical Conversion Coating									
a. Chromate Conversion Coating									
b. Phosphate Conversion Coating									
c. Complex Oxide Conversion Coating									
d. Coloring									
e. Passivating									
f. Other, specify									
13. Chemical Machining (Chemical Milling)									
14. Corrosion Preventive Coating (Other than conversion coating)									
15. Disassembly									
16. Electrical Discharge ~~(1)~~ Machining	1	1	0						
17. Electrochemical Machining									
18. Electrolytic Cleaning									
19. Electroplating									
20. Electron Beam Machining									
21. Electropolishing									
22. Floor Cleaning	1	1	0						
23. Grinding (16)	10	0	0						

U.S. ENVIRONMENTAL PROTECTION AGENCY
MACHINERY MANUFACTURING AND REBUILDING SURVEY

Company Name METCO INC
Site Name Duffy ~~[illegible]~~ AVE

16. (Continued)

Number of Processes

Unit Operations	Manufacturing Total	Manufacturing Wet	Manufacturing Associated Rinse	Rebuilding Total	Rebuilding Wet	Rebuilding Associated Rinse	Maintenance Total	Maintenance Wet	Maintenance Associated Rinse
24. Heat Treating									
a. Aging									
b. Annealing +1A	1	0	0						
c. Austempering									
d. Austenitizing									
e. Carburizing									
f. Cyaniding									
g. Malleablizing									
h. Martempering									
i. Nitriding									
j. Normalizing									
k. Siliconizing									
l. Tempering -(1)	1	0	0						
m. Other, specify									
25. Hot Dip Coating									
26. Impact Deformation									
a. Coining									
b. Forging									
c. Heading									
d. High Energy Rate Forming									
e. Peening									
f. Shot Peening									
g. Stamping (2)	2	0	0						
h. Other, specify									
27. Laminating									
28. Laser Beam Machining									

U.S. ENVIRONMENTAL PROTECTION AGENCY
MACHINERY MANUFACTURING AND REBUILDING SURVEY

Company Name METCO INC
Site Name Duffy Ave

16. (Continued)

Number of Processes

Unit Operations	Manufacturing Total	Manufacturing Wet	Manufacturing Associated Rinse	Rebuilding Total	Rebuilding Wet	Rebuilding Associated Rinse	Maintenance Total	Maintenance Wet	Maintenance Associated Rinse
29. Machining									
a. Boring ✓ (44)	7	2	0						
b. Broaching									
c. Chamfering ✓ (44)	6	3	0						
d. Cutoff ✓ (44)	6	3	0						
e. Drilling ✓ (44+60)	13	2	0						
f. Hobbing ✓ (2)	1	0	0						
g. Milling ✓ (15)	7	2	0						
h. Planing									
i. Reaming ✓ (44)	6	3	0						
j. Sawing ✓ (4)	3	1	0						
k. Shearing									
l. Shaping									
m. Shaving									
n. Slotting ✓ all milling (15) Nichols (10)	8	1	0						
o. Tapping ✓ 44	6	3	0						
p. Threading ✓ 44	6	2	0						
q. Turning ✓ 44+6	10	2	0						
r. Other, specify									
30. Metal Spraying (7) (including water curtains)	2	2	0						
31. Painting (including water curtains)									
a. Electropainting (Electrophoretic Painting)									
b. Electrostatic Painting									
c. Spray (2)	2	0	0	2	0	0			
d. Other, specify									
r. HONING (1)	1	0	0						
LAPING (1)	1	0	0						
SANDING (9)	3	0	0						

U.S. ENVIRONMENTAL PROTECTION AGENCY
MACHINERY MANUFACTURING AND REBUILDING SURVEY

Company Name METCO INC
Site Name Duffy Ave

16. (Continued)

Number of Processes

Unit Operations	Manufacturing Total	Manufacturing Wet	Manufacturing Associated Rinse	Rebuilding Total	Rebuilding Wet	Rebuilding Associated Rinse	Maintenance Total	Maintenance Wet	Maintenance Associated Rinse
32. Plating (except electroplating)									
a. Electroless Plating									
b. Immersion Plating									
c. Mechanical Plating									
d. Vapor Plating									
e. Other, specify									
33. Plasma Arc Machining									
34. Polishing (2)	1	0	0						
35. Pressure Deformation									
a. Bending									
b. Crimping (1)	1	0	0						
c. Drawing									
d. Embossing									
e. Flaring									
f. Forming									
g. Necking									
h. Rolling									
i. Other, specify									
36. Rinsing									
a. Continuous Overflow									
b. Countercurrent Cascade									
c. Spray									
d. Stagnant Dip									
e. Other, specify									
37. Salt Bath Descaling									
38. Soldering 19	2	0	0						
39. Solvent Degreasing (4)	4	0	0						
40. Sputtering									

U.S. ENVIRONMENTAL PROTECTION AGENCY
MACHINERY MANUFACTURING AND REBUILDING SURVEY

Company Name METCO INC.
Site Name Duffy Ave.

16. (Continued)

Number of Processes

Unit Operations	Manufacturing Total	Manufacturing Wet	Manufacturing Associated Rinse	Rebuilding Total	Rebuilding Wet	Rebuilding Associated Rinse	Maintenance Total	Maintenance Wet	Maintenance Associated Rinse
41. Stripping									
a. Paint Strip									
b. Plating Strip									
c. Other, specify WIRE	1	0	0						
42. Testing									
a. Dye Penetrant Testing									
b. Hydraulic Testing									
c. Other, specify WATER FLOW	1	1	0	1	1	0			
43. Thermal Cutting									
44. Thermal Infusion									
45. Ultrasonic Machining									
46. Vacuum Metalizing									
47. Welding									
a. Arc Welding	1	0	0						
b. Cold Welding									
c. Elecron Beam Welding									
d. Gas Welding	1	0	0						
e. Laser Beam Welding									
f. Resistance Welding									
g. Other									
48. Other, specify									

42

U.S. ENVIRONMENTAL PROTECTION AGENCY
MACHINERY MANUFACTURING AND REBUILDING SURVEY

Company Name METCO INC
Site Name Duffy Ave

Part III - Water Supply

22. Specify the following information on the water supply for the entire site during ~~1989~~. 1990

Total Water Supply for the Site:

SOURCE	AVERAGE FLOW* FOR THE SITE (gph)	TOTAL INTAKE OPERATING HOURS FOR ~~1989~~ 1990	PERCENTAGE OF INTAKE USED FOR MACHINERY MANUFACTURING, REBUILDING, AND MAINTENANCE
River	NA	—	—
Lake	NA	—	—
Well	3603	3756	.0007
Municipal	818	3756	.0002
Other N/A (specify)			

*Average flow is defined as total volume of water intake divided by the total number of hours of intake operation.

Company Name METCO INC
Site Name Duffy Ave

Part V - Process and Hazardous Wastes

34. Process Chemical Wastes

Identify on the table below all process chemical wastes generated during the performance of machinery manufacturing, rebuilding, and maintenance operations at this facility in ~~1989~~ 1990. Indicate nature of the chemical (i.e., solvent, lubricant, detergent, acid, etc.) under "Type." Indicate the specific name of the chemical under "Name." If the process chemical waste is hazardous, include the RCRA hazardous waste number (i.e., D004, F010, K062). If the process chemical waste is not hazardous, indicate not applicable (N/A). Indicate the product and operation for which the chemical is used (should correspond to response to Questions 14 and 16). Under "Method of Disposal" indicate whether reclaimed onsite or offsite; disposed of onsite or offsite; or discharged to facility treatment system, surface water, or POTW. If the waste is reclaimed or disposed of, provide method of reclamation or disposal (e.g., incinerated onsite, distilled offsite). Use additional copies of this page as necessary.

Type	Name	RCRA Hazardous Waste Number	Product-Operation	Quantity Disposed (gal/yr)	Method of Disposal	Cost of Disposal ($/gal)
Example: Lubricant	Aliphatic hydrocarbon	N/A	Engine block-machining	250 gal/yr	incinerated offsite	$0.05
Solvent	1,1,1-tri-chloroethane	F001	Wheel bearing-degreasing	1,000 gal/yr	distilled offsite	$0.40
Lubricant Cutting fluid	hydrotreated mineral oil and petroleum hydrocarbon		All- machining		drummed, removed and disposed of by ~~Hazardous waste~~ contractor	
Solvent	trichlorotrifluoro ethane		All- ultrasonic degreasing			
Solvent	petroleum hydrocarbon		All- degreasing			
Acid	Chromium trioxide		All copper brass Bright dip or copper dip	2000 gal/yr	Limestone filtration Sump-ground	0.0
Lubricant	petroleum hydrocarbons		All component replacement parts electrical discharge		Drummed Removed	0.0
detergent	n alkyl dimethyl benzyl ammonium chloride n alkyl dimethyl ethyl benzyl ammonium chloride		floor cleaning	520 gal/year	Sump ground	0.0
Bleach	409 chemtrol 312 chemtrol	Caustic soda Liquid acetic	Replacement Rust Removal	585 gal/year	Sump ground	
Detergent	Lea ultrasheen		Component parts guns, heat exchangers and controllers finish	585 gal/year	Sump ground	
Abrasive cut	108 chemtrol 103 chemtrol	Aluminum oxide	Remove burrs	585 gal year	sump ground	

This page can be photocopied as needed.

$g = \frac{l}{1000}$

$\frac{mg}{l}$ | $\frac{mg}{1000\,g}$ | $\frac{1000}{1000}$ | $\frac{1000000}{1000}$ | PPM $\frac{1}{1}$ | $\frac{1}{1,000,000}$

Question
17

① Assembly Section

Spray 3

② water flow testing
rebuilding

well water
1990

month	gallons
J	0
F	0
M	100
A	92,900
M	171,000
J	2,750,000
J	3,539,700
A	3,095,000
S	2,318,100
O	1,566,400
N	0
D	0

$\frac{13533300}{3756}$ = operating hours

13,533,300

Cutting 500 gallons carted away

spray Booth	600 gallon	1725
assembly	1000 gallons	
copper dip machine shop	125	

Block Diagram

Chromic limestone chips

tumblers trough sludge buck

Cutting fluid - carted away →

recycle solvent - ultrasonic degreaser

Wet process cont'd

15
40
116
18
40
240 → evap
40
60 → evap

12
5

(5) Tumbling –

#1 Tumbler 7 ft³ 12 gallons per hour
Flow thru & closed 3 hours per day.
closed ultrasheen – Burnishing compound 18oz to 7 gal water
Bleach – chemtrol 409 steel – 8oz to 4 gal water
chemtrol 312 Brass aluminum 24oz to 4 gal.

#2 Tumbler 7 ft³ 12 gallons per hour
closed only 3 hours per day
Aluminum oxide
Abrasive cut
103 56 oz to 4 gal
108 48 oz to 4 gal.

#3 Tumbler 1 ft³ 50% closed
flow thru & closed. 50% flow thru
aluminum oxide 24 ounces per minute – flow thru runs max 3 hours

---

#4 Tumbler 4 ft³ 10 gallons per hour
flow thru & closed flow thru only max 3 hours

Basket filter collects sludge – sludge sinks is removed manually →
All water empty into pump

metals & granite
← collected in 55 gallons
AETC collected 1 55 gallons
Lidm

wet processes cont'd

(6) Inspection Section QC

4 walk in METCO spray Room with waterfalls exhaust

25 gallons holding tanks

tanks cleaned out every 3 mos -
20 gallons water (top layer) released to sump

5 gallons water - sludge (metallic sludge) -
placed in 55 gallons drums

which are disposed of by _____ ?

(7) Assembly Section

a) 2 walk in Booths - 25 gallon tank as above
tank cleaned out every 3 years - 1 single - electrical testing occasionally combustion guns
2 tanks cleaned out every 6 mos 2 double -

8/4/12/4/61

Machining Cont'd

Milling Machine

2 Okuma + Howa 3VA water soluble cutting
20 gallon tank
add 10 gallons each week
change tank contents every 2 mos
? waste dumped into 55 gallon drums disposed of

2 Brown + Sharpe 1000 UC milling machines
water soluble cutting oil
20 gallon tanks
add 5 gals per week
120 change contents of tank every 2 mos
240
dispose of as above

1 Startrite H 300 A automatic band saw water sol cutting oil
15 gallon tank
change tank every 2 mos
dispose of as above

(4) Tool Room

1 Electronic metal disintegrator use water ~~soluble cutting fluid~~ primer solution cutting fluid
? amt ——
? disposal None — holding tank

36033

30 wet
81 total

.0001.6
.0001

wet processes

(1) Turret

Lathing 2 Star CNC Lathes water cutting fluid *20 gallon holding tanks

2 Warner Swazey 1SC NC Lathes water *58 gallon tank

drummed

*replenished every 4 months

2 Warner Swazey Chuchers water 9 gallon/week

? disposed of in 55 gallon drums off site where?

(2) Drilling

cutoff tool 2 Hardinge Speed Head water sol cutting oil

2 Richards micro drilling water sol cutting oil

(3) Machining

Coppa dip wash sink ~~chromium trioxide~~
5 gallons per operation
3 operations per 8 hr 1/2 hour per operation

? waste water runs into storm drains (Lab results)

machining + finishing - metal parts

Assemble - hoses
- water power
- gas - single
- powder feeder

ech connectors - electrical cables

machining + finishing - plastic parts

~~miscellaneous~~ -

rehead - Spray guns
- controllers
- heat exchangers
- powder feeders

Inventory of total operations (processes) using water

50 - barrel tumbling - AL steel ~~brass~~
- ~~grease~~ metal spraying ~~brass~~ wet operations.
- Brite dip mostly brass
- Floor cleaning
- heat exchangers - fill + dump - coat gons cutter assembly

ite

barrel tumbling
Brite dip } Masing

to EPA

cutting fluid - water added to water base

wet processes

4

Assembling Cont'd

7b test sink

25 gallons. water used to test heat exchanger - water heated from 50° - 70°
water goes to sump.

~~the~~ done 40 x per year.

6

2

Inspection &C

4 spray booths — air water

Assembly Section

3 Do you do maintenance

11 [illegible] [illegible] [illegible] [illegible]

(H)

[illegible] fillers	4MF	men	55 mts	BOB will 4 Y
	4MF Dual	"	[illegible]	Y
	DJP	"	51	Y
Spray guns				
[illegible] gun	11L	"	200	Y
"	12L	"	200	Y
	3APC		20	
plasma gun	9MB	"	20	N
	10MB		10	
	3MB	"	10	
2 [illegible] gun	5PII	"	130	Y
	0J		50	N
	6PII	"	115	
arc wire gun	5RG		25	N
	4RG		400	N
	6RG		50	N
heat exchangers	8ME		18	N
	4ME		20	
Controllers	7MC2		41	N
	DJC		5	N
	6C		8	
	4RC		133	Y
	5RC		25	N
	6RC		13	N
	MCN		28	Y

95 % manufacturing 114,100 [illegible] 1
4 rebuilding 4800
1 maintenance 1200
[illegible]

1422

Drilling

1 stamper No fluids ✓ Embossing
1 Hanafin hydraulic press " " ✓ assembly
1 optical comparator " " ✓ calibration
1 drill sharpener " " No category
2 Summer hydraulic presses ✓ assembly

Machining

3 thermonic induction heaters ✓ soldering
1 Torrington Sevager ~~[illegible]~~ CRIMPING
2. Okuma milling machines ✓
1 Hardinge speed head machine TURNING ✓
1 optical comparator - calibration ✓

Tool Room 1 degreaser Varsol uses Varsol 15 gallon ✓
coated off
1 Electric Discharge machine ✓
water solution?

Finishing a) 1 marking machine electroplating ✓
1 hydraulic press assembly ✓
2 speed heads Turning ✓
4

b) Painting 2 Painting Booths NO water ✓
1 Drying oven. NO category

c) Sanding + Buffing OK

d) Tumbling
4 Tumblers — all wet ✓

e) cleaning 1 ultra sonic degreaser — water used for cooling only
50 gallons
1,1,1 trichlorethane
replenish 55 gallons / month
coated off

mopper - 10 gallons / week

? Floor cleaning - vacuum wash & dump into sump

	assembly other 29	Turret	Drilling	Machining	Tool Room	Finishing
		16				
Machining Gce		4		1	1 (0) (0)	
b						
c		4 (3) (0)	19 11 (1)	1		
d		4 (3) (0)		1		
e		4 (3) (0)	11 (1) (1) (0)	3 (0) (0)	3 units (1) (0) (0)	1 (0) (0)
f				1 (0) (0)		
g				4 (2) (0)	1 (0) (0)	~~2 units 1 (0) (0)~~
h						
i		4 (3) (0)	11 (1)	1		
j				1 (1) (0)	2 units 2 (0) (0)	
k						
l						
m						
n		4 3		2 (0) (0)		
o		4 (3) (0)	11 (1)	1		
p		4 (3) (0)		2 (0) (0)		
q		5 (3) (0)	1 (1)	2	4 UNITS (1) (0)	4 UNITS 2 (0) (0)
r						
~~[illegible]~~		1 (2) (0)	1 (0) (0)	~~1 (0) (0)~~	~~3 (0) (0)~~	~~2 (0) (0)~~
11	Honing		1 (0) (0)			
11	Lapping		1 (0) (0)	~~1 (0) (0)~~		
11	Sanding separate category			1 (0) (0)	1 (0) (0)	5 (0) (0) cont'd on back
	Grinding	1 (0) no stamping ~~[illegible]~~	1 (0) (0)	4 (0) (0)	4 (0) (0)	
	Stamping hydraulic press	assembly	1 (0) (0)			

Sanding + Buffing

sanding ~~Bench~~ 1 operation (2 wheels)

polishing 1 unit 1 operation

Assembly

1 mulling

EPHM-2 REV. 5/97

STATE OF CONNECTICUT

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST PROGRAM
79 Elm St., Hartford, CT 06106-5127

Please type (or print) *(Form designed for use on elite (12-pitch) typewriter.)*

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No. NYD131366	Manifest Document No. 02938	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but may be required by State law

3. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Phone (516 338-2337

A. State Manifest Document Number: CT F1002938

B. G.S.I. (Gen. Site Address): SAME

5. Transporter 1 Company Name: Clean Harbors Env Services Inc — 6. US EPA ID Number: MAD032222 5

7. Transporter 2 Company Name: Anacomo Express Inc — 8. US EPA ID Number: NJD986623380

C. S.T.I. (Trans. Lic. Plate #): 102E82

D. Tran. Phone ( ) 781) 849-1800

9. Designated Facility Name and Site Address: Clean Harbors Of Conn Inc, 51 Broderick Road, Bristol, CT 06010 — 10. US EPA ID Number: CTD000644488

E. S.T.I. (Trans. Lic. Plate #)

F. Tran. Phone ( )

G. State Facility's ID (Not Required)

H. Facility's Phone 860 583-8917

11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CHROMIC ACID SOLUTION , 8, UN1755, II	007	DF	02850	P	EPA D002 / STATE
b. HAZARDOUS WASTE SOLID, N.O.S. (CHROMIUM), 9, NA3077, III	006	DM	02048	P	EPA D007 / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
a. (L),(C,E),(ERG#:154)
b. (S),(E),(ERG#:171)
c.
d.

K. Handling Codes for Wastes Listed Above

	Interim	Final		Interim	Final
a.	S01	T24	c.		
b.	S01	T24	d.		

15. Special Handling Instructions and Additional Information
11a CH189142 D006, D007, D008
11b CH189108
7 x 55
6455
IN EMERGENCY, CALL CHES 1-800-645-8265
WO# D3323880

Point of Departure:

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: DAVID WAIZAK — Signature — Month Day Year: 05 02 01

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: FRANK RICCIARDELLI — Signature — Month Day Year: 05 02 01

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: AS AGENT FOR MVE TRANS — Signature — Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year: 05 03 01

EPA Form 8700-22 (Rev. 9/91) Form Approved OMB No. 2050-0039

Clean Harbors has appropriate permits for and will manage the waste the generator is shipping.

GENERATOR — TRANSPORTER — FACILITY

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILL RESPONSE AT (860) 424-3338

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

COPY 3: FACILITY TO GENERATOR

CT F 1002938

COPY 3: FACILITY TO GENERATOR

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST
(Continuation Sheet)

21. Generator's US EPA ID No.

Manifest Document No. 02938

22. Page 2

Information in the shaded areas is not required by Federal law.

23. Generator's Name: Sulzer

L. State Manifest Document Number: CT F 1002938

M. State Generator's ID

24. Transporter 3 Company Name: Clean Harbors Env Services Inc

25. US EPA ID Number: MAD039322250

N. State Transporter's ID: CI9181 ME

O. Transporter's Phone: (781) 848-1800

26. Transporter ___ Company Name

27. US EPA ID Number

P. State Transporter's ID

Q. Transporter's Phone

	28. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*	HM	29. Containers No.	Type	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
a.							
b.							
c.							
d.							
e.							
f.							
g.							
h.							
i.							

GENERATOR

S. Additional Descriptions for Materials Listed Above

T. Handling Codes for Wastes Listed Above

32. Special Handling Instructions and Additional Information

TRANSPORTER

33. Transporter 3 Acknowledgement of Receipt of Materials

Printed/Typed Name: Kevin Hurst

Signature: Kevin Hurst

Date: Month 05 Day 19 Year 01

34. Transporter ___ Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date: Month Day Year

FACILITY

35. Discrepancy Indication Space

Style CF 18 LABELMASTER® (800) 621-5808 www.labelmaster.com

EPA Form 8700-22A (Rev. 9-88) Previous editions are obsolete.

PRINTED ON RECYCLED PAPER PRINTED WITH SOY INK

P250EU071

ORIGINAL-RETURN TO GENERATOR

RETURN ANNUALLY BY MARCH 1st TO:

NEW YORK STATE ENERGY RESEARCH AND DEVELOPMENT AUTHORITY
Radioactive Waste Policy and Nuclear Coordination Program
17 Columbia Circle
Albany, NY 12203-6399
llrwadmin@NYSERDA.ORG

CODE (official use only)

NOTE: Please refer to the **Instructions** before completing this form.

LOW-LEVEL RADIOACTIVE WAST

FOR THE PERIOD: JANUARY 1st THROUGH DECEMBER 31st

REPORT FORM

PLEASE TYPE OR PRINT LEGIBLY
-Place mailing label from postcard in the space to the right
-Mark any corrections in the table below

Place Mailing Label Here
(Leave Blank If Submitting Electronically)

SECTION I. GENERATOR INFORMATION

A Updated Generator Information

ENTER 4-DIGIT GENERATOR ID (can be found on the mailing label on annual postcard) 0960 ENTER REPORTING YEAR 2003

Licensing Agency/ies	License No(s).
New York State Department of Labor	N/a
New York State Department of Health	N/a
New York City Department of Health	N/a
U.S. Nuclear Regulatory Commission	N/a

Your Facility Phone No.: (516)334 - 1300	Ext.	Email Address peter.dipietrantonio@sulzer.com
Contact Peter DiPietrantonio		Title EH&S Specialist

Facility Name Sulzer Metco (US), Inc.

Street Address 220 Miller Place

City	County	State	Zip Code
Hicksville	Nassau	NY	11801

B Name and principal office of facility where LLRW is generated **if** different from A (above)

Street Address 1101 Prospect Avenue

City	County	State	Zip Code
Westbury	Nassau	NY	11590

C	Preparer's Name Peter DiPietrantonio	Title EH&S Specialist	Telephone and Extension (516) 338 – 2337

D	Identify, by issuing authority and number, permits that authorize transfer of your LLRW to a licensed LLRW disposal facility:		
	Issuing Authority	**Disposal Site Location**	**Disposal Site Use Permit Number**
	N/a	N/a	N/a
	N/a	N/a	N/a

E	**FACILITY TYPE CODE** Type in the appropriate letter and number for the appropriate code **OR** choose one from **EACH DROP-DOWN MENU** BELOW. Refer to the instructions to determine the facility type code that best describes your facility. **Choose only one code consisting of a letter and number.**
	Choose a Letter: **H. Manufacturing** **Choose a Number:** ~~**7. Analysis**~~ Other; See section VII.

F	Briefly describe the activities, processes, or uses of radioactive material that result in LLRW generation at your facility.
Use of zirconia which contains naturally occurring uranium.	

This Report Form has been submitted by the preparer listed in item I(C) above. In submitting this form, preparer hereby certifies that the information set forth is true to the best of the preparer's knowledge.	DATE: 2/27/04

SECTION II. INFORMATION ON LLRW

A. LLRW AS GENERATED				
	Waste Description Code	Waste Management Method	Chemical Form Code	Other Hazard Code
	1	2	3	4
1	59	W1	C4	H8
2	59	W1	C4	H8
3	26	W1	C1	H8
4				
5				
6				
7				
8				
9				
10				
11				

CODES for SECTION II of the LOW-LEVEL RADIOACTIVE WASTE REPORT FORM

Note: If you respond "other" to any item, please provide an explanation on the Attachment Sheet provided in Section VII.

A. LLRW AS GENERATED

1 WASTE DESCRIPTION CODE

Choose the category that best describes the waste.

- 20 Charcoal
- 21 Incinerator Ash
- 22 Soil
- 23 Gas
- 24 Oil
- 25 Aqueous Liquid
- 26 Filter Media
- 27 Mechanical Filter
- 29 Demolition Rubble
- 30 Cation Ion-exchange Media
- 31 Anion Ion-exchange Media
- 32 Mixed Bed Ion-exchange Media
- 33 Contaminated Equipment
- 34 Organic Liquid (except oil)
- 35 Glassware or Labware
- 36 Sealed Source/Device
- 37 Paint or Plating
- 38 Evaporator Bottoms/ Sludges/Concentrates
- 39 Dry or Compactible Trash (paper, plastic, glass, etc.)
- 40 Noncompactible Trash (metal components, etc.)
- 41 Animal Carcass
- 42 Biological Material (except animal carcass)
- 43 Activated Material
- 44 Material that will be Incinerated
- 59 Other (describe)

2 WASTE MANAGEMENT METHOD

Transfer to Authorized Recipient

- W1 Transfer to Disposal Site via Broker
- W2 Transfer to Disposal Site Directly
- W3 Transfer - Other (describe)

Interim Storage

- W4 Placed in Storage before current reporting year
- W5 Placed in Storage during current reporting year
- W6 Shipped for Treatment prior to Storage

Storage for Decay

- W7 Storage for Decay (Only limited information required. See instructions.)

3 CHEMICAL FORM CODE

- C1 Paper and Plastic
- C2 Glass
- C3 Metals
- C4 Metal Oxides
- C5 Inorganic Salts
- C6 Organic Salts
- C7 Nucleic Acids
- C8 Amino Acids, Proteins, Enzymes
- C9 Carbohydrates, Sugars
- C10 Lipids, Fatty Acids
- C11 Other (describe)

4 OTHER HAZARD CODE

- H1 Ignitable
- H2 Corrosive
- H3 Toxic
- H4 Reactive
- H5 Pathogenic
- H6 Carcinogenic
- H7 Other (describe)
- H8 None

B. ON-SITE WASTE TREATMENT

Treatment Code		Sorption or Solidification Code	Effect of Treatment	Post-Treatment Volume (m^3)
5		6	7	8
1	T21	NA	NA	NA
2	T21	NA	NA	NA
3	T21	NA	NA	NA
4				
5				
6				
7				
8				
9				
10				
11				

B. ON-SITE WASTE TREATMENT

5 TREATMENT CODE

T1 Compaction
T2 Supercompaction
T3 Evaporation/ Crystallization
T4 Fluid Bed Drying/ Calcination
T5 Wet Oxidation
T6 Membrane Separation (ultrafiltration, reverse osmosis)
T7 Incineration
T8 Solidification
T9 Adsorption
T10 Sorting/Segregation
T11 Macroencapsulation
T12 Absorption
T13 Decontamination
T14 Surface Removal (scabbing, abrasive cleaning)
T15 Dry Chemical Packing (lime)
T16 Size Reduction (sectioning, shredding, cutting)
T17 Steam Reform
T18 Catalytic Extraction Process
T19 Dewatered
T20 Other (describe)
T21 None

6 SOLIDIFICATION OR SORPTION CODE

Sorption
60 Speedi Dri
61 Celetom
62 Floor Dry/Superfine
63 Hi Dri
64 Safe T Sorb
65 Safe N Dri
66 Florco
67 Florco X
68 Solid A Sorb
69 Chemsil 30
70 Chemsil 50
72 Dicaperl HP200
73 Dicaperl HP500
74 Petroset
75 Petroset II
76 Aquaset
77 Aquaset II
89 Other (describe)

Solidification
90 Cement
91 Concrete (encapsulation)
92 Bitumen
93 Vinyl Chloride
94 Vinyl Ester Styrene
99 Other (describe)
100 None Required

7 EFFECT OF TREATMENT

Impact of treatment on volume may be shown in percent or ratio. Note increase or decrease by ↑ or ↓, and describe change in chemical and physical form.

8 POST-TREATMENT VOLUME

Volume must be noted in cubic meters (m^3).

SECTION II. INFORMATION ON LLRW (cont.)

C. ON-SITE CONTAINER INFORMATION					D. BROKER/PROCESSOR INFORMATION		
	Container Description Code	Container Volume (m^3)	Maximum Surface Radiation Level (mSv/hr)	Number of Containers	Broker Code	Processor Code	Treatment Code
	9	10	11	12	13	14	15
1	4	.208	.001	312	BC10	P10	T21
2	4	.208	.001	75	NA	NA	NA
3	19	.906	.001	8	BC10	P10	T1
4							
5							
6							
7							
8							
9							
10							
11							

C. ON-SITE CONTAINER INFORMATION

9 CONTAINER DESCRIPTION CODE
- 1 Wooden Box or Crate
- 2 Metal Box
- 3 Plastic Drum or Pail
- 4 Metal Drum or Pail
- 5 Metal Tank or Liner
- 6 Concrete Tank or Liner
- 7 Polyethylene Tank or Liner
- 8 Fiberglass Tank or Liner
- 9 Demineralizer
- 10 Gas Cylinder
- 11 Bulk, Unpackaged Waste
- 12 Unpackaged Components
- 13 High-Integrity Container
- 14 Fiberboard Drum
- 19 Other (describe)

10 CONTAINER VOLUME
Volume must be noted in cubic meters (m^3).

11 MAXIMUM SURFACE RADIATION LEVEL
Surface radiation must be noted in mSv/hr.

12 NUMBER OF CONTAINERS
This information is required for each waste form.

D. BROKER/PROCESSOR INFORMATION

13 BROKER CODE
- BC1 NDL
- BC2 Radiac
- BC3 Adco
- BC4 Teledyne
- BC5 US Ecology
- BC6 Chem-Nuclear
- BC7 SEG
- BC8 Bionomics
- BC9 Direct transfer
- BC10 Other (describe)
- BC11 None

14 PROCESSOR CODE
- P1 GTS Duratek
- P2 NSSI
- P3 DSSI
- P4 Chem Nuclear, IL
- P5 Alaron
- P6 Quadrex, TN
- P7 Permafix, FL
- P8 ATG, TN
- P9 ATG, WA
- P10 Other (describe)

15 TREATMENT CODE
See codes B-5.

SECTION II. INFORMATION ON LLRW (cont.)

E. POST-PROCESSOR TREATMENT INFORMATION		F. OTHER CHARACTERISTICS				
		Source Material		SNM		
Effect of Treatment	Total Post-Treatment Volume (m^3)	Source Material Code	Weight of Source Material (grams)	SNM Code	Total SNM (grams)	Maximum grams SNM in any shipment (grams)
16	17	18	19	20	21	22
1 NA	64.95	*	NA	NA	NA	NA
2 NA	NA	*	NA	NA	NA	NA
3 58	3.19	*	NA	NA	NA	NA
4						
5						
6						
7						
8						
9						
10						
11						

E. POST-PROCESSOR TREATMENT INFORMATION

16 EFFECT OF TREATMENT
See instructions for B-7.

17 TOTAL POST-TREATMENT VOLUME
Volume must be noted in cubic meters (m^3).

F. OTHER CHARACTERISTICS

18 SOURCE MATERIAL CODE
Source Material — Enter one code per line. Use a separate line for each type of source material transferred.

NU Natural Uranium
DU Depleted Uranium
UO Uranium Ores
NT Natural Thorium
TO Thorium Ores

19 WEIGHT OF SOURCE MATERIAL
Weight must be noted in grams (g).

20 SNM CODE
Special Nuclear Material means one of the following:

SNM1 Plutonium
SNM2 Uranium-233

SNM3 Uranium enriched in the isotope 233 or in the isotope 235
SNM4 Any material artificially enriched by any of the foregoing

21 TOTAL SNM
Weight must be noted in grams(g).

22 MAXIMUM GRAMS SNM IN ANY SHIPMENT
Self-explanatory.

SECTION II. INFORMATION ON LLRW (cont.)

F. OTHER CHARACTERISTICS (cont.)					G. DISPOSAL AND STORAGE INFORMATION			
Waste With Chelating Agents								
Chelate Code		Volume and Weight of LLRW		Weight % Chelates	LLRW Class	Disposition Code	Disposal Site Code	Storage Site Code
		Volume (m^3)	Weight (kg)					
23		24	25	26	27	28	29	30
1	NA	NA	NA	NA	AU	D1	DS4	S5
2	NA	NA	NA	NA	AU	NA	NA	S1
3	NA	NA	NA	NA	AU	D2	DS2	S5
4								
5								
6								
7								
8								
9								
10								
11								

3 CHELATE CODE
- CA1 EDTA
- CA2 DTPA
- CA3 Carbolic Acid
- CA4 Hydroxy-carbolic Acids
- CA5 Citric Acid
- CA6 Glucinic Acid
- CA7 Other (describe)

4 VOLUME OF LLRW
Volume of LLRW containing chelating agents (m^3).

5 WEIGHT OF LLRW
Weight of LLRW containing chelating agents (kg).

6 WEIGHT % CHELATES
Weights less than 1% need not be reported.

G. DISPOSAL AND STORAGE

27 LLRW CLASS
Class of radioactive waste as described in sections 61.55 and 61.56 of Title 10, Code of Federal Regulations, as in effect on January 26, 1983, attached following instructions.
- AS Class A stable
- AU Class A unstable
- B Class B
- C Class C

28 DISPOSITION CODE
- D1 Directly to disposal
- D2 Treatment prior to disposal
- D3 Treatment/returned for storage
- D4 Treatment/no disposal (decontamination and reuse)
- D5 Storage/no treatment
- D6 Hold for decay on site and dispose as non-radioactive
- D7 Hold for decay off site and dispose as non-radioactive
- D8 Treatment/off-site storage
- D9 Other (describe)

29 DISPOSAL SITE
- DS1 Barnwell, SC
- DS2 Clive, UT
- DS3 Richland, WA
- DS4 Other (describe)

30 STORAGE SITE
- S1 On site
- S2 Radiac
- S3 NDL
- S4 Adco
- S5 Other (describe)

H. LLRW NOT MEETING DISPOSAL FACILITY ACCEPTANCE CRITERIA				
LLRW Class	Hazard Code	Volume (m^3)	Activity (MBq)	Radionuclides
31	32	33	34	35
NA	NA	NA	NA	NA
NA	NA	NA	NA	NA
NA	NA	NA	NA	NA

H. LLRW WITH UNACCEPTABLE DISPOSAL CRITERIA

31 LLRW CLASS
See codes G-27.

32 HAZARD CODE
See codes B-4.

33 VOLUME
Volume must be noted in cubic meters (m^3).

34 ACTIVITY
Activity must be reported in MegaBecquerels (MBq).

35 RADIONUCLIDES
As applicable to H-3.

I. CONTAINERS WITH SURFACE RADIATION LEVELS GREATER THAN 2mSv/hr (200mR/hr)			
LLRW Class		Volume (m^3)	Activity by Radionuclide (MBq)
36		37	38
NA	NA	NA	NA
NA	NA	NA	NA
NA	NA	NA	NA

SECTION III. LLRW SUMMARY

A. DISPOSAL TOTALS FOR THIS YEAR								
Classes	Disposed at: ~~Barnwell, SC~~ WASTE CONTROL SPECIALISTS, ANDREWS, TX.		Disposed at: Clive, UT		Disposed at: Richland, WA		SUBTOTALS BY CLASS	
Class A	Volume (m^3)	Activity (MBq)	Volume (m^3)	Activity (MBq)	Volume (m^3)	Activity (MBq)	Volume –A	Activity –A
Via Broker/ Processor	75.760	267.180	3.190	2.020	0.000	0.000	78.950	269.200
Direct Transfer							0.000	0.000
Class B							Volume –B	Activity –B
Via Broker/ Processor							0.000	0.000
Direct Transfer							0.000	0.000
Class C							Volume –C	Activity –C
Via Broker/ Processor							0.000	0.000
Direct Transfer							0.000	0.000
TOTALS	75.760	267.180	3.190	2.020	0.000	0.000		
					TOTAL ALL CLASSES		VOLUME	ACTIVITY
							78.950	269.200

B. INTERIM STORAGE TOTALS

Classes	Placed in Interim Storage during this year		Placed in Interim Storage before this year		SUBTOTALS BY CLASS	
Class A	**Volume (m³)**	**Activity (MBq)**	**Volume (m³)**	**Activity (MBq)**	**Volume - A**	**Activity - A**
On Site	15.600	55.000	0.000	0.000	15.600	55.000
Off Site	10.830	29.430	0.000	0.000	10.830	29.430
Class B					**Volume - B**	**Activity - B**
On Site					0.000	0.000
Off Site					0.000	0.000
Class C					**Volume - C**	**Activity - C**
On Site					0.000	0.000
Off Site					0.000	0.000
TOTALS	26.430	84.430	0.000	0.000		
			TOTAL ALL CLASSES		26.430	84.430

SECTION IV. RADIONUCLIDE INFORMATION FOR WASTE DISPOSED, HELD FOR DECAY, AND STORED

NOTE: Radionuclides mean each individual radionuclide if known, or, at a minimum, all radionuclides that have been or would have to be identified on disposal site manifests. H-3, C-14, Tc-99, and I-129 **must be identified** where present.

A.1	List the radionuclides contained in the **LLRW disposed of** during this year (see response to Section III-A). **Use additional sheets** as necessary.

Radionuclide	Activity (MBq)	Radionuclide	Activity (MBq)	Radionuclide	Activity (MBq)
Radium	267.180	radium	2.020		
					Total Activity in MBq 269.200

Total activity for all radionuclides listed above:
Total activity should equal total for LLRW **disposed** of, as reported in Section III-A.

A.2	If any of the radionuclides listed in Table A-1 have half-lives of less than 90 days, please explain why these are not being held for decay and eventual disposal as non-radioactive waste.

NA

B.1	List the radionuclides contained in the LLRW **being held in storage for decay on site** as of December 31. **Use additional sheets as necessary.**				
Radionuclide	**Radionuclide**	**Radionuclide**	**Radionuclide**	**Radionuclide**	**Radionuclide**
NA					

B.2	List the radionuclides contained in the LLRW **being held in storage for decay off site** as of December 31. **Use additional sheets as necessary.**				
Radionuclide	**Radionuclide**	**Radionuclide**	**Radionuclide**	**Radionuclide**	**Radionuclide**
NA					

C.1	**On site** – List radionuclides contained in LLRW in **interim storage on site** as of December 31. **Use additional sheets as necessary.**				
Radionuclide	**Activity (MBq)**	**Radionuclide**	**Activity (MBq)**	**Radionuclide**	**Activity (MBq)**
Radium	55.000				
					Total Activity in MBq 55.000

Total activity for all radionuclides listed above:
Total activity should equal total for LLRW **stored on site**, as reported.

C.2	**Off site** – List radionuclides contained in LLRW in **interim storage off site** as of December 31. **Use additional sheets as necessary.**

Radionuclide	Activity (MBq)	Radionuclide	Activity (MBq)	Radionuclide	Activity (MBq)
Radium	29.430				
					Total Activity in MBq 29.430

Total activity for all radionuclides listed above:
Total activity should equal total for LLRW being **stored off site**, as reported.

C.3	If any of the radionuclides listed in Table C-1 or C-2 have half-lives of less than 90 days, please explain why these are not being held for decay and eventual disposal as non-radioactive waste.
NA	

SECTION V. STORAGE FACILITY INFORMATION

NOTE: If your facility manages LLRW by storage for decay only, you only need to complete the Condensed Form for Decay in Storage Only.

ON-SITE STORAGE FACILITIES		
A.1	Briefly describe your on-site LLRW storage facilities. Include facilities you have for storage of special LLRW forms such as freezers, shielded areas for high-radiation-level wastes, or bermed storage areas for liquid wastes, and estimate the storage capacity for each.	
Isolated storage area for holding the drums/pallets prior to shipment for off-site treattment and disposal.		
A.2	Total Storage Capacity: ~65 m^3	
A.3	Estimated maximum volume of LLRW held in storage for decay at any one time: NA m^3	
B	Do you have any plans for increasing your on-site storage capacity?	☒ No. Skip to C. ☐ Yes. Complete this section.
Describe such plans and indicate your expected new storage capacity.		

OFF-SITE STORAGE FACILITIES	
C	Off-site storage facility information. Use additional pages if necessary.
Please indicate if off-site storage is for storage for decay or interim storage.	☐ Storage for decay ☒ Interim storage
Name of facility: R.A.C.E., LLC	
Address: 2250 Channel Avenue Memphis, TN 38113	
Contact and phone number: Jo Ann Byrd (901) 775-0690	

NOTE: Please answer the following question based on LLRW requiring disposal at licensed LLRW disposal facilities, *not* LLRW held in storage for decay. DO NOT USE DESCRIPTIVE TERMS SUCH AS UNLIMITED, CONTINUOUS, OR INDEFINITE.

ESTIMATED STORAGE TIME FOR LLRW REQUIRING DISPOSAL		
D	Based on your anticipated LLRW generation rate and your anticipated capacity to store waste as of December 31, HOW MANY MONTHS could you continue to produce and store LLRW on site if access to licensed LLRW disposal facilities were no longer available?	NOTE: Answer *must* be in months. 12 months

SECTION VI. FUTURE LLRW GENERATION

2003 FUTURE LLRW GENERATION THAT WILL REQUIRE DISPOSAL				
Year	Class	Activity (MBq)	Volume (m^3)	Radionuclides
2004	A	146.000	40.000	Radium
	B			
	C			
	Total	146.000	40.000	
2005	A	105.000	30.000	Radium
	B			
	C			
	Total	105.000	30.000	
2006	A	73.000	20.000	Radium
	B			
	C			
	Total	73.000	20.000	
2007	A	73.000	20.000	Radium
	B			
	C			
	Total	73.000	20.000	Radium
2008	A	73.000	20.000	Radium
	B			
	C			
	Total	73.000	20.000	Radium

SECTION VII. ATTACHMENT SHEET

FOR ANY ADDITIONAL INFORMATION (Table will automatically expand as information is entered)

Section I, Box E--Manufacturing operation that generates this material as a by-product.

Section II, Lines 1 & 3 refer to material shipped off-site for treatment and disposal during 2003.

Section II, Line 2 refers to material generated and held in on-site storage as of 12/31/03. Will ship off-site for treatment and disposal.

Section IIA, Boxes 1.1 & 1.2--Powder

Section IIC, Box 9.3--Palletized fiberboard boxes

Section IID, Boxes 13.1 & 13.3--Ecology Services, Columbia, MD

Section IID, Boxes 14.1 & 14.3--R.A.C.E., LLC, Memphis, TN

Section IIE, Box 16.3--Reduction by 58%

Section IIF, Boxes 18.1, 18.2 & 18.3--By analysis, radium is contained as a daughter to natural uranium.

Section IIG, Box 29.1--Waste Control Specialists, Andrews, TX

Section IIG, Box 30.1 & 30.3--R.A.C.E., LLC, Memphis, TN

Section IIIA, Disposal site is amended to read "Waste Control Specialists, Andrews, TX" rather than Barnwell facility. This total includes waste that had been stored at RACE during 2002 and shhipped to WCS for disposal during 2003.

SULZER 2 TRK 44020 TRA 54870 3WV 07-96556-S 97 10633

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: N/A
2. Page 1 of: 1
3. Emergency Response Phone: 410-377-3742
4. Manifest Tracking Number: 001251006 JJK

5. Generator's Name and Mailing Address: SULZER METCO (US) INC. 1101 PROSPECT AVE. WESTBURY, NY 11590
Generator's Site Address (if different than mailing address):
Generator's Phone: 516-338-2337

6. Transporter 1 Company Name: BEDROCK, DBA, TRI-STATE MOTOR TRANSIT
U.S. EPA ID Number: MOD 095 038 998

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: WASTE CONTROL SPECIALIST, LLC 9998 W. HWY 176 ANDREWS, TX 79714
U.S. EPA ID Number: TXD 988 088 464
Facility's Phone: 505-394-4300

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	1. RADIOACTIVE MATERIAL, EXCEPTED PACKAGE, LIMITED QUANTITY OF MATERIAL, 7, UN2910	042	DM	6,431	K	NONE
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information: EMERGENCY PHONE 24 HOUR 410-377-3742 ECOLOGY SERVICES, INC.
WP-019353 WCS Profile #

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: JOHN E. MONSAZVE
Signature:
Month 04 Day 24 Year 07

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: KENNETH LONG
Signature:
Month 4 Day 24 Year 07
Transporter 2 Printed/Typed Name:
Signature:
Month Day Year

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: Jim Crawford
Signature:
Month 05 Day 04 Year 07

GENERATOR — INT'L — TRANSPORTER — DESIGNATED FACILITY

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO GENERATOR STATE (IF REQUIRED)

EPA United States Environmental Protection Agency

FORM R

TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

WHERE TO SEND COMPLETED FORMS: 1. TRI Data Processing Center P.O.Box 1513 Lantham, MD 20703-1513 2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision

For EPA use only

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR 2002

SECTION 2. TRADE SECRET INFORMATION

2.1	Are you claiming the toxic chemical identified on page 2 trade secret? ☐ Yes (Answer question 2.2; Attach substantiation forms) ☒ NO (Do not answer 2.2; Go to Section 3)	2.2	Is this copy ☐ Sanitized ☐ Unsanitized (Answer only if "YES" in 2.1)

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data availble to the preparers of this report.

Name and official title of owner/operator or senior management official:	Signature:	Date Signed:
CHARLES HAUGH VICE PRESIDENT		06/30/2003

SECTION 4. FACILITY IDENTIFICATION

4.1		TRI Facility ID Number	11801PRKNL220MI
Facility or Establishment Name	SULZER METCO (US), INC.	Facility or Establishment Name or Mailing Address (if different from street address)	SULZER METCO (US), INC.
Street	220 MILLER PLACE	Mailing Addres	1101 PROSPECT AVENUE
City/County/State/Zip Code	HICKSVILLE NASSAU NY 11801	City/State/Zip Code	WESTBURY NY 11590
		Country (Non-US	

4.2	This report contains information for: (Important: check a or b; check c or d if applicable)	a. ☒ An entire facility	b. ☐ Part of a facility	c. ☐ A Federal facility	d. ☐ GOCO
4.3	Technical Contact Name	PETER DIPIETRANTONIO		Telephone Number (include area code)	(516) 338-2337
	Email Address	peterdipietrantonio@sulzer.com			
4.4	Public Contact Name	CHARLES HAUGH		Telephone Number (include area code)	(516) 338-2249

4.5	SIC Code (s) (4 digits)	Primary	b.	c.	d.	e.	f.
		a. 3499					

4.6		Degrees	Minutes	Seconds		Degrees	Minutes	Seconds
	Latitude	40	47	10	Longitude	073	31	00

4.7 Dun & Bradstreet Number(s) (9 digits)	4.8 EPA Identification Number (RCRA I.D. No.) (12 characters)	4.9 Facility NPDES Permit Number(s) (9 characters)	4.10 Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)
a. 152084398	a. NYD981558570	a. NA	a. NA
b.	b.	b.	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	NA ☐	SULZER US INDUSTRIES HOLDING INC.
5.2	Parent Company's Dun & Bradstreet Number	NA ☐	001826957

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION

TRI Facility ID Number
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
Aluminum (fume or dust)

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you completed Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	7429-90-5
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	Aluminum (fume or dust)
1.3	Generic Chemical Name (Important: Complete only if Part 1, Section 2.1 is checked "Yes". Generic Name must be structurally descriptive.)
	NA

1.4 Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category.
(If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0.01 and 100. Distribution should be reported in percentages and the total should equal 100%. If you do not have speciation data available, indicate NA.)

NA	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
	NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY
(Important: Check all that apply.)

3.1 Manufacture the toxic chemical:		3.2 Process the toxic chemical:		3.3 Otherwise use the toxic chemical:	
a.	Produce				
b.	Import				
	If produce or import:	a.	As a reactant	a.	As a chemical processing aid
c.	For on-site use/processing	b. X	As a formulation component	b.	As a manufacturing aid
d.	For sale/distribution	c.	As an article component	c.	Ancillary or other use
e.	As a byproduct	d. X	Repackaging		
f.	As an impurity	e.	As an impurity		

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ONSITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	04	(Enter two-digit code from instruction package.)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE

			A. Total Release (pounds/year*) (Enter range code or estimate**)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	NA	0	O	
5.2	Stack or point air emissions	NA	38	E	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
	Stream or Water Body Name				
5.3.1	NA				
5.3.2					
5.3.3					

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box and indicate the Part II, Section 5.3 page number in this box. (example: 1,2,3, etc.)

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1- 10 pounds; B= 11- 499 pounds; C= 500 - 999 pounds.

EPA FORM R

PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
Aluminum (fume or dust)

SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued)

		NA	A. Total Release (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)
5.4.1	Underground Injection onsite to Class I Wells	X		
5.4.2	Underground Injection onsite to Class II-V Wells	X		
5.5	Disposal to land onsite			
5.5.1.A	RCRA Subtitle C landfills	X		
5.5.1.B	Other landfills	X		
5.5.2	Land treatment/application farming	X		
5.5.3	Surface Impoundment	X		
5.5.4	Other disposal	X		

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1. Total Transfers (pounds/year*) (enter range code** or estimate)	6.1.A.2 Basis of Estimate (enter code)
NA	

6.1.B. 1	POTW Name	NA					
POTW Address							
City		State		County		Zip	
6.1.B.	POTW Name						
POTW Address							
City		State		County		Zip	

If additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box [ ] and indicate the Part II, Section 6.1 page number in this box [ ] (example: 1,2,3, etc.)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. 1	Off-Site EPA Identification Number (RCRA ID No.)	PAD987395803						
Off-Site Location Name	MODERN LANDFILL							
Off-site Address	4499 MOUNT PISGAH ROAD							
City	YORK	State	PA	County	YORK	Zip	17402	Country (Non-US)
Is location under control of reporting facility or parent company?						Yes	X	No

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1- 10 pounds; B= 11- 499 pounds; C= 500 - 999 pounds.

EPA FORM R
PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
Aluminum (fume or dust)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS (Continued)

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 5745	1. C	1. M41
2. NA	2.	2.
3.	3.	3.
4.	4.	4.

6.2. 2 Off-Site EPA Identification Number (RCRA ID No.) MID000724831

Off-Site location Name: MICHIGAN DISPOSAL

Off-site Address: 49350 NORTH I-94 SERVICE DRIVE

City	BELLEVILLE	State	MI	County	WAYNE	Zip	48111	Country (Non-US)	

Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year*) (enter range code** or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 34	1. C	1. M41
2. NA	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 7A. ONSITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]						c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data ?
7A.1a	7A.1b	1		2			7A.1c	7A.1d	7A.1e
	3	4		5				%	Yes No
	6	7		8					
7A.2a	7A.2b	1		2			7A.2c	7A.2d	7A.2e
	3	4		5				%	Yes No
	6	7		8					
7A.3a	7A.3b	1		2			7A.3c	7A.3d	7A.3e
	3	4		5				%	Yes No
	6	7		8					
7A.4a	7A.4b	1		2			7A.4c	7A.4d	7A.4e
	3	4		5				%	Yes No
	6	7		8					
7A.5a	7A.5b	1		2			7A.5c	7A.5d	7A.5e
	3	4		5				%	Yes No
	6	7		8					

If additional pages of Part II, Section 6.2/7A are attached, indicate the total number of pages in this box [ ]
and indicate the Part II, Section 6.2/7A page number in this box: [ ] **(example: 1,2,3, etc.)**

* For Dioxin or Dioxin-like compounds, report in grams/year

** Range Codes: A= 1- 10 pounds; B= 11- 499 pounds; C= 500 - 999 pounds.

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
Aluminum (fume or dust)

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [enter 3-character code(s)]

1 | 2 | 3 | 4

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] Not Applicable (NA) - Check here if no on-site recyling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [enter 3-character code(s)]

1 | 2 | 3 | 4 | 5
6 | 7 | 8 | 9 | 10

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1	Quantity released ***	3350	5817	5000	NA
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	NA	NA	NA	NA
8.4	Quantity recycled onsite	NA	NA	NA	NA
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	NA	NA	NA	NA
8.7	Quantity treated offsite	NA	NA	NA	NA
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)			NA	
8.9	Production ratio or activity index			0.94	

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

		Yes	No
8.11	Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one Box)	[ ]	[X]

EPA Form 9350-1 (Rev. 03/2003) - Previous editions are obsolete.

*For Dioxin or Dioxin-like compounds, report in grams/year

***Report releases pursuant to EPCRA Section 329 (8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated onsite.

Form Approved OMB No. 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: Sulzer Metco (US) Inc
Street: 1101 Prospect Ave
City: Westbury County: Nassau State: NY Zip: 11590
SIC Code: 3542 Dun & Bradstreet Number: 87-429-0349

FOR OFFICIAL USE ONLY
ID #:
Date Received:

Owner/Operator Name

Name: SAME AS OTHER DATE Phone: ( )
Mail Address:

Emergency Contact

Name: Title:
Phone: SAME AS OTHER DATE 24 Hr. Phone:
Name: Title:
Phone: ( ) 24 Hr. Phone: ( )

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19 93

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) — Storage Locations	Optional
CAS 7429 90 5 Trade Secret ☐ Chem. Name: Aluminum Check all that apply: ☑ Pure ☑ Mix ☑ Solid ☐ Liquid ☐ Gas ☐ EHS EHS Name:	☑ Fire ☐ Sudden Release of Pressure ☑ Reactivity ☑ Immediate (acute) ☑ Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 Engineering Laboratories, D1 4 Warehouse	☐
CAS 1344 28 1 Trade Secret ☐ Chem. Name: Aluminum oxide Check all that apply: ☑ Pure ☑ Mix ☑ Solid ☐ Liquid ☐ Gas ☐ EHS EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☑ Immediate (acute) ☑ Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	SAME AS Above	☐
CAS 7439 84 6 Trade Secret ☐ Chem. Name: Iron Check all that apply: ☑ Pure ☑ Mix ☑ Solid ☐ Liquid ☐ Gas ☐ EHS EHS Name:	☑ Fire ☐ Sudden Release of Pressure ☑ Reactivity ☑ Immediate (acute) ☑ Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	SAME AS Above	☐

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3 and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Russel Siedelwicz Manager Facilities

Name and official title of owner/operator OR owner/operator's authorized representative | Signature | Date signed

Optional Attachments

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

Form Approved OMB No. 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name
Street
City County State Zip
SIC Code Dun & Bradstreet Number

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name

Name Phone ( )
Mail Address

Emergency Contact

Name Title
Phone ( ) 24 Hr Phone ( )
Name Title
Phone ( ) 24 Hr Phone ( )

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 98

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7440 02 0 Trade Secret ☐ Chem. Name Nickel Check all that apply: Pure ☐ Mix ✓ Solid ✓ Liquid ☐ Gas ☐ EHS ☐ EHS Name	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ✓ Delayed (chronic) ✓	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	SAME AS ABOVE	☐
CAS 7440 47 3 Trade Secret ☐ Chem. Name Chromium Check all that apply: Pure ✓ Mix ✓ Solid ✓ Liquid ☐ Gas ☐ EHS ☐ EHS Name	Fire ✓ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic) ☐	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	SAME AS ABOVE	☐
CAS 1314 23 4 Trade Secret ☐ Chem. Name Check all that apply: Pure ✓ Mix ✓ Solid ✓ Liquid ☐ Gas ☐ EHS ☐ EHS Name	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ✓ Delayed (chronic) ☐	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	SAME AS ABOVE	☐

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through _____ and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Name and official title of owner/operator OR owner/operator's authorized representative Signature Date signed

Optional Attachments

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

Form Approved OMB No. 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name
Street
City County State Zip
SIC Code Dun & Brad Number

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name

Name Phone ( )
Mail Address

Emergency Contact

Name Title
Phone ( ) 24 Hr Phone ( )
Name Title
Phone ( ) 24 Hr Phone ( )

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 98

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS ☐ Trade Secret ☐ Chem. Name Polyester TOB HDMD polymer Check all that apply: Pure ✓ Mix ✓ Solid ✓ Liquid ☐ Gas ☐ EHS ☐ EHS Name	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ✓ Immediate (acute) ✓ Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) No. of Days On-site (days)	SAME AS ABOVE	☐
CAS ☐ Trade Secret ☐ Chem. Name Check all that apply: Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas ☐ EHS ☐ EHS Name	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic)	Max. Daily Amount (code) Avg. Daily Amount (code) No. of Days On-site (days)		☐
CAS ☐ Trade Secret ☐ Chem. Name Check all that apply: Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas ☐ EHS ☐ EHS Name	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic)	Max. Daily Amount (code) Avg. Daily Amount (code) No. of Days On-site (days)		☐

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through _____ and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Name and official title of owner/operator OR owner/operator's authorized representative Signature Date signed

Optional Attachments

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

Form Approved OMB No 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: Sulzer Metco (US) Inc
Street: ~~1101 Prospect Avenue~~ 220 Miller Place
City: ~~Westbury~~ Hicksville County: NASSAU State: NY Zip: ~~11590~~ 11801
SIC Code: 3399 Dun & Brad Number: 15-208-4398

FOR OFFICIAL USE ONLY — ID #: Date Received:

Owner/Operator Name

Name: Russell Siedlewicz Phone: (516) 334-1300
Mail Address: 1101 Prospect Ave, Westbury NY 11590

Emergency Contact

Name: Michael S. Lydon Title: Environmental Health Safety
Phone: (516) 338-2337 24 Hr Phone: 800 424 9300 ChemTrec

Name: Russell Siedlewicz Title: Manager Facilities
Phone: (516) 338-2134 24 Hr Phone: 800 424 9300

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 98

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7440 02 0 Trade Secret ☐ Chem. Name: Nickel Check all that apply: ☒ Pure ☒ Mix ☒ Solid ☐ Liquid ☐ Gas ☐ EHS EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor, Hardened Steel Hoppers E 1 4 Warehouse, Production Floor 1 1 4 Warehouse, Production Floor	☐
CAS 7440 47 3 Trade Secret ☐ Chem. Name: Chromium Check all that apply: ☒ Pure ☒ Mix ☒ Solid ☐ Liquid ☐ Gas ☐ EHS EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	SAME AS ABOVE	☐
CAS 7440 48 4 Trade Secret ☐ Chem. Name: Cobalt Check all that apply: ☒ Pure ☒ Mix ☒ Solid ☐ Liquid ☐ Gas ☐ EHS EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	SAME AS ABOVE	☐

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3 and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Russell Siedlewicz Manager Facilities

Name and official title of owner/operator OR owner/operator's authorized representative | Signature | Date signed

Optional Attachments

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

Form Approved OMB No 2050 0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name
Street
City County State Zip
SIC Code Dun & Brad Number

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name

Name Phone ( )
Mail Address

Emergency Contact

Name Title
Phone ( ) 24 Hr Phone ( )

Name Title
Phone ( ) 24 Hr Phone ( )

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 98

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7429905 Trade Secret ☐ Chem. Name Aluminum Check all that apply: Pure ☒ Mix ☒ Solid ☒ Liquid ☐ Gas ☐ EHS ☐ EHS Name	Fire ☒ Sudden Release of Pressure ☐ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic) ☒	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	SAME AS ABOVE	☐
CAS 1344281 Trade Secret ☐ Chem. Name Aluminum Oxide Check all that apply: Pure ☒ Mix ☒ Solid ☒ Liquid ☐ Gas ☐ EHS ☐ EHS Name	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☑ Delayed (chronic) ☑	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	SAME AS ABOVE	☐
CAS 1314234 Trade Secret ☐ Chem. Name Zirconium Oxide Check all that apply: Pure ☑ Mix ☑ Solid ☑ Liquid ☐ Gas ☐ EHS ☐ EHS Name	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☑ Delayed (chronic) ☑	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	SAME AS ABOVE	☐

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Name and official title of owner/operator OR owner/operator's authorized representative Signature Date signed

Optional Attachments

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☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

Form Approved OMB No. 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name
Street
City County State Zip
SIC Code Dun & Brac Number

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name

Name Phone ( )
Mail Address

Emergency Contact

Name Title
Phone ( ) 24 Hr Phone ( )
Name Title
Phone ( ) 24 Hr Phone ( )

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 98

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Container Type / Temperature / Pressure	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 26099 71 8 Trade Secret ☐ Chem. Name Polyester "POB" Homopolymer Check all that apply: ☒ Pure ☒ Mix ☒ Solid ☐ Liquid ☐ Gas ☐ EHS EHS Name	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)		SAME AS ABOVE	☐
CAS 1308 38 9 Trade Secret ☐ Chem. Name Chromium oxide Check all that apply: ☒ Pure ☒ Mix ☒ Solid ☐ Liquid ☐ Gas ☐ EHS EHS Name	☒ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)		SAME AS ABOVE	☐
CAS Trade Secret ☐ Chem. Name Check all that apply: ☐ Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas ☐ EHS EHS Name	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic)	Max. Daily Amount (code) Avg. Daily Amount (code) No. of Days On-site (days)			☐

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Form Approved OMB No. 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name _____

Street _____

City _____ County _____ State _____ Zip _____

SIC Code [ ][ ][ ][ ] Dun & Brad Number [ ][ ] - [ ][ ][ ] - [ ][ ][ ][ ]

FOR OFFICIAL USE ONLY

ID # _____

Date Received _____

Owner/Operator Name

Name _____ Phone ( ) _____

Mail Address _____

Emergency Contact

Name _____ Title _____

Phone ( ) _____ 24 Hr. Phone ( ) _____

Name _____ Title _____

Phone ( ) _____ 24 Hr. Phone ( ) _____

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 _____

[ ] Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) — Container Type / Temperature / Pressure / Storage Locations	Optional
CAS [ ][ ][ ][ ][ ][ ] [ ][ ] [ ] Trade Secret [ ] Chem. Name _____ Check all that apply: [ ] Pure [ ] Mix [ ] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name _____	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [ ] Immediate (acute) [ ] Delayed (chronic)	[ ][ ] Max. Daily Amount (code) [ ][ ] Avg. Daily Amount (code) [ ][ ][ ] No. of Days On-site (days)	[ ][ ][ ] _____ [ ][ ][ ] _____ [ ][ ][ ] _____ [ ][ ][ ] _____ [ ][ ][ ] _____ [ ][ ][ ] _____	[ ]
CAS [ ][ ][ ][ ][ ][ ] [ ][ ] [ ] Trade Secret [ ] Chem. Name _____ Check all that apply: [ ] Pure [ ] Mix [ ] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name _____	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [ ] Immediate (acute) [ ] Delayed (chronic)	[ ][ ] Max. Daily Amount (code) [ ][ ] Avg. Daily Amount (code) [ ][ ][ ] No. of Days On-site (days)	[ ][ ][ ] _____ [ ][ ][ ] _____ [ ][ ][ ] _____ [ ][ ][ ] _____ [ ][ ][ ] _____ [ ][ ][ ] _____	[ ]
CAS [ ][ ][ ][ ][ ][ ] [ ][ ] [ ] Trade Secret [ ] Chem. Name _____ Check all that apply: [ ] Pure [ ] Mix [ ] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name _____	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [ ] Immediate (acute) [ ] Delayed (chronic)	[ ][ ] Max. Daily Amount (code) [ ][ ] Avg. Daily Amount (code) [ ][ ][ ] No. of Days On-site (days)	[ ][ ][ ] _____ [ ][ ][ ] _____ [ ][ ][ ] _____ [ ][ ][ ] _____ [ ][ ][ ] _____ [ ][ ][ ] _____	[ ]

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Form Approved OMB No. 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name _____

Street _____

City _____ County _____ State _____ Zip _____

SIC Code [ ][ ][ ][ ] Dun & Brad Number [ ][ ] - [ ][ ][ ] - [ ][ ][ ][ ]

FOR OFFICIAL USE ONLY

ID # _____

Date Received _____

Owner/Operator Name

Name _____ Phone ( )

Mail Address _____

Emergency Contact

Name _____ Title _____

Phone ( ) _____ 24 Hr. Phone ( ) _____

Name _____ Title _____

Phone ( ) _____ 24 Hr. Phone ( ) _____

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 _____

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Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) — Container Type / Temperature / Pressure / Storage Locations	Optional
CAS [ ][ ][ ][ ][ ][ ] [ ][ ] [ ] Trade Secret [ ] Chem. Name _____ Check all that apply: [ ] Pure [ ] Mix [ ] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name _____	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [ ] Immediate (acute) [ ] Delayed (chronic)	[ ][ ] Max. Daily Amount (code) [ ][ ] Avg. Daily Amount (code) [ ][ ][ ] No. of Days On-site (days)	[ ][ ][ ] _____	[ ]
CAS [ ][ ][ ][ ][ ][ ] [ ][ ] [ ] Trade Secret [ ] Chem. Name _____ Check all that apply: [ ] Pure [ ] Mix [ ] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name _____	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [ ] Immediate (acute) [ ] Delayed (chronic)	[ ][ ] Max. Daily Amount (code) [ ][ ] Avg. Daily Amount (code) [ ][ ][ ] No. of Days On-site (days)	[ ][ ][ ] _____	[ ]
CAS [ ][ ][ ][ ][ ][ ] [ ][ ] [ ] Trade Secret [ ] Chem. Name _____ Check all that apply: [ ] Pure [ ] Mix [ ] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name _____	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [ ] Immediate (acute) [ ] Delayed (chronic)	[ ][ ] Max. Daily Amount (code) [ ][ ] Avg. Daily Amount (code) [ ][ ][ ] No. of Days On-site (days)	[ ][ ][ ] _____	[ ]

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Name and official title of owner/operator OR owner/operator's authorized representative _____ Signature _____ Date signed _____

Optional Attachments

[ ] I have attached a site plan

[ ] I have attached a list of site coordinate abbreviations

[ ] I have attached a description of dikes and other safeguard measures

TP-550 (11/90)

New York State Department of Taxation and Finance

Return of Special Assessments on Generation, Treatment or Disposal of Hazardous Waste in New York State

For the calendar quarter October 1, 1990 through December 31, 1990

Before making any entries below, be sure to read instructions. Please print or type.

Please print or type

Environmental Protection Agency number: NYD131318651 060490270 490

Employer federal identification number or Social Security number *(if not shown on label)*: 06-0490270

Name: PERKIN-ELMER CORP-METCO DIV

Street: PATRICK A TIGHE
1101 PROSPECT AVE

City: WESTBURY NY 11590

Use labeled form and return envelope and mail completed return to:
HW Return Processing Unit
855 Central Avenue
Albany, N.Y. 12206

I Calculation of Hazardous Waste Subject to Special Assessments

1	Tons of hazardous waste generated in New York State that were treated, or disposed of, or designated for removal or removed from the site of generation for treatment or disposal, or for storage prior to such treatment or disposal during this period	1	- 0 -
2	Tons received from out-of-state for treatment or disposal or for storage prior to such treatment or disposal in a New York State facility during this period	2	
3	Total number of tons dealt with *(add lines 1 and 2)*	3	- 0 -
4	Tons not subject to assessment *(from line 29, Part III of this form)*	4	
5	Total number of tons of hazardous waste subject to assessment *(subtract line 4 from line 3)*	5	- 0 -

II Computation of Special Assessments

			Tons *(to nearest 1/10 ton)*	× Rate =	Assessment
6	Tons disposed of in landfill on-site of generation	6		× $ 27 =	
7	Tons designated for removal or removed from the site of generation for disposal in a landfill or designated for removal or removed from the site of generation for storage prior to disposal in a landfill	7		× $ 27 =	
8	Tons designated for removal or removed from the site of generation for treatment or disposal *(except by landfill or incineration)*, or for storage prior to such treatment or disposal	8		× $ 16 =	
9	Tons designated for removal or removed from the site of generation for incineration or for storage prior to incineration	9		× $ 9 =	
10	Tons incinerated on-site of generation	10		× $ 2 =	
11	Tons received from out-of-state for landfill disposal or for storage prior to such disposal	11		× $ 27 =	
12	Tons received from out-of-state for treatment or disposal, other than landfill disposal or incineration, or for storage prior to such treatment or disposal	12		× $ 16 =	
13	Tons received from out-of-state for incineration or for storage prior to incineration	13		× $ 9 =	
14	Total number of tons subject to assessment *(add tons column, lines 6 through 13)*	14	- 0 -		
15	Total assessment for current quarter *(add assessment column, lines 6 through 13)*			15	- 0 -
16	Unpaid balance due from previous quarters this calendar year			16	
17	Total assessment due *(add lines 15 and 16)*			17	- 0 -
18	Interest due for late payment *(see instructions)*			18	
19	Additional charges for late filing, late payment, etc. *(see instructions)*			19	
20	Total due *(add lines 17, 18 and 19)*			20	- 0 -
21	Amount deferred *(see instructions)*			21	
22	Total remittance. Make check payable to **"Commissioner of Taxation and Finance"**			22	- 0 -

I hereby certify that to the best of my knowledge and belief, this is a true and complete return.

Name of owner, partner or officer *(please print or type)*	Area code Business telephone	Date
Frank McKendry	(516) 334-1300	01-15-91
Signature of owner, partner or officer: Frank G. McKendry	Title: Controller	

P2SUL006992

III Calculation of Hazardous Waste Not Subject to Special Assessments During This Period

23	Of the waste reported on line 1, tons treated or disposed of on-site except by incineration or landfill disposal	23	
24	Tons generated as a result of remediation of inactive waste disposal sites in New York State	24	
25	Tons of hazardous waste recoverable from a materials recovery process	25	
26	Tons transferred by a treatment, storage or disposal facility located in New York State to another such facility where the tons of hazardous waste were generated in New York State	26	
27	Tons received from out-of-state treatement, storage or disposal facility if such wastes originated in New York State	27	
28	Tons generated at a federal facility	28	
29	Total number of tons not subject to assessment *(add lines 23 through 28, transfer this amount to line 4 on the front of this form)*	29	– 0 –

Who must file this return

Anyone who generates hazardous waste in New York State, or who treats or disposes of hazardous waste received from outside New York State, must file periodic returns with the New York State Department of Taxation and Finance and pay appropriate assessments. A separate return is required to be filed for each site. Revised assessment rates and filing periods became effective June 1, 1985 pursuant to Chapter 38 of the Laws of 1985.

When to file returns

Returns must be filed on or before the due dates shown for the following calendar quarters:

Quarter	Period	Due date
1	January, February and March	April 20
2	April, May and June	July 20
3	July, August and September	October 20
4	October, November and December	January 20

Failure to file and/or pay may result in the imposition of penalties as provided by law. All records must be kept for three years.

Federal And State Privacy Notification

Our authority to require personal information, including identifying numbers (social security numbers, etc.) is found in sections 171 and 1096 of the Tax Law and section 27-0923 of the Environmental Conservation Law.

We will use this information to determine liability under section 27-0923 of the Environmental Conservation Law and for any other purpose authorized by law.

Your failure to provide the required information may result in civil or criminal penalties, or both, under the Environmental Conservation Law or the Tax Law.

Our authority to maintain this information is found in sections 171, 1083 and 1096 of the Tax Law and section 27-0923 of the Environmental Conservation Law. This information will be maintained by the Director, Data Management Services Bureau, NYS Tax Department, Building 8, Room 905, W. A. Harriman Campus, Albany, NY 12227; telephone (from New York State only) 1 800 CALL TAX (1 800 225-5829); from outside New York State, call (518) 438-8581.

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

Form Approved OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD 057731660 — Manifest Document No. 43089
2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
[illegible]
[illegible] AVE
[illegible] NY 11501-3677

4. Generator's Phone ([illegible]) 539-1001

A. State Manifest Document Number: NY C 484509-3

B. Generator's ID: SAME

5. Transporter 1 (Company Name): [illegible] CORP.
6. US EPA ID Number: NJD 049908202
C. State Transporter's ID: [illegible]
D. Transporter's Phone: 516 842-6311

7. Transporter 2 (Company Name)
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone ( )

9. Designated Facility Name and Site Address: 911205 [illegible] CORP [illegible] STABRO [illegible] MASTIC BEACH NY 11701
10. US EPA ID Number: NYD 000708190
G. State Facility's ID
H. Facility's Phone: 516 842-5311

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, WASTE COMBUSTIBLE LIQUID, N.O.S. (CONTAINS NAPHTHA), NA1993, PG III (D001, D018, D039, D027, D028, D040, [illegible])	3	DM	48	G	EPA D001 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
a. [illegible] D028, D027, D018, D040
b.
c.
d.

K. Handling Codes for Wastes Listed Above
a. [illegible] b. c. d.

15. Special Handling Instructions and Additional Information
EMERGENCY RESPONSE 1-800-424-8802 24HR
9740 9315367 645329 2-118-06-150[illegible]

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Steve Nichols — Signature: [signature] — Mo. Day Year: 10 09 17

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: PAUL JOHNSON — Signature: [signature] — Mo. Day Year: 10 09 17

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name — Signature — Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: Joyce Zimmerman — Signature: [signature] — Mo. Day Year: 10 09 17

NY C 484509-3

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 5-Generator-Mailed by TSD facility

P2S0L008396

2-118-08

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

Form Approved OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD 057731663
Manifest Document No.: 45389
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
METCO
325 DUFFY AVE
HICKSVILLE NY 11801-3671
4. Generator's Phone (516 938-1661

A. State Manifest Document Number: NY C 484509-3
B. Generator's ID: SAME

5. Transporter 1 (Company Name): SAFETY-KLEEN CORP.
6. US EPA ID Number: ILD 984908202
C. State Transporter's ID: ES 9459-NY
D. Transporter's Phone: 516 842-6311

7. Transporter 2 (Company Name)
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone ( )

9. Designated Facility Name and Site Address: 211808
SAFETY-KLEEN CORP.
80 SEABRO
NO AMITYVILLE, NY 11701
10. US EPA ID Number: NYD 000708198
G. State Facility's ID
H. Facility's Phone: 516 842-6311

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII(D001) (D006, D008, D018, D027, D039D040) (ERG#128)	3	DM	48	G	EPA D001 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
I (A) D006 D008
a. (A) D018, D027, D039, D040
b.
c.
d.

K. Handling Codes for Wastes Listed Above
a. R
b.
c.
d.

15. Special Handling Instructions and Additional Information
*
EMERGENCY RESP#1-800-468-1760 24HR
9740 94153674 645389 2-118-08-1500 01

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

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Printed/Typed Name: Bruce Nielsen
Signature:
Mo. Day Year: 10 02 97

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: PAUL JOHNSON
Signature:
Mo. Day Year: 10 02 97

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name
Signature
Mo. Day Year

FACILITY

19. Discrepancy Indication Space

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Printed/Typed Name
Signature
Mo. Day Year

NY C 484509-3

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EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 3-Disposer State-mailed by generator

A: 10083 B: P2SUL008356 C: D:

48-14-1 (9-94)-7f

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

Form Approved OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.
Manifest Document No.
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number: NY C 484509-3
B. Generator's ID
C. State Transporter's ID
D. Transporter's Phone
E. State Transporter's ID
F. Transporter's Phone ( )
G. State Facility's ID
H. Facility's Phone

5. Transporter 1 (Company Name)
6. US EPA ID Number
7. Transporter 2 (Company Name)
8. US EPA ID Number
9. Designated Facility Name and Site Address
10. US EPA ID Number

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	3	DM	4	G	EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
a. c.
b. d.

K. Handling Codes for Wastes Listed Above
a. c.
b. d.

15. Special Handling Instructions and Additional Information

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Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

NY C 484509-3

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 8-Generator-retained by generator

P2SUL008357

safety-kleen

LAND DISPOSAL RESTRICTION AND WASTE ANALYSIS CRITERIA FORM

UHC NOTICE: GENERATOR IS NOT REQUIRED TO LIST UNDERLYING CONSTITUENTS BECAUSE TREATER WILL MONITOR FOR ALL REGULATED CONSTITUENTS PRIOR TO DISPOSAL.

TO: SAFETY-KLEEN CORP. (DESIGNATED FACILITY) EPA ID NO. _____ (DESIGNATED FACILITY)

ADDRESS: _____

Under manifest/sales service number _____ the generator noted below is shipping to you a waste determined to be restricted under 40 CFR Part 268. In accordance with 40 CFR Part 268.7, the generator hereby provides notice that the waste is restricted from land disposal. A copy of this form must be kept by the generator and facility for five (5) years from the date of waste shipment.

PLEASE ✓ THE APPROPRIATE BOXES

WASTE NAME (FOR NON-WASTE WATER)	WASTE CODE	THE WASTE MAY CONTAIN THE FOLLOWING RESTRICTED CONSTITUENTS	TREATMENT STANDARD OR METHOD
☑ Waste Petroleum Naphtha 105	D001	Ignitable Liquid (High TOC Subcategory)	Combustion (CMBST)
		Halogenated Organic Compounds (HOC's)≥1000 mg/l	or recovery (RORGS)(40 CFR 268.42)(non-waste water)
	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/KG
	D027	1, 4-Dichlorobenzene	6.0 (non-waste water) MG/KG
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
	D040	Trichloroethylene	6.0 (non-waste water) MG/KG
☐ Waste Petroleum Naphtha 140	D001	Ignitable Liquid (High TOC Subcategory)	CMBST, or RORGS (40 CFR 268.42)(non-waste water)
	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/KG
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
☐ Actrel Solvent (If customer specific TCLP is not available)	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/KG
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
	D040	Trichloroethylene	6.0 (non-waste water) MG/KG
☐ Aqueous Parts Washer	D006	Cadmium	1.0 (non-waste water) MG/L
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
☐ Waste Petroleum Naphtha 150	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/KG
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
	D040	Trichloroethylene	6.0 (non-waste water) MG/KG
☐ Aqueous Brake Cleaner	D006	Cadmium	1.0 (non-waste water) MG/L
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
	D040	Trichloroethylene	6.0 (non-waste water) MG/KG
☐ Waste Petroleum Naphtha (sludges from Safety-Kleen Service Center Operations)	D001	Ignitable Liquid (High TOC Subcategory)	CMBST, or RORGS (40 CFR 268.42)(non-waste water)
	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
☐ Photo Imaging	D011	Silver	5.0 (non-waste water) MG/L
☐ Waste Compound Cleaning Liquid/ Immersion cleaner 699	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/KG
	D027	1, 4-Dichlorobenzene	6.0 (non-waste water) MG/KG
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
	D040	Trichloroethylene	6.0 (non-waste water) MG/KG
☐ Waste Gasoline Filters	D001	Ignitable Liquid (High TOC Subcategory)	CMBST, or RORGS (40 CFR 268.42)(non-waste water)
	D018	Benzene	10 (non-waste water) MG/KG

OPTIONAL STATE INFO.

MACHINE NUMBER	SPECIFIC GRAVITY	EXCESS FLUID IN DRUM? (MS>2/3)(C>1/3)(Y/N)	OFF-COLOR? (Y/N)	MORE THAN 30% SOLIDS? (Y/N)	UNUSUAL ODOR? (Y/N)	UNUSUAL MATERIALS INCLUDED/ADDED? (Y/N)

SPECIFIC GRAVITY ACCEPTANCE GUIDELINES

SALES REPRESENTATIVE SIGNATURE (FOR OPTIONAL STATE INFORMATION)

GENERATOR

FORM 1339 (5/97)

The constituent composition is based on knowledge of the waste (via Material Safety Data Sheets for the chemical(s) used, and the process which created the waste).

***These treatment standards do not preclude reclamation prior to final disposition.**

Generator Company _____ EPA ID NO.: _____

Safety-Kleen Corp. manages the above waste through its recycling and fuels programs. Safety-Kleen will fulfill all applicable elements of the land disposal restriction.

48-14-1 (3-89)--7f

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

Please print or type. DO NOT STAPLE.

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-94

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD [illegible]
Manifest Document No. [illegible]
2. Page 1 of
Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
[illegible]
A. State Manifest Document Number NY C 225804-3
B. Generator's ID SAME

4. Generator's Phone (516) [illegible]

5. Transporter 1 (Company Name) [illegible]
6. US EPA ID Number [illegible]
C. State Transporter's ID MF2047
D. Transporter's Phone [illegible]

7. Transporter 2 (Company Name)
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone ( )

9. Designated Facility Name and Site Address
[illegible]
10. US EPA ID Number [illegible]
G. State Facility's ID
H. Facility's Phone [illegible]

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. [illegible]	14	[illegible]	79	[illegible]	EPA [illegible] STATE [illegible]
b.					EPA STATE
c.					EPA STATE
d.					EPA STATE

J. Additional Descriptions for Materials Listed Above
a [illegible] c
b d

K. Handling Codes for Wastes Listed Above
a [illegible] c
b d

15. Special Handling Instructions and Additional Information [illegible]

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR**, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: KENNETH M. THOMSON
Signature: [signature]
Mo. Day Year: 04 21 93

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: Gary Factora
Signature: Gary Factora
Mo. Day Year: 04 21 93

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name
Signature
Mo. Day Year

FACILITY

19. Discrepancy Indication Space
Date on Line 20 4/21/93

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: Joyce Zimmerman
Signature: [signature]
Mo. Day Year: 04 21 93

NY C 225804-3

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 5-Generator-Mailed by TSD facility

P2SUL905714

48-14-1 (3-89)-7f

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

Form Approved OMB No. 2050-0039, Expires 9-30-94

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest Document No.

2. Page 1 of

Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number
NY C [illegible] 3

B. Generator's ID

5. Transporter 1 (Company Name)

6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Phone ( )

7. Transporter 2 (Company Name)

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone ( )

9. Designated Facility Name and Site Address

10. US EPA ID Number

G. State Facility's ID

H. Facility's Phone
( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	11		71		EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. c.

b. d.

K. Handling Codes for Wastes Listed Above

a. c.

b. d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR**, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

NY C 225804 3

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 8-Generator-retained by generator

P2SUL005715

2-118-08

NOTICE OF LAND DISPOSAL RESTRICTION OF WASTE

Safety-Kleen®

TO: SAFETY-KLEEN CORP.
(DESIGNATED FACILITY)

EPA ID NO. NYD000708198
(DESIGNATED FACILITY)

80 SEABRO

ADDRESS: NO AMITYVILLE NY 11701

OPTION A: Under manifest number _____, the generator noted below is shipping to you a waste determined to be restricted under 40 CFR Part 268. In accordance with 40 CFR Part 268.7, the generator hereby provides notice that the waste is restricted from land disposal. A copy of this form must be kept by the generator and facility for five (5) years from the date of waste shipment.

OPTION B: (SOLVENT EMISSION CONTROL PARTS SUPERVISED OR IMMERSION CLEANER) In accordance with 40 CFR 268.7, the generator hereby provides notice that the waste is restricted from land disposal. I am a small quantity generator (100-1,000 kg/mo) in accordance with 40 CFR 268.7. This notice applies to all waste shipments under my service contract with Safety-Kleen Corp. It covers today's shipment on manifest No. NYC 225804-3, or sales/service acknowledgement No. 806524, and all subsequent shipments. A copy of this notice will be maintained with the service contract(s) or sales/service acknowledgment(s) for five (5) years beyond the termination of the service contract.

PLEASE CHECK THE APPROPRIATE BOXES

✓	WASTE NAME	EPA * WASTE CODE	THE WASTE MAY CONTAIN THE FOLLOWING RESTRICTED CONSTITUENTS	TREATMENT STANDARD (mg/l) OR METHOD (FOR NON-WASTE WATER)
☒	Waste Petroleum Naphtha (105)	D001, D018, D039,	Ignitable Liquid (High TOC Subcategory) Halogenated Organic Compounds (HOC's) ≥ 1000 mg/l Benzene Tetrachloroethylene	Incineration (INCIN), fuel substitution (FSUBS) or recovery (RORGS) (40 CFR 268.42) (non-waste water) INCIN (40 CFR 268.42) (non-waste water) Not Established Not Established
☐	Waste Petroleum Naphtha (140)	D001,	Ignitable Liquid (High TOC Subcategory)	INCIN, FSUBS, or RORGS (40 CFR 268.42) (non-waste water)
☐	Waste Petroleum Naphtha (sludges from Safety-Kleen Service Center Operations)	D001, D006, D007, D008, D039,	All of the above, plus: __ Cadmium __ Chromium __ Lead __ Tetrachloroethylene	 1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste Water) Not Established
☐	Waste Compound Cleaning Liquid/ Immersion cleaner 699	 D006, D007, D008, D018, D021, D027, D039, D040,	HOC's ≥ 1000 mg/l __ Cadmium __ Chromium __ Lead __ Benzene __ Chlorobenzene __ 1, 4-Dichlorobenzene __ Tetrachloroethylene __ Trichloroethylene	INCIN (40 CFR 268.42) (non-waste water) 1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste Water Not Established Not Established Not Established Not Established Not Established
☐	Waste Perchloroethylene	F002,	Tetrachloroethylene	5.6 (non-waste water)
☐	Waste Perc. Filters This hazardous debris is subject to the alternative treatment standards of 40CFR 268.45.	F002,	Tetrachloroethylene	5.6 (non-waste water)
☐	Waste Trichlorotrifluoroethane	F002,	Trichlorotrifluoroethane	28.0 (non-waste water)
☐	Waste 1,1,1 Trichloroethane	F002,	1, 1, 1 Trichloroethane	5.6 (non-waste water)
☐	Waste Petroleum Naphtha (Dry Cleaning)	D001, D039,	Ignitable Liquid (High TOC Subcategory) Tetrachloroethylene	INCIN, FSUBS, or RORGS (40 CFR 268.42) (non-waste water) Not Established
☐	Waste Paint Related Material	F003, F005, F003, F005, F003, F003, D001, D006, D007, D008,	Acetone Methyl Ethyl Ketone Methyl Isobutyl Ketone Toluene Xylene Methanol Ignitable Liquid (High TOC Subcategory) Cadmium Chromium Lead (TOC Subcategory)	160.0 (non-waste water) 36.0 (non-waste water) 33.0 (non-waste water) 28.0 (non-waste water) 28.0 (non-waste water) 0.75(non-waste water) INCIN, FSUBS, or RORGS (40 CFR 268.42) (non-waste water) 1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste water)
☐	Waste Antifreeze	D008, D039,	Lead Tetrachloroethylene	5.0 (non-waste water) Not Established

GENERATOR

The constituent composition is based on knowledge of the waste (via Material Safety Data Sheets for the chemical(s) used, and the process which created the waste).

*These treatment standards do not preclude reclamation prior to final disposition. 9316 2-118-08-1500 04 806524

Generator Company: METCO

EPA ID NO.: NYD057731663

Generator's Signature: X [signature]

Date: 4-21-93

Printed Name and Title of Generator: KENNETH M. THOMSON - LEAHMAN

Safety-Kleen Corp. manages the above waste through its recycling and fuels programs in accordance with all applicable elements of the land disposal restrictions.

P 617 298 188

Certified Mail Receipt
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

UNITED STATES POSTAL SERVICE

Sent to NYS DEC DIV HAZARDOUS SUBSTANCES REGULATION	
Street & No. PO BOX 12820	
P.O., State & ZIP Code ALBANY NY 12212	
Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form 3800, June 1990

Fold at line over top of envelope to the right of the return address.

CERTIFIED

P 617 298 188

MAIL

REMOVE TO EXPOSE ADHESIVE

U.S. MAIL

PENALTY FOR PRIVATE USE $300

Print Sender's name, address, and ZIP Code in the space below.

ATTN: C. CONROY
METCO
1101 PROSPECT AVENUE
WESTBURY NY 11590

RETURN TO

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS
Print your name, address, and ZIP Code in the space below.
- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

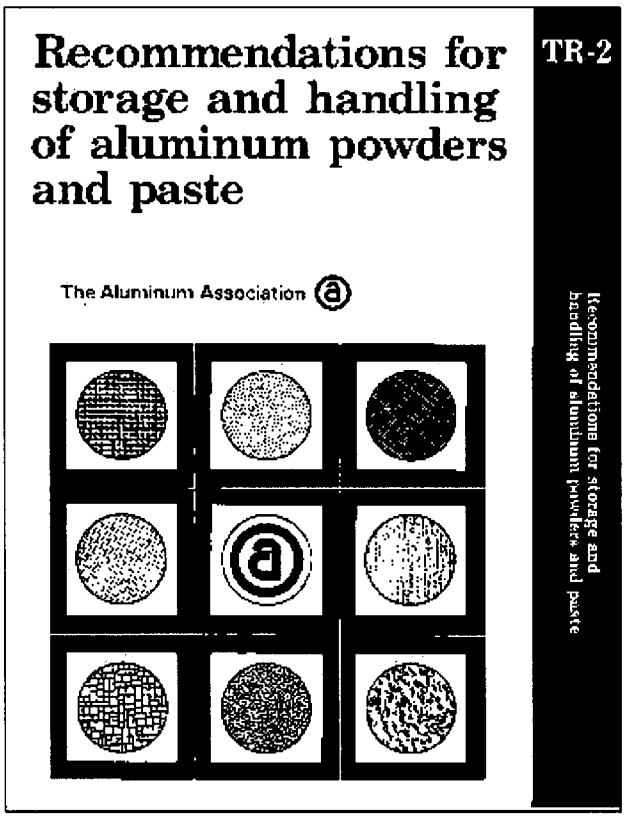
P 617 298 188

Certified Mail Receipt
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

UNITED STATES POSTAL SERVICE

Sent to NYS DEC DIV HAZARDOUS SUBSTANCES REGULATION	
Street & No. PO BOX 12820	
P.O., State & ZIP Code ALBANY NY 12212	
Postage	$ .29
Certified Fee	1.00
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	$ 2.29
Postmark or Date	6/30/93

PS Form 3800, June 1990



GENERAL SAFETY RECOMMENDATIONS FOR STORAGE OF ALUMINUM POWDER AND PASTE

Aluminum powder and paste can be shipped, stored and used safely if proper attention is given to the maintenance of scrupulous housekeeping practices, and if the basic rules of safety contained in this brochure and other referenced sources are carefully followed. However, under certain conditions, aluminum powder and paste products can ignite and/or explode.

To provide a better understanding of the recommended safe procedures, the Safety and Property Protection Committee of The Aluminum Association's Pigments and Powder Division has prepared this brochure. These recommendations were compiled by the Committee from those sources listed in the Appendix, from the technical information presently available and from the Member's collective experience in handling aluminum powder and paste. Important source documents referenced in this brochure are National Fire Protection Association Standards Nos. 70, 77, and 651. Readers of this publication are encouraged to refer to these NFPA standards.

The Committee believes that if the recommendations contained herein are followed, the hazards related to the handling and use of aluminum powders and pastes will be substantially reduced. It should be recognized, however, that under some conditions, additional precautions may be required. Likewise, technical advances may uncover better ways of dealing with these materials. If you have any questions concerning aluminum powder and paste, please contact the manufacturer.

The suggestions and information in this brochure concerning the storage and handling of aluminum powder and paste are general in nature. Readers are advised to seek expert advice in connection with their individual handling and storage needs. The Aluminum Association and its member companies make no warranty and assume no responsibility or liability with respect to the suggestions and data contained herein.

DEFINITIONS

Aluminum Powder: Aluminum powder can be divided into three broad classifications: atomized, flake and granules. The length, width, and thickness of an atomized particle are all of approximately the same order, the length dimension probably not exceeding two or three times the thickness dimension. The length or width of a flake particle may be several hundred times its thickness.

Aluminum Paste: Aluminum paste is aluminum flake pigment homogeneously incorporated in a solvent. The solvents employed, such as mineral spirits, generally have flash points above 100 F.

Storage Areas: In this brochure, a storage area is understood to be an area where powder and paste are kept in closed containers.

BACKGROUND

Why Powder Burns:

Chemically, aluminum has an enormous affinity for oxygen. This results in a thin film of aluminum oxide being produced almost instantaneously on the surface of the aluminum, when exposed to the atmosphere. The aluminum oxide film is inert and protects the underlying metal from further reaction.

When an aluminum powder particle is heated to a certain temperature known as the "ignition temperature", the mass of the particle is so small, that the entire particle may oxidize almost instantly. Thus a pile of such particles will "burn." Since flake particles have a much greater surface area per unit mass than atomized or granular particles, they will ignite more readily and burn faster than the other types of powder.

Generally, aluminum powders with a particle size of 40 mesh (420 microns) or smaller present a fire and explosion hazard.

Why Powder Explodes:

Fine particles of aluminum powder, like some organic powders, such as flour, starch and coal

dust, are easily dispersed in air where their low mass allows them to remain suspended or "float" in the air. These suspended particles will burn, similarly to particles in a pile, when the ignition temperature is reached. However, when dispersed in the proper proportion in the air, which allows the particles to mix with oxygen, the burning extends from one particle to another with such rapidity, that a violent explosion results.

Laboratory tests by the U.S. Bureau of Mines and others have established the proportions required for an explosion. These values extend through a wide range and very little aluminum powder is needed for an explosion to occur. Aluminum powder in the form of a dust cloud will ignite with as little as 9% oxygen present, the balance being nitrogen; or 10% oxygen with the balance being helium; or 3% oxygen with the balance being carbon dioxide. Very small amounts of energy are required to ignite mixtures of aluminum powder and air.

Common Sources of Ignition:

The discharge of static electricity will produce an electric spark that could raise the temperature of suspended powder particles in the vicinity of the spark above the ignition temperature - resulting in a fire or explosion. Electric switches, broken light bulbs, electric motor commutators, loose electric power connections-even a metal to metal impact -anything producing a spark can set off an explosion of aluminum powder suspended in air. Even continued metal to metal rubbing (as in a dry sleeve bearing) can generate enough heat to set off an explosion.

Health Aspects:

Information on health aspects of aluminum powder and paste is provided in Material Safety Data Sheets supplied by the aluminum powder or paste producer.

GENERAL SAFETY PRECAUTIONS

1. All electrical wiring, lights and equipment must be as specified by the latest version of the National Electrical Code, NFPA 70. Some locations may require electrical installations suitable for Class I or Class 11 locations per articles 500 through 504 of NFPA 70.

2. Great care must be taken to prevent the contact of water with aluminum powders. Leaks in steam lines, water lines, radiators or roofs should be promptly repaired.

3. Exercise good housekeeping practices in all areas where aluminum powder or paste is stored or handled. Guard against the accumulation of dust on floors, walls and other surfaces. Powder cleanup must be done only with squeegees or soft natural bristle brushes. Scoops used to pick up powder must be conductive and non-sparking. Synthetic bristle brushes and plastic or other non-conductive scoops must not be used, since they tend to accumulate strong static charges. Standard commercial industrial vacuum cleaners must not be used for cleaning. Only special machines specifically approved for use with combustible metal dusts may be used. Keep all rubbish, such as oily rags, papers and other combustibles out of the area.

4. Post "No Smoking" signs and enforce the rule. Do not use open lights, blow torches, welding torches or permit open flame of any kind in storage and handling areas.

5. Avoid friction sparks. Do not permit metal to metal or metal to concrete contact. In handling aluminum powders and pastes, use electrically conductive, grounded and non-sparking tools. Plastic and ferrous metals should not be used.

6. Keep aluminum powder and paste containers far enough away from steam pipes, radiators and other high temperature sources to prevent heating of the contents.

7. Keep all containers sealed except when opened for removal of material. Reseal containers immediately after each use to prevent contamination or, in the case of pastes, loss of solvent.

ALUMINUM POWDER AND PASTE STORAGE

1. Storage should be in rooms of noncombustible or limited combustible construction.

2. Aluminum powder and paste should be stored in the original shipping containers and kept tightly sealed.

3. 3.Aluminum powder should not be stored in areas containing flammable liquids or other combustible materials, due to the differences in fire fighting methods.

4. Store sealed containers of aluminum paste in a dry room at a temperature below the flash point of the solvent.

5. Stack containers properly with ample aisle space. Keep stack height to a minimum.

6. Aluminum powder and paste must not be stored in the same area as incompatible materials such as oxidizers.

7. Safety aspects of bulk storage should be discussed with the powder or paste supplier.

SAFETY PRINCIPLES FOR HANDLING ALUMINUM POWDER

Rule I - Avoid any condition that will suspend or float powder particles in the air, creating a dust cloud.

1. In transferring aluminum powder, dust clouds should be kept at an absolute minimum. Handling should be slow and deliberate. Powder should be transferred from one container to another using a non-sparking, conductive metal scoop, with as little agitation as possible. Both containers should be bonded together and provided with a grounding strap.

2. In mixing aluminum Powder with other dry ingredients, frictional heat should be avoided. The best type of mixer for a dry mixing operation is one that contains no moving parts, but rather affects a tumbling action, such as a conical blender. Introduction of an inert atmosphere in the blender is highly recommended since dust clouds are generated

(See Rule 11, item 4). All equipment must be well grounded.

Rule II - Eliminate all sources of ignition in powder and paste handling areas.

1. No smoking or smoking materials, including lighters or matches should be allowed in areas where aluminum powder, paste or dust are present.

2. No flame, spark producing or propellant actuated tools or activities should be carried out in an area where aluminum powder or paste are present. Where activities such as welding, cutting, grinding, or use of portable electric tools are necessary, a "Hot Work" permit system is strongly recommended.

3. Locate electric motors and as much electrical equipment as possible outside processing areas. Only lighting and control circuits should be in operating rooms. All electrical equipment must meet the National Electric Codes for hazardous installations. This includes flashlights, hazardous portable power tools and other devices.

4. The use of an inert gas to replace air can greatly increase the safety of many operations, particularly where it may be impossible to ensure that all sources of ignition are eliminated. It should be noted that completely inert gas not be used, since the aluminum powder would eventually, at some point in the process, be re-exposed to ambient atmosphere. At that time any unreacted surfaces, created by rupture of the oxide film during processing would re-oxidize, possibly creating sufficient heat to initiate either a fire or an explosion.

5. Impacts can produce sparks that will ignite aluminum powder. These can be caused by steel tolls falling on a concrete floor or even an aluminum scoop falling on rusted iron. Non-sparking tools must be used where there is a possibility of impact sparks.

Rule III - Eliminate the generation of static electricity, where possible, and prevent static charge accumulations.

1. Bonding and grounding of machinery to remove static electricity produced in powder operations are vital for safety. Bonding and grounding should be done in accordance with the Recommended Practice on Static Electricity, NFPA 77, and Standard for the Manufacture of Aluminum Powder, NFPA 651.

2. All moveable equipment, such as drums, containers and scoops must be bonded and grounded during powder transfer by the use of clips and flexible ground leads.

3. During transfer, powder must not be poured or slid on nonconductive surfaces. Such actions tend to build up static electricity.

4. Work clothing should be made of smooth, hard finished, closely woven fire resistant/fire retardant fabrics which tend not to accumulate static electric charges. Trousers should have no cuffs where dust might accumulate. Pockets, if present, should be designed in such a way as to eliminate the accumulation of dust.

Rule IV – Take steps to limit the size of a fire or explosion and to hold any resulting damage to the very minimum.

1. Keep all containers sealed. Store these unopened in an area separate from handling areas.

2. When a drum of powder or paste is opened for loading or inspection, it should be closed and resealed as quickly as possible. This not only assures greater safety against fire from external sources, but also prevents possible entrance of tramp material or water from the air. In past instances, sealed drums of aluminum powder have withstood an external explosion and subsequent fire without ignition of the contents of the drum.

3. Consider the use of an inert gas which can be valuable in minimizing the hazard of handling powder in air.

4. All containers in work areas should be closed and sealed. Only those in actual use should be open at any time.

FIRE FIGHTING METHODS

Professional or volunteer fire fighters from outside the plant cannot be expected to be trained for the specific fire and life hazards associated with aluminum powder and paste fires. In the interest of their own safety, they should be directed by the plant's safety or fire fighting officer.

Aluminum Powder

Since it is almost impossible to extinguish a large aluminum powder fire, the fire must be controlled in its incipient stage.

Aluminum powder fires on reasonably flat surfaces may be controlled by blanketing the fire with a Class D dry extinguishent or ringing the fire with a dam of dry sand. This should be done with great care to avoid disturbing the powder and creating a dust cloud. Even a minor dust cloud may explode violently. Long handled shovels or scoops of non-sparking material should be provided for the application of dry extinguishing agents.

A properly blanketed or ringed fire will develop a hard crust of metal oxide which will ultimately exclude enough oxygen to cause self-extinguishment. After dispensing the extinguishing material, leave the area, close all doors leading to the area and seal them with sand. All fans and machinery, including dust collection systems should be shut down. The area should not be reentered until combustion has stopped and the material has cooled.

Water must not be used to fight an aluminum powder fire since water reacts with hot aluminum powder to produce hydrogen. Also, the force of a water stream could suspend the aluminum powder to form a dust cloud.

Where Class A,B,or C fire hazards exist in powder areas, extinguishers suitable for use on such fires must be labeled "Not for Use on Aluminum Powder Fires".

Aluminum Paste

A fire in aluminum paste normally begins as a solvent fire. The solvent fire can be fought with Class B extinguishing agents, however halogenated or vaporizing liquid agents must never be used. Judgement must be exercised in determining whether Class B extinguishing agents can be safely used. If the extinguishing agent is carefully applied, it will be very evident if it accelerates the fire. Then the fire should be considered a powder fire, the use of a Class B extinguisher should be discontinued and a Class D agent or dry sand should be used. If the aluminum metal has ignited, it may continue to bum under a crust, without flames, and should not be disturbed.

It is very dangerous to use a water hose stream to fight a paste fire. The force of the stream could spread the fire and even suspend dried out flake powder into the air, causing a dust cloud which may explode.

Suitable, commonly used Class B extinguishing agents are dry chemical, foam and carbon dioxide. Carbon dioxide may be used to extinguish fires involving solvent-wetted aluminum. However, re-ignition may occur due to high localized heat or spontaneous heating. To avoid re-ignition, the residual material must be immediately smothered.

REFERENCES

1. M. Jacobson, Austin R. Cooper, John Nagy, Explosibility of Metal Powders, U.S. Bureau of Mines Report of Investigation No. 6516.

2. National Fire Protection Association, No. 70, National Fire Code

3. National Fire Protection Association, No. 77, Static Electricity

4. National Fire Protection Association, No 491M, Manual of Hazardous Chemical Reactions.

5. National Fire Protection Association, No. 651, Machining and Finishing of Aluminum and the Production and Handling of Aluminum Powders.

ABOUT THE ALUMINUM ASSOCIATION

The Aluminum Association (founded November 1933) serves the public as a source of non-commercial, industry wide information on aluminum and the aluminum industry. Its membership includes all producers of primary ingot, most producers of sheet and plate and foil, leading extruders, secondary smelters, forging firms, producers of electrical conductor, and producers of aluminum powder and paste.

Its functions include developing technical standards and technical data, collecting and publishing industry statistics, speaking for the industry before government and quasi-governmental bodies where an industry-wide position is required, encouraging use of aluminum in specific markets through promotional and product development programs, and conducting school programs and industry seminars.

Members of the Pigments and Powder Division of the Aluminum Association

Albemarle Corporation
Houston Plant
Box 2500
Pasadena, TX 77501

Alcoa Specialty Metals Division
P.O. Box 472
Rockdale, TX 76567

AMPAL, Inc.
P.O. Box 124
2125 Little Gap Road
Palmerton, PA 18-71

Silberline Manufacturing Company, Inc.
Lincoln Drive, P.O. Box B
Tamaqua, PA 18252

Toyal America, Inc.
17401 S. Broadway
Lockport, IL 60441

U.S. Aluminum, Inc.
86 Fourth Avenue
Haskell, NJ 07420

Valimet, Inc.
431 East Sperry Road
Stockton, CA 95206

The Aluminum Association
Incorporated
900 19th Street, N.W., Washington, D.C. 20006

WEEKLY INSPECTION REPORT

FILL OUT COMPLETLY AND FORWARD TO PATRICK TIGHE

DUFFY AVENUE FACILITY
METCO DIVISION PERKIN-ELMER
325 DUFFY AVENUE
HICKSVILLE, NEW YORK 11801
COORDINATOR: JIM ZANETTI

INSPECTED BY: B. BOUCHARD
EMPLOYEE #: 143
DATE OF INSPECTION: 11/13/89
LOCATION OF MATERIAL: DUFFY AVE

INVENTORY OF MATERIAL:

MATERIAL	DESCRIPTION/ORIGIN		CONTAINER TYPE	QUANTITY
FREON	GENESOLV	ASSEMBLY	55 GAL	3 GAL
FREON	GENESOLV	DRILL	55 GAL	10 GAL
WASTE CUTTING OILS	THERMOIL - N.F.C.	TURRET	55 GAL	63 GAL
WASTE WATER SOLUBLE	PROLINE	TURRET	55 GAL	142 GAL
WASTE VARSOL		TURRET	55 GAL	25 GAL
BLANCO-TRON	BARON BLAKESLEE	FINISHING	55 GAL	4.5 GAL
WASTE FREON	From ASSY TO SHIPPING DOCK		55 GAL	55 GAL
ENAMEL PAINT	From FINISHING TO SHIPPING DOCK		55 GAL	55 GAL

ALL CONTAINERS WITH:
PROPER LABELS ✓
SEALED TOP ✓
INTACT - NO LEAKAGE ✓

IGNS CLEARLY VISIBLE: **HAZARDOUS WASTE** ✓ / **NO SMOKING** NO

SLE SPACE TO ALLOW UNOBSTRUCTED MOVEMENT ✓

State of New Jersey
Department of Environmental Protection and Energy
Hazardous Waste Regulation Program
Manifest Section
CN 028, Trenton, NJ 08625-0028

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD131131865 Manifest Document No. 192293

2. Page 1 of 5

Information in the shaded areas is not required by Federal law.

A. State Manifest Document Number: NJA 1680298

B. State Generator's ID: SAME

3. Generator's Name and Mailing Address: METRO-PERKIN ELMER, 118 Prospect Ave, Westbury, NY 11590

4. Generator's Phone (516) 338-2337

5. Transporter 1 Company Name: Chemical Waste Management, Inc.

6. US EPA ID Number: ILD099202601

C. State Trans. ID: S1 0931

7. Transporter 2 Company Name

8. US EPA ID Number

D. Transporter's Phone (201) 465-4454

E. State Trans. ID

9. Designated Facility Name and Site Address: Chemical Waste Management of New Jersey Inc., 100 Lister Ave., Newark, NJ 07105

10. US EPA ID Number: NJD089216790

F. Transporter's Phone ( )

G. State Facility's ID: SAME

H. Facility's Phone (201) 465-9100

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	WASTE Hydrofluoric Acid, solution, 8, UN1790, II ERG # 59	X	1	DF	5	G	U134 ~~D002~~
b.	WASTE Nitric Acid, 8, UN2031, II ERG # 44	X	1	DF	5	G	D002
c.	Hazardous Waste Liquids, N.O.S., 9, NA3082, III ERG # 31	X	1	DF	5	G	U122
d.	WASTE Corrosive Liquids, N.O.S., 8, UN1760, II ~~(Flb)~~ C2 ERG # 60	X	1	DF	5	G	D002

J. Additional Descriptions for Materials Listed Above
a. (C,L,T) BD7904, DOOR 1X5 DF GS-1
b. (L,C) BD7904, 1X5DF GS-2
c. (L,T) BD7904, 1X5 DF, GS-3
d. (L,T,C) BD7904, 1X5 DF, GS-4 D001

K. Handling Codes for Wastes Listed Above
a. S01 b. S01 c. S01 d. S01

15. Special Handling Instructions and Additional Information
N.J. DEP Decal # 40X1
24 hour emergency phone # (800) 765-8713
a-d - TWI
a-d NY State Handling Code "B"
a-d 10090 PLC's.
CD Required
Ac. # 393-865
Job # 65 ~~0000~~ 269 (CC)
Work Order # 125890 TAX 367313

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Joseph Macri — Signature: Joseph Macri — Month Day Year: 9 24 93

TRANSPORTER — 17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: Christopher Zeloff — Signature: Christopher Zeloff — Month Day Year: 9 24 93

18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name — Signature — Month Day Year

FACILITY — 19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. — Printed/Typed Name: Philip Mauro — Signature — Month Day Year: 9 27 93

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

SIGNATURE AND INFORMATION MUST BE LEGIBLE ON ALL COPIES

3 — TSD MAIL TO - GENERATOR

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

NJA 1680298

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-92

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21. Generator's US EPA ID No.: NYD131318651

Manifest Document No.: 92293

22. Page: 2 of 5

Information in the shaded areas is not required by Federal law.

23. Generator's Name: METCO - PERKIN ELMER, 1101 Prospect Ave, Westbury NY, 11590 (516) 338-2337

L. State Manifest Document Number: NJA 1680298

M. State Generator's ID: SAME

24. Transporter 1 Company Name: Chemical Waste Management, Inc

25. US EPA ID Number: ILD 099202681

N. State Transporter's ID: 510321

O. Transporter's Phone: (201)

26. Transporter ___ Company Name:

27. US EPA ID Number:

P. State Transporter's ID:

Q. Transporter's Phone:

GENERATOR

	28. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	29. Containers No.	Type	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
a.	WASTE Sodium Sulfide, hydrated, 8, UN1849, II ERG # 60	X	XX1	DF	XXX14	G	D002
b.	WASTE Sodium Sulfide, 4.2, UN1385, II ERG #34	X	~~XX1~~	DF	XXXX5	G	D001
c.	WASTE Flammable Solids, N.O.S., 4.1, UN1325, III ERG #32	X	XX1	DF	XXXX5	G	D003
d.	WASTE Poisonous Solids, N.O.S., 6.1, UN2811, II (Potassium Ferricyanide, Phenol) ERG #53	X	XX1	DF	XXX14	G	P030
e.	WASTE CORROSIVE LIQUIDS, N.O.S., 8, UN1760, II ERG #60	X	XX3	DF	XXX29	G	D002
f.	WASTE Flammable Liquids, N.O.S., 3, UN1993, II ERG #27	X	XX4	DF	XXX38	G	U159 ~~D001~~
g.	WASTE Poisonous Liquids, N.O.S., 6.1, UN2810, II (Copper Cyanide, Phenol) ERG #55	X	XX1	DF	XXX14	DG	P029
h.							
i.							

S. Additional Descriptions for Materials Listed Above

a) (L,C) BD7904, 1X14 DF, GS-5
b) (S,I) BD7904, 1X5 DF, GS-6
c) (S,I,R) BD7904, D001, 1X5DF, GS-7
d) (S,T,R,H,E) BD7904, D005, D007, D003, U188 1X14 DF, GS-8

T. Handling Codes for Wastes Listed Above

A. S01 F. S01
B. S01 G. S01
C. S01
D. S01
E. S01

32. Special Handling Instructions and Additional Information

e) (L,C) BD7906, 1X10DF, 1X14 DF, 1X5DF, GC-4, CC-6, CC-8
f) (L,I,T,E) BD7906, D001, D035, ~~D001~~, 2X14 DF, 2X5 DF, CC-2, CC-3, CC-4, CC-5
g) (L,R,T,H) BD7906, F002, U228, U188, 1X14DF, CC-7

(a-g) MY STATE Handling Code "B"
(f-g) 100% PLL's
(a-g) TWI

125890

TRANSPORTER

33. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Christopher Zeloff

Signature: Christopher Zeloff

Date: Month 09 Day 24 Year 93

34. Transporter ___ Acknowledgement of Receipt of Materials

Printed/Typed Name:

Signature:

Date: Month Day Year

FACILITY

35. Discrepancy Indication Space

Style F16 REV-6 LABELMASTER, An AMERICAN LABELMARK CO., CHICAGO, IL 60646 800-621-5808

EPA Form 8700-22A (Rev. 9-88) Previous editions are obsolete.

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TRANSPORTER #2

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UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21. Generator's US EPA ID No.: NYD 1313 3651

Manifest Document No.: 92293

22. Page: 3 of 5

Information in the shaded areas is not required by Federal law.

23. Generator's Name
NETCO - PERKIN Elmer
1101 Prospect Ave
WESTBURY NY 11590 (516) 338-2337

L. State Manifest Document Number: NJA 1680298

M. State Generator's ID: SAME

24. Transporter 1 Company Name: Chemical Waste Management Inc

25. US EPA ID Number: ILD 099202681

N. State Transporter's ID: 510331

O. Transporter's Phone: (201) 465-9164

26. Transporter ___ Company Name

27. US EPA ID Number

P. State Transporter's ID

Q. Transporter's Phone

	28. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	29. Containers No.	Type	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
a.	WASTE CORROSIVE LIQUID, N.O.S., 8, UN1760, II ERG #60	X	XX1	DF	XXXX5	G	D002
b.	WASTE Flammable Liquids, N.O.S, 3, UN1993, II ERG #27	X	XX1	DF	XXXX5	G	D001
c.	WASTE CORROSIVE LIQUIDS, N.O.S., 8, UN1760, II ERG #60	X	XX1	DF	XXX 14	G	D002
d.	WASTE Flammable Liquid, N.O.S, 3, UN1993, II ERG #27	X	XXX3	DF	XXX 38	G	D001
e.	WASTE OXIDIZING ~~SUBSTANCES~~ SUBSTANCES SOLID, N.O.S., 5.1, UN1479, II (D008) ERG # 35	RQ	XX1	DF	XXX 14	G	D001
f.	WASTE OXIDIZING SUBSTANCES SOLID, N.O.S., 5.1, UN 1479, II ERG # 35	X	XX1	DF	XXX 14	G	D001
g.	WASTE Calcium Nitrate, 5.1, UN1454, II, D001 ERG # 35	X	XX1	DF	XXXX 5	G	D001
h.							
i.							

S. Additional Descriptions for Materials Listed Above
a) (L,C) BD7904 1X5DF, GS-9
b) (L,I) BD7904, 1X5DF, GS-13
c) (L,C) BD7906, 1X14DF, CC-9
d) (L,I,E) BD7906, D007, 2X14, 1X10DF, CC-10, 11, 14

T. Handling Codes for Wastes Listed Above
A. S01 E. S01
B. S01 F. S01
C. S01 G. S01
D. S01

32. Special Handling Instructions and Additional Information
e.) (S,I,E) BD7903, D007, D008, 1X14DF, AM-1
f.) (S,I) BD7903, D007, 1X14DF, AM-2
g.) (L,I) BD7903, 1X5DF, AM-3

a-g - NY STATE Handling Code "B"
a-g - 100% PLC's
a-g - TWI

125890

TRANSPORTER

33. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Christopher Zeliff

Signature: Christopher Zeliff

Date: Month 09 Day 24 Year 93

34. Transporter ___ Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date: Month Day Year

FACILITY

35. Discrepancy Indication Space

Style F16 REV-6 LABELMASTER, An AMERICAN LABELMARK CO., CHICAGO, IL 60646 800-621-5808

EPA Form 8700-22A (Rev. 9-88) Previous editions are obsolete.

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TRANSPORTER #2

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UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21. Generator's US EPA ID No.: NYD13B 18651

Manifest Document No.: 92293

22. Page: 4 of 5

Information in the shaded areas is not required by Federal law.

23. Generator's Name
METCO - PERKIN ELMER
1101 Prospect Ave
WESTBURY, NY 11590 (516)338-2337

L. State Manifest Document Number: NJA 1680298

M. State Generator's ID: SAME

24. Transporter 1 Company Name: Chemical Waste Management, Inc.

25. US EPA ID Number: ILD 099202 681

N. State Transporter's ID: 510331

O. Transporter's Phone: (201) 465-4154

26. Transporter ___ Company Name

27. US EPA ID Number

P. State Transporter's ID

Q. Transporter's Phone

	28. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	29. Containers No.	Type	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
a.	WASTE Perchloric Acid, 5.1, UN1873, I ERG#47	X	XX1	DF	XXX5	G	D001
b.	WASTE Picric Acid, wet with not less than 10% water, 4.1, NA1344, I ERG#33	X	XX1	DF	XXXX5	G	D001
c.	WASTE Flammable Liquids, Corrosive, N.O.S., 3, UN2924, II ERG#29	X	XX2	DM	XXX110	G	D001
d.	WASTE Flammable Liquids, N.O.S., 3, UN1993, II ERG#27	X	XX1	DM	XXX55	G	U019 ~~D001~~
e.	WASTE Acetic Acid, Glacial, 8, UN2789, II (Flammable) ERG#29	X	XX1	DF	XXX10	G	D002
f.	WASTE Flammable Liquid, N.O.S, 3, UN1993, II ERG#27	X	XX2	DM	XX110	G	D001
g.	WASTE Flammable Liquid, N.O.S., 3, UN1993, II ERG#27	X	XX1	DF	XXX10	G	D001
h.							
i.							

S. Additional Descriptions for Materials Listed Above
a.) (L,I,C) BD7903, D002, 1X5 DF AM-4
b.) (S,I,R) BD7903, 1X5DM, AM-5
c.) (L,I,C,E) BD7900, D002, D007, D035 2X55DM, MW-1,43
d.) (L,I,E,H) BD7900, D035, ~~U019~~, U031, 1X55DM, MW-2

T. Handling Codes for Wastes Listed Above
A. S01 E. S01
B. S01 F. S01
C. S01 G. S01
D. S01

32. Special Handling Instructions and Additional Information
e.) (L,I,C) BD7900, D002, (X10DF, MW-4 — a-g NY STATE Handling Code "B"
f.) (L,I,E) BD7902, D007, D035, 2X55DM, C2 1,2 — a-g 100% PLC's
g.) (L,I,E) BD7902, ~~D007~~ D035, 1X10DF, C2-3 — a-g TWI 125890

TRANSPORTER

33. Transporter ___ Acknowledgement of Receipt of Materials

Printed/Typed Name: Christopher Zelft

Signature: Christopher Zelft

Date: Month 09 Day 24 Year 93

34. Transporter ___ Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date: Month Day Year

FACILITY

35. Discrepancy Indication Space

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-92

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21. Generator's US EPA ID No.: NYD131318651

Manifest Document No.: 92293

22. Page: 5 of 5

Information in the shaded areas is not required by Federal law.

23. Generator's Name
Metco - Perkin Elmer
1101 Prospect Ave
Westbury, NY 11590 (516)338-2337

L. State Manifest Document Number: NJA 1680298

M. State Generator's ID: SAME

24. Transporter 1 Company Name: Chemical Waste Management Inc

25. US EPA ID Number: ILD 099 202 661

N. State Transporter's ID: 51033

O. Transporter's Phone: (201) 465-4151

26. Transporter 2 Company Name

27. US EPA ID Number

P. State Transporter's ID

Q. Transporter's Phone

	HM	28. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	29. Containers No.	Type	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
a.	RQ	WASTE Flammable Liquids, N.O.S., 3, UN1993, II ERG #27	XX15	DM	XXX75	G	D001
b.	X	WASTE Flammable Liquid, N.O.S., 3, UN1993, II ERG #27	XX1	DF	XXXX5	G	D001
c.	X	WASTE Flammable Liquids, N.O.S., 3, UN1993, II ERG #27	XX13	DM	XXX65	G	D001
d.	X	RQ, WASTE Mercury, 8, UN2809, III ERG #60	XX1	DM	XXX5	G	D009 ~~D015~~ (PM)
e.	X	Poisonous Liquids, N.O.S., 6.1, UN2810, II, (sulfides) (Tentative name based on Finger Print analysis) ERG #55	XX1	DF	XXX5	G	X900 ~~NONE~~
f.	X	Poisonous Liquids, N.O.S., 6.1, UN2810, III ERG #55 (Tentative name based on negative Finger Print analysis)	XX2	DF	XXX10	G	X900 ~~NONE~~
g.	X	Corrosive Solids, N.O.S., 8, UN1759, II ERG #60	XX1	DM	XXX55	G	X910 ~~NONE~~ (12)
h.		NON-REGULATED MATERIAL, NONE, NONE	XX1	DM	XXX55	G	X910
i.							

S. Additional Descriptions for Materials Listed Above
a.) (L,I,E) BD7901, D001, 15x5 DM, MB 1-15
b.) (L,I,E) BD7901, D035, 1x5DM X1400 DF, MB-21
c.) (L,I,E) BD7901, D035, 13x5 DM, MB 16-20, 22-29
d.) (L,T) BD7907, D009, 1x5DM, MD-1 (NY STATE Handling Code "R" (Toxic)

T. Handling Codes for Wastes Listed Above
A. S01 D. S01 1-4, S01
B. S01 E. S01
C. S01 F. S01
100% PLC's G. S01

32. Special Handling Instructions and Additional Information
e.) (L,T) BD7904, 1x5 DF, GS-10
f.) (L) BD7904, 2x5 DF, GS 11,12
g.) (S,C) BD7906, 1x55DM, CC-12
h.) (S) BD7906, 1x55DM, CC-13

a-d: NY STATE Handling Code "B"
e-h: 100% PLC's
TWI; D. TONN.

125890

33. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Christopher Zeliff

Signature: Christopher Zeliff

Date: Month 04 Day 21 Year 93

34. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name:

Signature:

Date: Month Day Year

35. Discrepancy Indication Space

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
	NYD131316851	1	(800) 483-5718	000540188 FLE

5. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590
Generator's Phone: 516 338-2303

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Clean Harbors Env Services Inc — U.S. EPA ID Number: MAD032222250

7. Transporter 2 Company Name: [illegible] — U.S. EPA ID Number: [illegible]

8. Designated Facility Name and Site Address
Spring Grove Resource Recovery Inc
4879 Spring Grove Avenue
Cincinnati, OH, 45232
Facility's Phone: (513) 681-5738
U.S. EPA ID Number: OHD006816829

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
X	1. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II	01	DF	491	P	D002 D008	D005	D007 T
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: DAVID WALZAK — Signature: [illegible] — Month: 09 Day: 07 Year: 07

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: MANUEL GARCIA — Signature: [illegible] — Month: 09 Day: 07 Year: 07
Transporter 2 Printed/Typed Name: Calvin Bowen — Signature: [illegible] — Month: 09 Day: 07 Year: 07

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:
SEP 26 2007
EHS DEPARTMENT
18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. H141 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: [illegible] — Signature: [illegible] — Month Day Year

GENERATOR — INT'L — TRANSPORTER — DESIGNATED FACILITY

EPA Form 8700-22 (Rev. 3-05). Previous editions are obsolete. DESIGNATED FACILITY TO GENERATOR

P2SUL007641

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
N Y D 1 3 1 3 1 8 8 5 1	1	(800) 483-3718	000540188 FLE

GENERATOR

5. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590
Generator's Phone: 516 338-2303

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name
Clean Harbors Env Services Inc

U.S. EPA ID Number
M A D 0 3 8 3 2 2 7 5 0

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address
Spring Grove Resource Recovery Inc
4979 Spring Grove Avenue
Cincinnati, OH, 45232
Facility's Phone: (513) 681-5738

U.S. EPA ID Number
O H D 0 0 8 1 0 5 2 2

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
X	1 WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II	01	DF	11	P	D002 D008		D007 T
	2.							
	3.							
	4.							

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I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name | Signature | Month | Day | Year

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name | Signature | Month | Day | Year

Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) | U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name | Signature | Month | Day | Year

CleanHarbors®
ENVIRONMENTAL SERVICES, INC.

Land Disposal Restriction Notification Form

Date: 09 / 06 / 2007

MANIFEST INFORMATION

Generator: Sulzer Metco US Inc
Address: 1101 Prospect Avenue
Westbury, NY 11590
EPA ID#: N Y D 1 3 1 3 1 8 6 5 1

Manifest No
000540188FLE
Sales Order No: D31598091
Manifest Document No:

LINE ITEM INFORMATION

Line Item:	Page No:	Profile No:	Treatability Group:	LDR Disposal Category:
1	1	CH189142	NON- WASTEWATER	2 : This is subject to LDR.

EPA Waste Codes	EPA Waste Subcategory
D002	Corrosive Characteristic
D006	Toxicity characteristic for Cadmium
D007	Toxicity Characteristic for Chromium
D008	Toxicity Characteristic for Lead

LDR Chemical Data

Chemical	Underlying Hazardous Constituents	Constituents of Concern	Contaminants Subject to Treatment
CADMIUM	Y	N	N
Chromium	Y	N	N
LEAD	Y	N	N

Certification	Applies to Manifest Line Items
Pursuant to 40 CFR 268.7(a), I hereby notify that this shipment contains waste restricted under 40 CFR Part 268.	1

CleanHarbors
ENVIRONMENTAL SERVICES, INC.

Land Disposal Restriction Notification Form

Date: 09 / 06 / 2007

MANIFEST INFORMATION

Generator: Sulzer Metco US Inc
Address: 1101 Prospect Avenue
Westbury, NY 11590
EPA ID#: N Y D 1 3 1 3 1 8 6 5 1

Manifest No
000540188FLE
Sales Order No: D31598091
Manifest Document No:

Waste analysis data, where available, is attached

Signature: [illegible]
Print Name: DAVID WALZAK
Title: Facilities Tech
Date: 9/7/07

Hazardous Waste No. 3	Hazardous Waste No. 4	Hazardous Waste No. 5
NA	NA	NA
01	01	01
02	02	02
03	03	03
01	01	01
02	02	02
01	01	01
02	02	02

PERKIN ELMER

The Perkin-Elmer Corporation
Metco Division
1101 Prospect Avenue — PO Box 1006
Westbury, New York 11590-0201
Phone (516) 334-1300
Fax (516) 338-2477
RCA 229913

February 28, 1994

Local Emergency Planning Committee
c/o Civil Preparedness Office
140 15th Street
Mineola, NY 11501

Ref: SARA TITLE III - Tier II Reports

Dear Sir/Madam:

Enclosed please find the SARA TITLE III - Tier II Reports for our three facilities.

If we could be of further assistance, please contact me.

Sincerely,

Joseph Macri
Manager Facilities

JM:amm
Enclosures
cc: A.B. Mazzone
C.L. Conroy

PERKIN ELMER

The Perkin-Elmer Corporation
Metco Division
1101 Prospect Avenue — PO Box 1006
Westbury, New York 11590-0201
Phone (516) 334-1300
Fax (516) 338-2477
PCA 229913

February 28, 1994

New York Emergency Response Commission
New York State Department of Environmental
Conservation
Bureau of Spill Prevention & Response
50 Wolf Road
Room 326
Albany, NY 12233-3510

Ref: SARA TITLE III - Tier II Reports

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Joseph Macri
Manager Facilities

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Enclosures
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C.L. Conroy

PERKIN ELMER

The Perkin-Elmer Corporation
Metco Division
1101 Prospect Avenue — PO Box 1006
Westbury New York 11590-0201
Phone (516) 334-1300
Fax (516) 338-2477
RCA 229913

February 28, 1994

Fire Chief
Westbury Fire Department
Maple Avenue
Westbury, NY 11590

Ref: SARA TITLE III - Tier II Reports

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Joseph Macri
Manager Facilities

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Enclosures
cc: A.B. Mazzone
C.L. Conroy

PERKIN ELMER

The Perkin-Elmer Corporation
Metco Division
1101 Prospect Avenue — PO Box 1006
Westbury New York 11590-0201
Phone (516) 334-1300
Fax (516) 338-2477
RCA 229913

February 28, 1994

Fire Chief
Syosset Fire Department
Cold Spring Road
Syosset, NY 11791

Ref: SARA TITLE III - Tier II Reports

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Enclosed please find the SARA TITLE III - Tier II Reports for our three facilities.

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Joseph Macri
Manager Facilities

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Enclosures
cc: A.B. Mazzone
C.L. Conroy

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The Perkin-Elmer Corporation
Metco Division
1101 Prospect Avenue — PO Box 1006
Westbury New York 11590-0201
Phone (516) 334-1300
Fax (516) 338-2477
RCA 229913

February 28, 1994

Fire Chief
Hicksville Fire Department
E. Marie Street
Hicksville, NY 11801

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Joseph Macri
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C.L. Conroy

PERKIN ELMER

The Perkin-Elmer Corporation
Metco Division
1101 Prospect Avenue — PO Box 1006
Westbury New York 11590-0201
Phone (516) 334-1300
Fax (516) 338-2477
RCA 229913

February 28, 1994

Environmental Protection Agency
P.O. Box 70266
Washington, DC 20024-0266

Ref: SARA TITLE III - Tier II Reports

Dear Sir/Madam:

Enclosed please find the SARA TITLE III - Tier II Reports for our three facilities.

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Joseph Macri
Manager Facilities

JM:amm
Enclosures
cc: A.B. Mazzone
C.L. Conroy

PERKIN ELMER

The Perkin-Elmer Corporation
Metco Division
1101 Prospect Avenue — PO. Box 1006
Westbury New York 11590-0201
Phone (516) 334-1300
Fax (516) 338-2477
RCA 229913

February 28, 1994

State Emergency Response Commission
c/o State Emergency Management Office
Building 22, State Campus
Albany, NY 12226-5000

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Sincerely,

Joseph Macri
Manager Facilities

JM:amm
Enclosures
cc: A.B. Mazzone
C.L. Conroy

Form Approved OMB No 2050 0072

Tier Two
EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name PERKIN-ELMER CORPORATION METCO DIVISION
Street 1101 PROSPECT AVENUE
City WESTBURY County NASSAU State NY Zip 11590
SIC Code 3542 Dun & Brad Number 05-773-1663

FOR OFFICIAL USE ONLY — ID # — Date Received

Owner/Operator Name

Name JOSEPH MACRI Phone 516 334-1300
Mail Address 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact

Name JOSEPH MACRI Title MANAGER FACILITIES
Phone 516 334-1300 EXT. 2374 24 Hr Phone 800 424-9300
CHEMTREC
Name Title
Phone 24 Hr Phone

Important Read all instructions before completing form

Reporting Period From January 1 to December 31 19 93

[X] Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7429 90 5 Trade Secret [ ] Chem Name ALUMINUM Check all that apply: Pure [X] Mix [X] Solid [X] Liquid [ ] Gas [ ] EHS [ ] EHS Name	[X] Fire [ ] Sudden Release of Pressure [X] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	Container Type N, Pressure 1, Temperature 4 STOCK WAREHOUSE	[ ]
CAS 1344 28 1 Trade Secret [ ] Chem Name ALUMINUM OXIDE Check all that apply: Pure [X] Mix [X] Solid [X] Liquid [ ] Gas [ ] EHS [ ] EHS Name	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	Container Type N, Pressure 1, Temperature 4 STOCK WAREHOUSE	[ ]
CAS 7439 89 6 Trade Secret [ ] Chem Name IRON Check all that apply: Pure [X] Mix [X] Solid [X] Liquid [ ] Gas [ ] EHS [ ] EHS Name	[X] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	Container Type N, Pressure 1, Temperature 4 STOCK WAREHOUSE	[ ]

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 2 and that based on my inquiry of those individuals responsible for obtaining the information I believe that the submitted information is true accurate and complete

JOSEPH MACRI MANAGER FACILITIES — Name and official title of owner operator OR owner operator s authorized representative
Signature: Joseph Macri
Date signed: 02-28-94

Optional Attachments

[ ] I have attached a site plan
[ ] I have attached a list of site coordinate abbreviations
[ ] I have attached a description of dikes and other safeguard measures

Form Approved OMB No 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: PERKIN-ELMER CORPORATION METCO DIVISION
Street: 1101 PROSPECT AVENUE
City: WESTBURY County: NASSAU State: NY Zip: 11590
SIC Code: 3542 Dun & Brad Number: 05-773-1663

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name
Name: JOSEPH MACRI Phone: 516 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact
Name: JOSEPH MACRI Title: MANAGER FACILITIES
Phone: 516 334-1300 EXT. 2374 24 Hr Phone: 800 424-9300 CHEMTREC
Name: Title:
Phone: 24 Hr Phone:

Important Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 93

[X] Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7440 02 0 Trade Secret [ ] Chem Name NICKEL Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 STOCK WAREHOUSE	[ ]
CAS Trade Secret [ ] Chem Name Check all that apply: [ ] Pure [ ] Mix [ ] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [ ] Immediate (acute) [ ] Delayed (chronic)	Max. Daily Amount (code) Avg. Daily Amount (code) No. of Days On-site (days)		[ ]
CAS Trade Secret [ ] Chem Name Check all that apply: [ ] Pure [ ] Mix [ ] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [ ] Immediate (acute) [ ] Delayed (chronic)	Max. Daily Amount (code) Avg. Daily Amount (code) No. of Days On-site (days)		[ ]

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JOSEPH MACRI MANAGER FACILITIES — Joseph Macri — 02-28-94
Name and official title of owner operator OR owner operator's authorized representative — Signature — Date signed

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[ ] I have attached a description of dikes and other safeguard measures

Form Approved OMB No 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: PERKIN-ELMER CORPORATION METCO DIVISION
Street: 220 MILLER PLACE
City: HICKSVILLE County: NASSAU State: NY Zip: 11801
SIC Code: 3999 Dun & Brad Number: 05-773-1663

FOR OFFICIAL USE ONLY — ID #: ____ Date Received: ____

Owner/Operator Name

Name: JOSEPH MACRI Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact

Name: JOSEPH MACRI Title: MANAGER FACILITIES
Phone: (516) 334-1300 EXT. 2374 24 Hr Phone: (800) 424-9300
CHEMTREC
Name: ____ Title: ____
Phone: ( ) ____ 24 Hr Phone: ( ) ____

Important Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19 93

[X] Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) — Storage Locations	Optional
CAS 7440-02-0 Trade Secret [ ] Chem Name: NICKEL Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name: ____	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 WAREHOUSE, PRODUCTION FLOOR N 1 4 PRODUCTION FLOOR R 1 4 PRODUCTION FLOOR - HARDENED STEEL HOPPERS E 1 4 WAREHOUSE, PRODUCTION FLOOR I 1 4 PRODUCTION FLOOR	[ ]
CAS 7440-47-3 Trade Secret [ ] Chem Name: CHROMIUM Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name: ____	[X] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 WAREHOUSE, PRODUCTION FLOOR N 1 4 PRODUCTION FLOOR R 1 4 PRODUCTION FLOOR - HARDENED STEEL HOPPERS E 1 4 WAREHOUSE, PRODUCTION FLOOR I 1 4 PRODUCTION FLOOR	[ ]
CAS 7440-48-4 Trade Secret [ ] Chem Name: COBALT Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name: ____	[X] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 WAREHOUSE, PRODUCTION FLOOR N 1 4 PRODUCTION FLOOR R 1 4 PRODUCTION FLOOR - HARDENED STEEL HOPPERS E 1 4 WAREHOUSE, PRODUCTION FLOOR I 1 4 PRODUCTION FLOOR	[ ]

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JOSEPH MACRI — MANAGER FACILITIES — Joseph Macri — 02-28-94

Name and official title of owner/operator OR owner/operator's authorized representative — Signature — Date signed

Optional Attachments

[ ] I have attached a site plan
[ ] I have attached a list of site coordinate abbreviations
[ ] I have attached a description of dikes and other safeguard measures

Form Approved OMB No 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: PERKIN-ELMER CORPORATION METCO DIVISION
Street: 220 MILLER PLACE
City: HICKSVILLE County: NASSAU State: NY Zip: 11801
SIC Code: 3399 Dun & Bradstreet Number: 05-773-1663

FOR OFFICIAL USE ONLY — ID #: ____ Date Received: ____

Owner/Operator Name

Name: JOSEPH MACRI Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact

Name: JOSEPH MACRI Title: MANAGER FACILITIES
Phone: (516) 334-1300 EXT. 2374 24 Hr Phone: (800) 424-9300 CHEMTREC
Name: ____ Title: ____
Phone: ( ) ____ 24 Hr Phone: ( ) ____

Important Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19 93

[X] Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) — Storage Locations	Optional
CAS 7429-90-5; Trade Secret [ ] Chem Name: ALUMINUM Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name:	[X] Fire [ ] Sudden Release of Pressure [X] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 WAREHOUSE, PRODUCTION FLOOR N 1 4 PRODUCTION FLOOR R 1 4 PRODUCTION FLOOR - HARDENED STEEL HOPPERS E 1 4 PRODUCTION FLOOR I 1 4 PRODUCTION FLOOR	[ ]
CAS 1344-25-1; Trade Secret [ ] Chem Name: ALUMINUM OXIDE Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name:	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [X] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 WAREHOUSE, PRODUCTION FLOOR N 1 4 PRODUCTION FLOOR R 1 4 PRODUCTION FLOOR - HARDENED STEEL HOPPERS E 1 4 PRODUCTION FLOOR I 1 4 PRODUCTION FLOOR	[ ]
CAS 1314-23-4; Trade Secret [ ] Chem Name: ZIRCONIUM OXIDE Check all that apply: [X] Pure [X] Mix [X] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name:	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [X] Immediate (acute) [ ] Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 WAREHOUSE, PRODUCTION FLOOR N 1 4 PRODUCTION FLOOR R 1 4 PRODUCTION FLOOR - HARDENED STEEL HOPPERS E 1 4 PRODUCTION FLOOR I 1 4 PRODUCTION FLOOR	[ ]

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JOSEPH MACRI — MANAGER FACILITIES — Joseph Macri — 02-28-94

Name and official title of owner/operator OR owner/operator's authorized representative — Signature — Date signed

Optional Attachments

[ ] I have attached a site plan
[ ] I have attached a list of site coordinate abbreviations
[ ] I have attached a description of dikes and other safeguard measures

17. (Continued)

q. Rate of process sludge discharge from this operation:

volume: none gal per batch
weight: _____ lbs per batch
frequency: _____ batches per _____
% solids: _____

r. If make-up water volume does not equal discharge volume, account for method of loss (such as evaporation, drag out, or wet sludge removal from recycle loop) and indicate ultimate destination (e.g., offsite hazardous waste landfill, onsite hazardous waste incinerator). The total rate of loss should equal the make-up water flow to the operation minus the rate of water discharge from the operation.

Method of Loss	Rate of Loss (include units)	Ultimate Destination
Evaporation	E 80 gallons/2-3 months	

s. Are process water additives used in this operation? Yes ✓ No _
If yes, indicate below the concentration of those additives in process water (example additives: biocide, detergent, cleaning agent, antifoaming agent, alkali, emulsified oil). For each additive also indicate the general purpose (use) and chemical name. (If chemical name is not known, provide the trade name.)

Additive	Trade Name	Chemical Name	Purpose or Use	Concentration of Additive in Solution ~~(mg/l)~~ %
EXAMPLE: cleaning agent	METCLENZ	sodium gluconate	rust removal	250
Cutting fluid	Proline DEI	Hydrotreated mineral oil and Petroleum hydrocarbons	lubricant/coolant	.03

ARCADIS GERAGHTY&MILLER

ARCADIS Geraghty & Miller, Inc.
88 Duryea Road
Melville
New York 11747
Tel 516 249 7600
Fax 516 249 7610

Richard G. Rudolf, Esq.
Sulzer Technology Corporation
555 5th Avenue, 7th Floor
New York, NY 10017

ENVIRONMENTAL

Subject:
Investigation and Remediation of Sump 3 at the 325 Duffy Avenue Facility, Sulzer Metco (US) Inc., Hicksville, New York.

20 July 1999

Contact:
Glenn Netuschil

Extension:
(516) 391-5207

Dear Mr. Rudolf:

ARCADIS Geraghty & Miller, Inc. was retained by Sulzer Metco (US) Inc. to remediate Sump 3 located at the 325 Duffy Avenue facility in Hicksville, New York. The remediation of Sump 3 consisted of the excavation and disposal of soil and concrete within the sump, backfilling it with clean fill, and restoration of the concrete floor. In addition to the work at Sump 3, Sump 1 was backfilled with clean fill and concrete, and the former Sump 2 area concrete floor was restored, thereby completing all remaining sump restoration activities on site. ARCADIS Geraghty & Miller retained Brookside Environmental, Inc. to perform the restoration activities. The following summarizes the work completed.

Soil impacted by priority pollutant metals was excavated on Monday, June 14, 1999. The original Sump 3 excavation was 8 feet by 8 feet with a depth of 7 feet below floor slab. Four endpoint samples from the sidewalls and one endpoint sample from the bottom were collected from the excavation area and were analyzed by Ecotest Laboratories using United States Environmental Protection Agency (USEPA) Method 6010 for priority pollutant metals. Analytical results were compared to New York State Department of Environmental Conservation (NYSDEC) Technical and Administrative Guidance Memorandum (TAGM) 4046 Criteria and Eastern USA Background.

Analytical data for soil samples collected on June 14, 1999, exhibited exceedances of either the TAGM 4046 Criteria or Eastern USA Background for at least one compound in each of the samples collected. Analytical results for the excavation performed on June 14, 1999, are summarized in Table 1, exceedances are shown in bold.

As a result of the June 14, 1999, endpoint sampling, excavation at Sump 3 was expanded approximately 1.5 feet in each direction laterally and 1.5 feet in depth on Friday, June 18, 1999. Additional endpoint samples from the sidewalls and bottom were collected and analyzed for priority pollutant metals. Approximately 32 tons of impacted soil was excavated from the Sump 3 area. Prior to disposal of the

excavated soil, waste characterization samples were collected and analyzed for Toxicity Characteristics Leaching Procedure (TCLP) metals, TCLP volatile organics, TCLP semi-volatile organics, reactivity, ignitibility, and total petroleum hydrocarbons (TPH).

The analytical data for soil samples collected on June 18, 1999, exhibited no exceedances of either the TAGM 4046 Criteria or Eastern USA Background. Sump 3 was then backfilled with certified clean fill and restored. Analytical results for the excavation performed on June 18, 1999, are summarized in Table 2. The results of the waste characterization sample confirmed the waste to be non-hazardous. All laboratory analytical data sheets and a copy of the non-hazardous waste manifest are provided in Appendix A and B, respectively.

If you have any questions or comments please feel free to call Glenn Netuschil at (516) 391-5207.

Sincerely,

ARCADIS Geraghty & Miller, Inc.

Glenn Netuschil

Glenn Netuschil, P.E.
Project Engineer/Project Manager

Thomas Lobasso
Vice President

Copies:
Mike Lydon, Sulzer Metco (US), Inc.
Tom Eng, ARCADIS Geraghty & Miller

ARCADIS GERAGHTY&MILLER

Table 1. Analytical Results of Soil Samples Collected June 14, 1999 in Sump 3, Maintenance Room, Sulzer Metco, 325 Duffy Avenue, Hicksville, New York.

Analytical Parameters	New York State Recommended Soil Cleanup Objectives[1] (mg/kg)	USGS Site Background for Eastern U.S. Estimated Arithmetic Mean (mg/kg)	**Sample ID:** **Sample Interval:** **Date Sampled:** **Units:**	SW-01 Sidewall 6/14/99 (mg/kg)	SW-02 Sidewall 6/14/99 (mg/kg)	SW-03 Sidewall 6/14/99 (mg/kg)	SW-04 Sidewall 6/14/99 (mg/kg)	SB-01 Bottom 6/14/99 (mg/kg)
Priority Pollutant Metals								
Antimony	SB	0.76		<0.6	<0.6	<0.5	<0.5	<0.5
Arsenic	7.5	7.4		1.2	2.5	0.66	0.96	0.73
Beryllium	0.16	0.85		0.18	0.21	0.1	0.12	0.1
Cadmium	10	--		<0.6	<0.6	<0.5	1.8	<0.5
Chromium	50	52		**100**	**73**	21	36	45
Copper	25	22		19	19	**40**	25	12
Lead	--	17		**25**	16	11	8.7	13
Mercury	SB	0.12		0.03	0.1	0.0054	0.01	0.0079
Nickel	13	18		18	13	<1	**72**	**21**
Selenium	2	0.45		1.7	2	<0.4	<0.4	0.67
Silver	SB	--		<0.6	<0.6	0.5	0.5	<0.5
Thallium	SB	--		<1.5	<1.5	<1	<1	<1
Zinc	20	52		16	17	4.6	**33**	12

NOTES:

Analysis performed by Ecotest Laboratories, North Babylon, New York using USEPA Method 6010 (7000 series) for Priority Pollutant Metals.

Bold entries represent concentrations above either standard.

USGS	United States Geological Survey
mg/kg	Milligrams per kilogram.
1	NYSDEC's Technical and Administrative Guidance Memorandum (TAGM) #4046
SB	Site Background
--	Criteria not available.

ARCADIS GERAGHTY&MILLER

Table 2. Analytical Results of Soil Samples Collected June 18, 1999 in Sump 3, Maintenance Room, Sulzer Metco, 325 Duffy Avenue, Hicksville, New York.

Analytical Parameters	New York State Recommended Soil Cleanup Objectives[1] (mg/kg)	USGS Site Background for Eastern U.S. Estimated Arithmetic Mean (mg/kg)	**Sample ID:** **Sample Interval:** **Date Sampled:** **Units:**	SW-01B Sidewall 6/18/99 (mg/kg)	SW-02B Sidewall 6/18/99 (mg/kg)	SW-03B Sidewall 6/18/99 (mg/kg)	SW-04B Sidewall 6/18/99 (mg/kg)	SB-01B Bottom 6/18/99 (mg/kg)
Priority Pollutant Metals								
Antimony	SB	0.76		<0.5	<0.5	<0.5	<0.5	<0.5
Arsenic	7.5	7.4		0.80	0.69	<0.5	1.1	0.80
Beryllium	0.16	0.85		0.18	0.11	<0.1	0.15	<0.1
Cadmium	10	--		<0.5	<0.5	<0.5	<0.5	<0.5
Chromium	50	52		4.7	23	14	4.7	31
Copper	25	22		3.1	7.9	1.7	3.4	4.6
Lead	--	17		1.3	7.7	4.9	1.9	17
Mercury	SB	0.12		<0.005	<0.005	<0.005	<0.005	0.0072
Nickel	13	18		2.9	8.2	1.7	3.0	6.4
Selenium	2	0.45		<0.4	<0.4	<0.4	<0.4	<0.4
Silver	SB	--		<0.1	<0.1	<0.1	<0.1	<0.1
Thallium	SB	--		<1	<1	<1	<1	<1
Zinc	20	52		5.5	8.7	2.2	6.2	5.2

NOTES:
Analysis performed by Ecotest Laboratories, North Babylon, New York using USEPA Method 6010 (7000 series) for Priority Pollutant Metals.
Bold entries represent concentrations above either standard.

USGS	United States Geological Survey
mg/kg	Milligrams per kilogram.
1	NYSDEC's Technical and Administrative Guidance Memorandum (TAGM) #4046
SB	Site Background
--	Criteria not available.

ECOTEST LABORATORIES, INC. *ENVIRONMENTAL TESTING*

377 SHEFFIELD AVE. • N. BABYLON, N.Y. 11703 • (516) 422-5777 • FAX (516) 422-5770

LAB NO.992525.01 06/28/99

Arcadis, Geraghty & Miller, Incorporated
88 Duryea Road
Melville, NY 11747
ATTN: William Holubowich

SOURCE OF SAMPLE: Sylzer Metro, NY 001110.0004
COLLECTED BY: Client DATE COL'D:06/14/99 RECEIVED:06/15/99

SAMPLE: Soil Sample, SW-01

ANALYTICAL PARAMETERS			ANALYTICAL PARAMETERS
Antimony as Sb	mg/Kg	<0.6	
Arsenic as As	mg/Kg	1.2	
Beryllium as Be	mg/Kg	0.18	
Cadmium as Cd	mg/Kg	<0.6	
Chromium as Cr	mg/Kg	100	
Copper as Cu	mg/Kg	19	
Lead as Pb	mg/Kg	25	
Mercury as Hg	mg/Kg	0.030	
Nickel as Ni	mg/Kg	18	
Selenium as Se	mg/Kg	1.7	
Silver as Ag	mg/Kg	<0.6	
Thallium as Tl	mg/Kg	<1.5	
Zinc as Zn	mg/Kg	16	
% Solids		90	

cc:

REMARKS: Results reported on dry weight basis.

DIRECTOR

rn= 15454 NYSDOH ID# 10320

ECOTEST LABORATORIES, INC. *ENVIRONMENTAL TESTING*

377 SHEFFIELD AVE. • N. BABYLON, N.Y. 11703 • (516) 422-5777 • FAX (516) 422-5770

LAB NO.992525.02 06/28/99

Arcadis, Geraghty & Miller, Incorporated
88 Duryea Road
Melville, NY 11747
ATTN: William Holubowich

SOURCE OF SAMPLE: Sylzer Metro, NY 001110.0004
COLLECTED BY: Client DATE COL'D:06/14/99 RECEIVED:06/15/99

SAMPLE: Soil Sample, SW-02

ANALYTICAL PARAMETERS			ANALYTICAL PARAMETERS
Antimony as Sb	mg/Kg	<0.6	
Arsenic as As	mg/Kg	2.5	
Beryllium as Be	mg/Kg	0.21	
Cadmium as Cd	mg/Kg	<0.6	
Chromium as Cr	mg/Kg	73	
Copper as Cu	mg/Kg	19	
Lead as Pb	mg/Kg	16	
Mercury as Hg	mg/Kg	0.10	
Nickel as Ni	mg/Kg	13	
Selenium as Se	mg/Kg	2.0	
Silver as Ag	mg/Kg	<0.6	
Thallium as Tl	mg/Kg	<1.5	
Zinc as Zn	mg/Kg	17	
% Solids		88	

cc:

REMARKS: Results reported on dry weight basis.

DIRECTOR

rn= 15455 NYSDOH ID# 10320

ECOTEST LABORATORIES, INC. ENVIRONMENTAL TESTING

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LAB NO.992525.03 06/28/99

Arcadis, Geraghty & Miller, Incorporated
88 Duryea Road
Melville, NY 11747
ATTN: William Holubowich

SOURCE OF SAMPLE: Sylzer Metro, NY 001110.0004
COLLECTED BY: Client DATE COL'D:06/14/99 RECEIVED:06/15/99

SAMPLE: Soil Sample, SW-03

ANALYTICAL PARAMETERS		
Antimony as Sb	mg/Kg	<0.5
Arsenic as As	mg/Kg	0.66
Beryllium as Be	mg/Kg	0.11
Cadmium as Cd	mg/Kg	<0.5
Chromium as Cr	mg/Kg	21
Copper as Cu	mg/Kg	4.0
Lead as Pb	mg/Kg	11
Mercury as Hg	mg/Kg	0.0054
Nickel as Ni	mg/Kg	<1
Selenium as Se	mg/Kg	<0.4
Silver as Ag	mg/Kg	<0.5
Thallium as Tl	mg/Kg	<1
Zinc as Zn	mg/Kg	4.8
% Solids		97

ANALYTICAL PARAMETERS

cc:

REMARKS: Results reported on dry weight basis.

DIRECTOR

rn= 15456 NYSDOH ID# 10320

ECOTEST LABORATORIES, INC. *ENVIRONMENTAL TESTING*

377 SHEFFIELD AVE. • N. BABYLON, N.Y. 11703 • (516) 422-5777 • FAX (516) 422-5770

LAB NO.992525.04 06/28/99

Arcadis, Geraghty & Miller, Incorporated
88 Duryea Road
Melville, NY 11747
ATTN: William Holubowich

SOURCE OF SAMPLE: Sylzer Metro, NY 001110.0004
COLLECTED BY: Client DATE COL'D:06/14/99 RECEIVED:06/15/99

SAMPLE: Soil Sample, SW-04

ANALYTICAL PARAMETERS			ANALYTICAL PARAMETERS
Antimony as Sb	mg/Kg	<0.5	
Arsenic as As	mg/Kg	0.96	
Beryllium as Be	mg/Kg	0.12	
Cadmium as Cd	mg/Kg	1.8	
Chromium as Cr	mg/Kg	36	
Copper as Cu	mg/Kg	25	
Lead as Pb	mg/Kg	8.7	
Mercury as Hg	mg/Kg	0.010	
Nickel as Ni	mg/Kg	72	
Selenium as Se	mg/Kg	<0.4	
Silver as Ag	mg/Kg	<0.5	
Thallium as Tl	mg/Kg	<1	
Zinc as Zn	mg/Kg	33	
% Solids		97	

cc:

REMARKS: Results reported on dry weight basis.

DIRECTOR

rn= 15457 NYSDOH ID# 10320

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LAB NO.992525.05 06/28/99

Arcadis, Geraghty & Miller, Incorporated
88 Duryea Road
Melville, NY 11747
ATTN: William Holubowich

SOURCE OF SAMPLE: Sylzer Metro, NY 001110.0004
COLLECTED BY: Client DATE COL'D:06/14/99 RECEIVED:06/15/99

SAMPLE: Soil Sample, SB-01

ANALYTICAL PARAMETERS			ANALYTICAL PARAMETERS
Antimony as Sb	mg/Kg	<0.5	
Arsenic as As	mg/Kg	0.73	
Beryllium as Be	mg/Kg	0.10	
Cadmium as Cd	mg/Kg	<0.5	
Chromium as Cr	mg/Kg	45	
Copper as Cu	mg/Kg	12	
Lead as Pb	mg/Kg	13	
Mercury as Hg	mg/Kg	0.0079	
Nickel as Ni	mg/Kg	21	
Selenium as Se	mg/Kg	0.67	
Silver as Ag	mg/Kg	<0.5	
Thallium as Tl	mg/Kg	<1	
Zinc as Zn	mg/Kg	12	
% Solids		96	

cc:

REMARKS: Results reported on dry weight basis.

DIRECTOR

rn= 15458 NYSDOH ID# 10320

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LAB NO.992525.06 06/28/99

Arcadis, Geraghty & Miller, Incorporated
88 Duryea Road
Melville, NY 11747
ATTN: William Holubowich

SOURCE OF SAMPLE: Sylzer Metro, NY 001110.0004
COLLECTED BY: Client DATE COL'D:06/14/99 RECEIVED:06/15/99

SAMPLE: Soil Sample, INP

ANALYTICAL PARAMETERS			ANALYTICAL PARAMETERS
Carbon Tetrachloride	ug/L*	<1	
Chlorobenzene	ug/L*	<1	
Chloroform	ug/L*	1	
1,4 Dichlorobenzene	ug/L*	<2	
1,2 Dichloroethane	ug/L*	<1	
1,1 Dichloroethene	ug/L*	<1	
Methyl Ethyl Ketone	ug/L*	<20	
Tetrachloroethene	ug/L*	<1	
Trichloroethylene	ug/L*	<1	
Vinyl Chloride	ug/L*	<1	
Benzene	ug/L*	<1	

cc:

REMARKS: * Analysis performed on TCLP Leachate according to USEPA Method 1311.

DIRECTOR

rn= 15459 NYSDOH ID# 10320

ECOTEST LABORATORIES, INC. *ENVIRONMENTAL TESTING*

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LAB NO:992525.06 06/28/99

Arcadis, Geraghty & Miller, Incorporated
88 Duryea Road
Melville, NY 11747
ATTN: William Holubowich

SOURCE OF SAMPLE: Sylzer Metro, NY 001110.0004
COLLECTED BY: Client DATE COL'D:06/14/99 RECEIVED:06/15/99

SAMPLE: Soil Sample, INP
UNITS: ug/L*

ANALYTICAL PARAMETERS		ANALYTICAL PARAMETERS
2-Methylphenol (o-cresol)	<10	
3-Methylphenol (m-cresol)	<10	
4-Methylphenol (p-cresol)	<10	
Pentachlorophenol	<100	
2,4,5-Trichlorophenol	<10	
2,4,6-Trichlorophenol	<10	
2,4-Dinitrotoluene	<10	
Hexachlorobenzene	<10	
Hexachlorobutadiene	<10	
Hexachloroethane	<10	
Nitrobenzene	<10	
Pyridine	<10	

cc:

REMARKS: * Analysis performed on TCLP Leachate according to USEPA Method 1311.
SVOCs by EPA Method 8270.

DIRECTOR

rn= 15460 NYSDOH ID# 10320

ECOTEST LABORATORIES, INC. *ENVIRONMENTAL TESTING*

377 SHEFFIELD AVE. • N. BABYLON, N.Y. 11703 • (516) 422-5777 • FAX (516) 422-5770

LAB NO.992525.06 06/28/99

Arcadis, Geraghty & Miller, Incorporated
88 Duryea Road
Melville, NY 11747
ATTN: William Holubowich

SOURCE OF SAMPLE: Sylzer Metro, NY 001110.0004
COLLECTED BY: Client DATE COL'D:06/14/99 RECEIVED:06/15/99

SAMPLE: Soil Sample, INP

ANALYTICAL PARAMETERS			ANALYTICAL PARAMETERS
Arsenic as As	mg/L*	<0.05	
Barium as Ba	mg/L*	<0.05	
Cadmium as Cd	mg/L*	<0.05	
Chromium as Cr	mg/L*	<0.05	
Lead as Pb	mg/L*	<0.05	
Mercury as Hg	mg/L*	<0.001	
Selenium as Se	mg/L*	<0.05	
Silver as Ag	mg/L*	<0.05	
Copper as Cu	mg/L*	0.24	
Zinc as Zn	mg/L*	0.47	

cc:

REMARKS: * Analysis performed on TCLP Leachate according to USEPA Method 1311.

DIRECTOR

ECOTEST LABORATORIES, INC. *ENVIRONMENTAL TESTING*

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LAB NO.992525.06 06/28/99

Arcadis, Geraghty & Miller, Incorporated
88 Duryea Road
Melville, NY 11747
ATTN: William Holubowich

SOURCE OF SAMPLE: Sylzer Metro, NY 001110.0004
COLLECTED BY: Client DATE COL'D:06/14/99 RECEIVED:06/15/99

SAMPLE: Soil Sample, INP

ANALYTICAL PARAMETERS			ANALYTICAL PARAMETERS
TotalPet.Hydro.(GC)	ug/Kg	4100	
% Solids		97	

cc:

REMARKS: Results reported on dry weight basis.
EPA Method 8015

DIRECTOR

rn= 15462 NYSDOH ID# 10320

ECOTEST LABORATORIES, INC. *ENVIRONMENTAL TESTING*

377 SHEFFIELD AVE. • N. BABYLON, N.Y. 11703 • (516) 422-5777 • FAX (516) 422-5770

LAB NO.992603.01 06/24/99

Arcadis, Geraghty & Miller, Incorporated
88 Duryea Road
Melville, NY 11747
ATTN: William Holubowich

SOURCE OF SAMPLE: Sulzer Metco
COLLECTED BY: Client DATE COL'D:06/18/99 RECEIVED:06/18/99

SAMPLE: Soil Sample, SW-01B, 1300

ANALYTICAL PARAMETERS			ANALYTICAL PARAMETERS
Antimony as Sb	mg/Kg	<0.5	
Arsenic as As	mg/Kg	0.80	
Beryllium as Be	mg/Kg	0.18	
Cadmium as Cd	mg/Kg	<0.5	
Chromium as Cr	mg/Kg	4.7	
Copper as Cu	mg/Kg	3.1	
Lead as Pb	mg/Kg	1.3	
Mercury as Hg	mg/Kg	<0.005	
Nickel as Ni	mg/Kg	2.9	
Selenium as Se	mg/Kg	<0.4	
Silver as Ag	mg/Kg	<0.1	
Thallium as Tl	mg/Kg	<1	
Zinc as Zn	mg/Kg	5.5	
% Solids		99	

cc:

REMARKS:

DIRECTOR

rn= 15901 NYSDOH ID# 10320

ECOTEST LABORATORIES, INC. *ENVIRONMENTAL TESTING*

377 SHEFFIELD AVE. • N. BABYLON, N.Y. 11703 • (516) 422-5777 • FAX (516) 422-5770

LAB NO.992603.02 06/24/99

Arcadis, Geraghty & Miller, Incorporated
88 Duryea Road
Melville, NY 11747
ATTN: William Holubowich

SOURCE OF SAMPLE: Sulzer Metco
COLLECTED BY: Client DATE COL'D:06/18/99 RECEIVED:06/18/99

SAMPLE: Soil Sample, SW-02B, 1315

ANALYTICAL PARAMETERS			ANALYTICAL PARAMETERS
Antimony as Sb	mg/Kg	<0.5	
Arsenic as As	mg/Kg	0.69	
Beryllium as Be	mg/Kg	0.11	
Cadmium as Cd	mg/Kg	<0.5	
Chromium as Cr	mg/Kg	23	
Copper as Cu	mg/Kg	7.9	
Lead as Pb	mg/Kg	7.7	
Mercury as Hg	mg/Kg	<0.005	
Nickel as Ni	mg/Kg	8.2	
Selenium as Se	mg/Kg	<0.4	
Silver as Ag	mg/Kg	<0.1	
Thallium as Tl	mg/Kg	<1	
Zinc as Zn	mg/Kg	8.7	
% Solids		99	

cc:

REMARKS:

DIRECTOR

rn= 15902 NYSDOH ID# 10320

ECOTEST LABORATORIES, INC. *ENVIRONMENTAL TESTING*

377 SHEFFIELD AVE. • N. BABYLON, N.Y. 11703 • (516) 422-5777 • FAX (516) 422-5770

LAB NO.992603.03 06/24/99

Arcadis, Geraghty & Miller, Incorporated
88 Duryea Road
Melville, NY 11747
ATTN: William Holubowich

SOURCE OF SAMPLE: Sulzer Metco
COLLECTED BY: Client DATE COL'D:06/18/99 RECEIVED:06/18/99

SAMPLE: Soil Sample, SW-03B, 1330

ANALYTICAL PARAMETERS			ANALYTICAL PARAMETERS
Antimony as Sb	mg/Kg	<0.5	
Arsenic as As	mg/Kg	<0.5	
Beryllium as Be	mg/Kg	<0.1	
Cadmium as Cd	mg/Kg	<0.5	
Chromium as Cr	mg/Kg	14	
Copper as Cu	mg/Kg	1.7	
Lead as Pb	mg/Kg	4.9	
Mercury as Hg	mg/Kg	<0.005	
Nickel as Ni	mg/Kg	1.7	
Selenium as Se	mg/Kg	<0.4	
Silver as Ag	mg/Kg	<0.1	
Thallium as Tl	mg/Kg	<1	
Zinc as Zn	mg/Kg	2.2	
% Solids		99	

cc:

REMARKS:

DIRECTOR

rn= 15903 NYSDOH ID# 10320

ECOTEST LABORATORIES, INC. *ENVIRONMENTAL TESTING*

377 SHEFFIELD AVE. • N. BABYLON, N.Y. 11703 • (516) 422-5777 • FAX (516) 422-5770

LAB NO.992603.04 06/24/99

Arcadis, Geraghty & Miller, Incorporated
88 Duryea Road
Melville, NY 11747
ATTN: William Holubowich

SOURCE OF SAMPLE: Sulzer Metco
COLLECTED BY: Client DATE COL'D:06/18/99 RECEIVED:06/18/99

SAMPLE: Soil Sample, SW-04B, 1340

ANALYTICAL PARAMETERS			ANALYTICAL PARAMETERS
Antimony as Sb	mg/Kg	<0.5	
Arsenic as As	mg/Kg	1.1	
Beryllium as Be	mg/Kg	0.15	
Cadmium as Cd	mg/Kg	<0.5	
Chromium as Cr	mg/Kg	4.7	
Copper as Cu	mg/Kg	3.4	
Lead as Pb	mg/Kg	1.9	
Mercury as Hg	mg/Kg	<0.005	
Nickel as Ni	mg/Kg	3.0	
Selenium as Se	mg/Kg	<0.4	
Silver as Ag	mg/Kg	<0.1	
Thallium as Tl	mg/Kg	<1	
Zinc as Zn	mg/Kg	6.2	
% Solids		99	

cc:

REMARKS:

DIRECTOR

rn= 15904 NYSDOH ID# 10320

ECOTEST LABORATORIES, INC. *ENVIRONMENTAL TESTING*

377 SHEFFIELD AVE. • N. BABYLON, N.Y. 11703 • (516) 422-5777 • FAX (516) 422-5770

LAB NO.992603.05 06/24/99

Arcadis, Geraghty & Miller, Incorporated
88 Duryea Road
Melville, NY 11747
ATTN: William Holubowich

SOURCE OF SAMPLE: Sulzer Metco
COLLECTED BY: Client DATE COL'D:06/18/99 RECEIVED:06/18/99

SAMPLE: Soil Sample, SB-01B, 1345

ANALYTICAL PARAMETERS			ANALYTICAL PARAMETERS
Antimony as Sb	mg/Kg	<0.5	
Arsenic as As	mg/Kg	0.80	
Beryllium as Be	mg/Kg	<0.1	
Cadmium as Cd	mg/Kg	<0.5	
Chromium as Cr	mg/Kg	31	
Copper as Cu	mg/Kg	4.6	
Lead as Pb	mg/Kg	17	
Mercury as Hg	mg/Kg	0.0072	
Nickel as Ni	mg/Kg	6.4	
Selenium as Se	mg/Kg	<0.4	
Silver as Ag	mg/Kg	<0.1	
Thallium as Tl	mg/Kg	<1	
Zinc as Zn	mg/Kg	5.2	
% Solids		97	

cc:

REMARKS:

DIRECTOR

rn= 15905 NYSDOH ID# 10320

ECOTEST LABORATORIES, INC. *ENVIRONMENTAL TESTING*

377 SHEFFIELD AVE. • N. BABYLON, N.Y. 11703 • (516) 422-5777 • FAX (516) 422-5770

LAB NO.992525.06 06/24/99

Arcadis, Geraghty & Miller, Incorporated
88 Duryea Road
Melville, NY 11747
ATTN: William Holubowich

SOURCE OF SAMPLE: Sulzer Metco, NY 001110.0004
COLLECTED BY: Client DATE COL'D:06/14/99 RECEIVED:06/15/99

SAMPLE: Soil Sample, INP

ANALYTICAL PARAMETERS			ANALYTICAL PARAMETERS
Reactive cyanide	mg/Kg	<2	
Sulfide as S	mg/Kg	<2	
pH (lab)	units	5.6	
Flash Point	deg C	>100	

cc:

REMARKS: Amended Report.

DIRECTOR

rm= 15915 NYSDOH ID# 10320

ATHENS HOCKING RECLAMATION CENTER
Location: U.S. Rt. 33 North, Nelsonville, Ohio 45764
Mailing Address:
Post Office Box 948, Logan, Ohio 43138

Number 169784 Date 6-30-99

IDENTIFICATION | WEIGHT

94440 lbs. Gross
31080 lbs. Tare
63360 lbs. Net
31.68

Commodity _____ @ _____ per lb.
Remarks: _____ Driver: On ☐ Off ☐
Load No. _____
Weigher _____
Shipper _____
Seller / Buyer _____
Address _____

Earthwatch
WASTE SYSTEMS, INC.
4950 Genesee Street
Suite 170
Buffalo, NY 14225
(716) 681-6433
Fax (716) 681-6165

0000217337

NON-HAZARDOUS SOLID WASTE MANIFEST

TRANSPORTER	DATE	TIME IN	OUT
Horwith Trucks, Inc. Northampton, PA	6-29-99		
	EWS # 5455		
TRUCK # 525	TRAILER # 77	99-437	

CONSIGNEE:	SHIPPER
ATHENS HOCKING RECLAMATION ROUTE 33 NELSONVILLE, OH 45764 PHONE # 740-385-6013	SULZER-METCO 325 DUFFY AVENUE HICKSVILLE, NY 11801

NO. PIECES	ARTICLES OR DESCRIPTION		WEIGHT
		WEIGHT IN	94440
1	TRUCKLOAD CONTAMINATED SOIL	WEIGHT OUT	31080
	Non-RCRA/Non-DOT Regulated	BILLED WEIGHT	63360
			31.68

SHIPPER SIGNATURE Robert Hester as agent for Sulzer Metco PRINT NAME Andrew J. Edgar ROBERT HESTER

DRIVER SIGNATURE _____ PRINT NAME _____

SPECIAL INSTRUCTIONS: Waste consists of soil contaminated with low levels of metals.

FOR APPROVAL:
CONSIGNEE PRINT NAME _____
CONSIGNEE SIGN HERE (NO INITIALS) _____

RECEIVED ABOVE MATERIAL IN GOOD CONDITION — FIRM _____ DATE 6-30-99 BY _____ TIME _____ ☐ AM ☐ PM

Solid waste being interpreted to mean only solid waste or waste containing animal and vegetable matter, rubbish, trash, debris, ashes and metal non-toxic sludge and other waste materials which is not a radioactive volatile, highly flammable explosive toxic or hazardous nature as listed.

The transporter herein named agrees to hold harmless and to indemnify EWS against all losses and claims as a result of shipment of any material not listed on this manifest.

1st Copy - Earthwatch 2nd Copy - Driver 3rd Copy - Land Fill 4th Copy Shipper

ATHENS — HOCKING RECLAMATION CENTER
Mailing Address: Post Office Box 946 • Logan, Ohio 43138
Phone: 740-385-6019 or 385-5531

WASTE RECORD

15

To comply with OAC 3745-27-08(M), all relevant information must be provided

Date 6-30-99 Time In 9:11 Time Out

Name of Hauler [redacted]

Address HUA WASH TRANS.

Telephone _____ Driver _____

License of Vehicle 99-4137

Type of Waste: (circle) Residential Municipal Commercial Industrial Asbestos

Agricultural Mining Other (specify) SOIL & GRAVEL

Waste: Yards _____ Tons 31.68 (attach weight slip)

Waste Generator: (if commercial or residential route, note it)

Name SULLIVAN - MATCH

Address _____

Telephone _____ Tipping Fees _____ Cash _____ Credit ✓

SOURCE OF WASTE: COUNTY HUNTSVILLE STATE NY.

COMPANY TO BILL FOR TIPPING FEES EARTH WATCH

The undersigned certifies that the material disposed of at the Athens-Hocking Reclamation Center as noted above is non-hazardous solid waste as defined by the Ohio Revised Code and Ohio Administrative Code.

If the waste material has been specifically approved for acceptance at this landfill by the submission of chemical analysis or other laboratory data, it is certified that this material conforms with the samples analyzed. If the waste material is asbestos, it is certified that the material has been properly packaged, labeled, and transported, and that the hauler will hold the landfill harmless from all claims, fines or penalties imposed upon the landfill operator for and violation of law or regulations for improper transportation, packaging, labeling or handling, prior to being put into the possession of the landfill operator.

All parties disposing of any waste at this landfill agree to fully indemnify the landfill operator for any and all claims, fines or penalties, including clean up costs, engineering fees and claims of any third parties, which may be caused, either directly or indirectly, by those parties bringing in waste materials to the landfill which are not permitted to be disposed of at this facility by limitations in any landfill permits or by the Ohio Solid Waste Laws and Regulations.

All parties disposing of any waste at the landfill or otherwise entering the premises agree to hold the landfill harmless and waive all claims for any personal injury or property damage to any vehicle or person entering the premises whether caused by an act or neglect of landfill personnel or equipment or by persons entering the landfill. This waiver will not discharge any intentional torts by landfill personnel.

R. Kent

Landfill Representative

169788

ARCADIS GERAGHTY & MILLER

Transmittal Letter

ARCADIS Geraghty & Miller, Inc.
88 Duryea Road
Melville
New York 11747
Tel 516 249 7600
Fax 516 249 7610

To:
Richard G. Rudolf, Esq.
Sulzer Technology Corporation
555 5th Avenue, 7th Floor
New York, NY 10017

Copies:
Mike Lydon, Sulzer Metco (US), Inc.
Tom Eng, ARCADIS Geraghty and Miller

From:
Glenn Netuschil

Date:
20 July 1999

ENVIRONMENTAL

Subject:
Summary Letter of Investigation and Remediation of Sump 3 at the 325 Duffy Avenue Facility, Sulzer Metco (US) Inc., Hicksville, New York.

ARCADIS Geraghty & Miller Project No.:
NY001110.0004

We are sending you:

☒ **Attached** ☐ **Under Separate Cover Via _____ the Following Items:**

☐ Shop Drawings ☐ Plans ☐ Specifications ☐ Change Order
☐ Prints ☐ Samples ☐ Copy of Letter ☐ Reports
☐ Other: _____

Copies	Date	Drawing No.	Rev.	Description	Action*
1	7/20/99			Summary Letter of Investigation and Remediation of Sump 3 at the 325 Duffy Avenue Facility, Sulzer Metco (US) Inc., Hicksville, New York.	

Action*

☐ A Approved ☐ CR Correct and Resubmit ☐ Resubmit ____ Copies
☐ AN Approved As Noted ☐ F File ☐ Return ____ Copies
☐ AS As Requested ☐ FA For Approval ☐ Review and Comment
☐ Other: _____

Comments: _____

INSTRUCTIONS
FOR COMPLETING THE CONNECTICUT UNIFORM HAZARDOUS WASTE MANIFEST

IMPORTANT: READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. ALL 8 COPIES MUST BE TOTALLY LEGIBLE.

GENERAL INFORMATION

The Hazardous Waste Manifest is designed to track waste from the point of generation to final disposal ("cradle to grave"). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly.

Incomplete, incorrect or illegible manifests are violations of the law, and could subject you to civil or criminal liabilities as specified in Connecticut Hazardous Waste Regulations.

The Connecticut manifest contains 8 copies. ALL COPIES MUST BE LEGIBLE! (Illegible manifests submitted to the State will be returned to the Generator for proper completion). This form is designed for use on a 12 pitch (elite) typewriter. A ball point pen may also be used only if you press down **HARD.** The eight copies must be filed with the appropriate parties as they are completed.

* Be aware that hazardous wastes manifested into or out of Connecticut are subject to a hazardous waste assessment per C.G.S 22a-132. Please contact the Dept. of Revenue Services at (860) 541-3225 for more information.

USE OF THE MANIFEST

This manifest must be used for RCRA regulated hazardous wastes. It may also be used for state regulated hazardous wastes, or for other state regulated special wastes for which state regulations **Require** the use of this manifest.

Wastes which are not federally or state regulated may only appear on a manifest in a mixed shipment. RCRA regulated hazardous wastes should be listed first, then the state regulated wastes, then non-hazardous wastes. (Non-hazardous non-regulated wastes, like empty drums which are regulated by DOT, may also be listed under Item 15).

Copy Distribution Instructions are found on the back of the form along with tables and instructions for the transporter and facility.

GENERATOR SECTION

Item 1: GENERATOR'S US EPA ID NO-MANIFEST DOCUMENT NO. - Enter U.S. EPA 12 digit identification number (CT Conditionally Exempt Small Quantity Generators who have not obtained an EPA ID number should enter the letters "CESQG" here). Then enter a UNIQUE 5 digit number you assign to this manifest. Use of serially increasing numbers (eg. 00001, 00002, etc.) is recommended.

Item 2: PAGE 1 of - Enter the total number of pages used to complete this manifest. If you use more than one manifest for a shipment make sure to cross-reference each of the manifests in Item 15, by state manifest document numbers.

Item A: STATE MANIFEST DOCUMENT NUMBER - Number preprinted by CT.

Item 3: GENERATOR'S NAME & MAILING ADDRESS - Enter the name (as notified to EPA) & mailing address of the Generator. This address should be the location that will manage the returned manifest forms. (However, a manifest copy must be kept at the actual site).

Item 4: GENERATOR'S PHONE NUMBER - Enter the phone number of someone who is knowledgeable about this shipment, and who can respond to questions regarding the information on this manifest, or in case of an emergency (24 hrs).

Item B: G.S.I. (Gen. Site Address) - Enter the location address of the Generator - street, city (and state if different) where the waste is being picked up. Enter "same" if the mailing address and location address are identical.

Item 5: TRANSPORTER 1 COMPANY NAME - Enter the company name (as notified to EPA) of the first transporter who will transport the waste.

Item 6: US EPA ID NUMBER - Enter the US EPA 12 digit identification number of the first transporter identified in Item 5.

Item C: S.T.I. (Tran. Lic. Plate #) - Enter the state of registration and then the license plate number of the waste carrying portion of the vehicle. (e.g., NY 14235). NOTE: ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN CONNECTICUT MUST HAVE A VALID CONNECTICUT TRANSPORTERS PERMIT.

Item D: TRANSPORTER'S PHONE - Enter a telephone number with area code where an authorized agent of the transporter can be reached.

Item 7: TRANSPORTER 2 COMPANY NAME - If applicable enter the company name (as notified to EPA) of the 2nd transporter who will transport the waste. Whenever more than two transporters or four waste streams are involved in a shipment, the Generator shall fully complete additional manifests, listing the additional information.

Item 8: US EPA ID NUMBER - If applicable, enter the US EPA 12 digit identification number of the 2nd transporter identified in Item 7.

Item E: S.T.I. (Tran. Lic. Plate #) - If applicable, enter the 2nd transporter's state of registration & license plate number for the waste carrying portion of the vehicle being used to make the pick-up.

Item F: TRANSPORTER'S PHONE - If applicable, enter the 2nd transporter's telephone number with area code where an authorized agent of the transporter can be reached.

Item 9: DESIGNATED FACILITY NAME & SITE ADDRESS - Enter the company name (as notified to EPA) of the Treatment, Storage, or Disposal Facility designated to receive the waste listed on the manifest. The address must be the site address, which may differ from the mailing address.

Item 10: US EPA ID NUMBER - Enter the U.S. EPA 12 digit identification number of the designated Facility identified in Item 9.

Item G: STATE FACILITY ID - No entry required by Connecticut.

Item H: FACILITY PHONE - Enter the telephone number with area code for the Facility designated to receive the waste on the manifest.

Item 11: US DOT DESCRIPTION - All the following information must be entered: The correct US DOT (Dept. of Transportation) name for the waste as identified in 49 CFR Parts 171-177 (usually found in Column 2 of Section 172.101), the assigned DOT Hazard Class (usually found in Column 3) & the 4 digit UN/NA ID number (Column 3A). (Example: Waste acetone, flammable liquid, UN 1090 (F003) RQ.) US DOT requires the word "waste" before or in the shipping name of all hazardous waste.

Item 12: CONTAINERS (NO. & TYPE) - Enter the number of containers for each waste and the appropriate abbreviation from TABLE I (below) for the type of container used.

TABLE I - CONTAINER TYPE

DM = Metal drums, barrels, kegs	TP = Tanks, Portable	CM = Metal boxes, cartons, cases (incl. roll-offs)
DW = Wooden drums, barrels, kegs	TT = Cargo Tanks (tank trucks)	CW = Wooden boxes, cartons, cases
DF = Fiberboard or plastic drums, barrels, kegs	TC = Tank Cars	CF = Fiber or plastic boxes, cartons, cases
CY = Cylinders	DT = Dump Trucks	BA = Burlap, cloth, paper, plastic bags

Item 13: TOTAL QUANTITY - Enter the total quantity of waste described on each line, relative to the units used in Item 14.

Item 14: UNIT (Wt./Vol.) - Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line. DO NOT use fractions.

TABLE II - UNITS OF MEASURE

G = Gallons (liquids only)	L = Liters (liquids only)	Y = Cubic Yards
P = Pounds	K = Kilograms	N = Cubic Meters
T = Tons (2000 lb.)	M = Metric Tons (1000 kg.)	

Item I: WASTE NO: EPA - Enter the EPA waste number from 40 CFR Part 261, Subparts C & D. If none is applicable, enter "NONE". DO NOT leave blank. Enter other applicable EPA waste codes under Item J.

WASTE NO: STATE - Enter the Destination State Waste Code if one exists. If there is no Destination State Waste Code, enter the Generator State Code here. If there is both a Destination and Generator State Code, enter the Destination State Waste Code under Item I, and the Generator State Code under Item J. If no State Waste Code exists, enter "NONE".

Note: Place an asterisk (*) after the waste no. for waste which generators believe qualifies for exemption under Generator tax act C.G.S. 22a-132 and cite reason for exemption under Item J.

Item J: ADDITIONAL DESCRIPTIONS FOR MATERIALS LISTED ABOVE - Enter the following information: For each waste listed in Item 11 (a-e) above, list:

Other applicable waste codes in addition to those listed under Item I.

The specific gravity for items listed in gallons, liters or cubic yards under Item 14.

The physical state (liquid / solid / gas), if not part of D.O.T. shipping name.

Description (chemical names, constituent percentages, etc.) for any waste which has a US DOT shipping name ending in "N.O.S.".

Item 15: SPECIAL HANDLING INSTRUCTIONS & ADDITIONAL INFORMATION - Use this space to indicate special transport, treatment, storage or disposal, or Bill of Lading information. If an alternate facility is designated, note it here. For INTERNATIONAL SHIPMENTS, the Generator must enter here the point of departure from the U.S. through which the waste must travel before entering a foreign country (City & State). This space may also be used for emergency response numbers, and other information the Generator wishes to include about the shipment. For Exports-Transporters must sign and enter the date the waste left the United States in this space.

Item K: HANDLING CODES - To be completed by receiving facility.

If final disposition is to occur at the facility, enter the appropriate handling code from 40 CFR, Part 265, Appendix I, Table 2 for each waste listed on this manifest under "Final".

If ultimate disposition will not occur at the facility listed on this manifest, enter the appropriate handling code from the table in 40 CFR under "Interim" (the ultimate handling method employed at your facility). Then enter the final handling method code which is intended for each waste listed on the manifest under the column entitled "Final". (Example: Waste is being stored in containers at facility on this manifest. Waste will then be transhipped to another facility where it will be incinerated. Enter "S01" under "Interim", and "T08" under "Final".)

Item 16: GENERATOR'S CERTIFICATION - The Generator must read, sign (by hand) & date the certification (with date of transfer to transporter). If a mode other than highway is used, the word "highway" should be lined out & the appropriate mode (rail, water, or air) inserted in the space below. If another mode **in addition to** the highway mode is used, enter the appropriate mode (e.g. "and rail") in space below. Primary exporters shipping hazardous waste to a facility located outside of the United States must add to the end of the first sentence of the certification the following words "and conforms to the terms of the EPA Acknowledgement of Consent to the shipment."

TRANSPORTER SECTION

Item 17: TRANSPORTER 1 ACKNOWLEDGEMENT - Print or type the name of the person accepting the waste on behalf of the 1st transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.

Item 18: TRANSPORTER 2 ACKNOWLEDGEMENT - If applicable, follow the instructions for Item 17 for Transporter 2.

DESIGNATED FACILITY (TSDF) SECTION

Item K: HANDLING CODES (TSDF COMPLETES) - Follow Instructions for Item K listed above.

Item 19: DISCREPANCY INDICATION SPACE - The authorized representative of the designated facility's owner or operator must note in this space any significant discrepancy between the waste described on the manifest & the waste actually received at the facility. Any rejected materials should be listed here, along with an indication of the disposition of the rejected materials. A receiving facility whose EPA ID number is different from the one listed in Item 10 shall list the correct EPA ID number, facility name and address here. **You must also comply with any applicable Discrepancy or Rejection reporting requirements. Federal and State regulations vary.**

Item 20: FACILITY OWNER OR OPERATOR CERTIFICATION - Print or type the name of the person accepting the waste on behalf of the owner or operator of the designated TSDF. That person must acknowledge acceptance of the waste described on the manifest by signing (by hand) & entering the date of receipt. The signature of the authorized TSDF agent indicates acceptance (except for items specified in Item 19) & agreement with statements on this manifest.

Note: FOR INTERSTATE SHIPMENTS (between different states) YOU SHOULD COMPLETE THE MANIFEST ACCORDING TO THE DESTINATION STATE'S INSTRUCTIONS. YOU MAY BE REQUIRED TO COMPLY WITH OTHER REGULATIONS (and Generator State instructions) regarding the manifest. You may wish to contact your State agencies for more information on this subject.

REMINDER: ALL 8 COPIES OF THIS FORM MUST BE TOTALLY LEGIBLE.

CY = Cylinders

ESI Form 540 (6/99) This form contains all of the information required in the NRC form 540 (3/95)

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST SHIPPING PAPER

5. Shipper - Name and Facility
Sulzer-Metco (US), Inc.
1101 Prospect Ave.
Westbury, NY 11590

Shipper I.D. Number
N/A
Collector
Processor

7. NRC Form 540 and 540A — Page 1 of 3 Page(s)
NRC Form 541 and 541A — 6 Page(s)
NRC Form 542 and 542A — 0 Page(s)
Additional Information — 0 Page(s)

8. Manifest Number (Use this number on all continuation pages)
41018-02

Emergency Telephone Number (Include Area Code)
(410) 377-3742

User Permit Number
N/A

Shipment Number
41018

☒ Generator type (specify)
Other

9. Consignee - Name and Facility Address
RACE, LLC
2550 Channel Ave.
Memphis, TN 38113

Contact Bobby Newell
Telephone Number
(901) 775-0690

Organization
ECOLOGY SERVICES, INC.

Contact Peter DiPietrantonio

Telephone Number (Include Area Code)
(516) 338-2337

Signature - Authorized consignee acknowledging waste receipt

Date

2. Is this an "Exclusive Use" shipment?
☐ YES
☒ NO

3. Total number of packages identified on this manifest ==> 36

Carrier - Name and Address
Tri State Motor Transit Co.
PO Box 113
Joplin, MO 64802

EPA ID Number
MOD095038998
Shipping Date
10/15/04

10. Certification
This is to certify that the herein-named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation. This also certifies that the materials are classified, packaged, marked, and labeled and are in proper condition for transportation and disposal as described in accordance with the requirements of 10 CFR Parts 20 and 61, or equivalent state regulations.

4. Does EPA regulated waste requiring a manifest accompany this shipment? ☐ YES ☒ NO
If "yes" provide manifest number ========>

EPA Manifest Number
N/A

Contact Cassie Gardner

Signature - Authorized carrier acknowledging waste receipt

Telephone Number (Include Area Code)
800-234-8768
Date

Authorized Signature
P. Dillenhart

Title
EH&S Specialist

Date
2/28/05

11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (including proper shipping name, hazard class, UN ID number, and any additional information)	12. DOT LABEL "RADIOACTIVE"	13. TRANSPORT INDEX	14. PHYSICAL AND CHEMICAL FORM	15. INDIVIDUAL RADIONUCLIDES			16. TOTAL PACKAGE ACTIVITY IN SI UNITS	17. LSA/SCO CLASS	18. TOTAL WEIGHT OR VOLUME (use appropriate units)	19. IDENTIFICATION NUMBER OF PACKAGE
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-01
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-02
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-03
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-04
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-05
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-06
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-07
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-08

For Consignee Use Only

ESI Form 540A
(6/99)

This form contains all of the information required in the NRC form 540A

8. Manifest Number
(Use this number on all continuation pages)

41018-02

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST
SHIPPING PAPER
Continuation Sheet

11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (including proper shipping name, hazard class, UN ID number, and any additional information)	12. DOT LABEL "RADIOACTIVE"	13. TRANSPORT INDEX	14. PHYSICAL AND CHEMICAL FORM	15. INDIVIDUAL RADIONUCLIDES			16. TOTAL PACKAGE ACTIVITY IN SI UNITS	17. LSA/SCO CLASS	18. TOTAL WEIGHT OR VOLUME (*use appropriate units*)	19. IDENTIFICATION NUMBER OF PACKAGE
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-09
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-10
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-11
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-12
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-13
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-14
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-15
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-16
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-17
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-18
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-19
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-20
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-21
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-22
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-23
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-24
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-25

ESI Form 540A

This form contains all of the information required in the NRC form 540A

8. Manifest Number

(6/99)

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST
SHIPPING PAPER
Continuation Sheet

(Use this number on all continuation pages)

41018-02

11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (including proper shipping name, hazard class, UN ID number, and any additional information)	12. DOT LABEL "RADIOACTIVE"	13. TRANSPORT INDEX	14. PHYSICAL AND CHEMICAL FORM	15. INDIVIDUAL RADIONUCLIDES			16. TOTAL PACKAGE ACTIVITY IN SI UNITS	17. LSA/SCO CLASS	18. TOTAL WEIGHT OR VOLUME (use appropriate units)	19. IDENTIFICATION NUMBER OF PACKAGE
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-26
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-27
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-28
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-29
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-30
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-31
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-32
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-33
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-34
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-35
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019154	U-nat + C			0.566 MBq 15.30 µCi	N/A	124.85 kgs 275 lb	SZMW 41015-36

Code	Waste description
F019	Wastewater treatment sludges from the chemical conversion coating of aluminum except from zirconium phosphating in aluminum can washing when such phosphating is an exclusive conversion coating process.
F020	Wastes (except wastewater and spent carbon from hydrogen chloride purification) from the production or manufacturing use (as a reactant, chemical intermediate, or component in a formulating process) of tri- or tetrachlorophenol or of intermediates used to produce their pesticide derivatives. (This listing does not include wastes from the production of hexachlorophene from highly purified 2,4,5-trichlorophenol.)
F021	Wastes (except wastewater and spent carbon from hydrogen chloride purification) from the production or manufacturing use (as a reactant, chemical intermediate, or component in a formulating process) of pentachlorophenol, or of intermediates used to produce derivatives.
F022	Wastes (except wastewater and spent carbon from hydrogen chloride purification) from the manufacturing use (as a reactant, chemical intermediate, or component in a formulating process) of tetra-, penta-, or hexachlorobenzenes under alkaline conditions.
F023	Wastes (except wastewater and spent carbon from hydrogen chloride purification) from the production of materials on equipment previously used for the production or manufacturing use (as a reactant, chemical intermediate, or component in a formulating process) of tri- and tetrachlorophenols. (This listing does not include wastes from equipment used only for the production or use of hexachlorophene from highly purified 2,4,5-trichlorophenol.)
F024	Process wastes including, but not limited to, distillation residues, heavy ends, tars, and reactor clean-out wastes, from the production of certain chlorinated aliphatic hydrocarbons by free radical catalyzed processes. These chlorinated aliphatic hydrocarbons are those having carbon chain lengths ranging from one to and including five, with varying amounts and positions of chlorine substitution. (This listing does not include wastewaters, wastewater treatment sludges, spent catalysts, and wastes listed in Sections 261.31. or 261.32)
F025	Condensed light ends, spent filters and filter aids, and spent desiccant wastes from the production of certain chlorinated aliphatic hydrocarbons, by free radical catalyzed processes. These chlorinated aliphatic hydrocarbons are those having carbon chain lengths ranging from one, to and including five, with varying amounts and positions of chlorine substitution.
F026	Wastes (except wastewater and spent carbon from hydrogen chloride purification) from the production of materials on equipment previously used for the manufacturing use (as a reactant, chemical intermediate, or component in a formulating process) of tetra-, penta-, or hexachlorobenzene under alkaline conditions.
F027	Discarded unused formulations containing tri-, tetra-, or pentachlorophenol or discarded unused formulations containing compounds derived from these chlorophenols. (This listing does not include formulations containing hexachlorophene synthesized from prepurified 2,4,5-trichlorophenol as the sole component.)
F028	Residues resulting from the incineration or thermal treatment of soil contaminated with EPA hazardous waste nos. F020, F021, F022, F023, F026, and F027.

GAF CHEMICALS CORPORATION

A Subsidiary of GAF CORPORATION

Telephone
201 628 3000

1361 Alps Road
Wayne, NJ 07470

Health Emergency: 8am - 4:30pm (EST/EDT) 201 628 3869
4:30pm - 8am (EST/EDT) 201 862 3993

Transportation Emergency: CHEMTREC 1 800 424 9300

MATERIAL SAFETY DATA SHEET

SECTION 01 - IDENTIFICATION

MSDS NO. 0416 REV. 5 DATE 05/86 PVP K-15

PB 21582

DOMESTIC TRADE NAME: PVP K-15
EXPORT TRADE NAME: PVP K-15

CAS REGISTRY NO: 00009003-39-8
CAS REGISTRY NAME: 2-PYRROLIDINONE, 1-ETHENYL,-HOMOPOLYMER
SYNONYM: POLYVINYLPYRROLIDONE

MOLECULAR FORMULA: $(C_6H_9NO)_x$

12PB 46465
25% PVP 75% H_2O

SECTION 02 - PHYSICAL & HEALTH HAZARD INGREDIENTS

NONE

+ PPM PRESERVATIVE

SECTION 03 - PHYSICAL & CHEMICAL CHARACTERISTICS

BOILING POINT: NO DATA FOUND
VAPOR PRESSURE: NOT VOLATILE
VAPOR DENSITY (AIR=1): NOT VOLATILE
WATER SOLUBILITY: COMPLETE
MELTING/FREEZING POINT: NO DATA FOUND
APPEARANCE: OFF-WHITE POWDER
SPECIFIC GRAV. (WATER=1): NO DATA FOUND
PERCENTAGE VOLATILES: 5.00 % WATER-MAX
EVAPORATION RATE: NOT VOLATILE
PH OF SOLUTION: NO DATA FOUND
ODOR: NO DATA FOUND

PVP
Organic Binder

SECTION 04 - PHYSICAL HAZARD DATA

FLASH POINT: NO FLASH POINT
AUTOIGNITION TEMP.: NO DATA FOUND
FLAMMABLE LIMITS: NO DATA FOUND

FIRE FIGHTING MEDIA:
USE MEDIA PROPER TO PRIMARY CAUSE OF FIRE.

SPECIAL FIRE FIGHTING PROCEDURES:
NONE KNOWN

FIRE/EXPLOSION HAZARDS:
NONE KNOWN

NFPA HAZARD CODES - HEALTH/FLAMMABILITY/REACTIVITY
NO DATA FOUND
HMIS HAZARD CODES - HEALTH/FLAMMABILITY/REACTIVITY 0 0 0

SECTION 05 - REACTIVITY DATA

STABILITY: STABLE
HAZARDOUS POLYMERIZATION: WILL NOT OCCUR

CONDITIONS TO AVOID:
NONE KNOWN

INCOMPATIBLE MATERIALS:
STRONG OXIDIZING OR REDUCING AGENTS

HAZARDOUS DECOMPOSITION PRODUCTS:
NONE KNOWN

SECTION 06 - HEALTH HAZARD DATA

- ACUTE TOXICITY -

ORAL TOXICITY:
RAT LD50 > 100,000 MG/KG

DERMAL TOXICITY:
NOT ABSORBED TOPICALLY.

INHALATION TOXICITY:
HUMAN, GUINEA PIG AND RABBIT: EXPOSURE TO AEROSOLS AND DUSTS OF SMALL PARTICLE SIZE PRODUCED NO EVIDENCE OF HARMFUL EFFECTS.

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201 628 3000
1361 Alps Road
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4:30pm - 8am (EST/EDT) 201 862 3993
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SECTION 06 - HEALTH HAZARD DATA (CONT.)

SKIN IRRITATION:
HUMAN REPEAT INSULT PATCH TEST; NOT A PRIMARY IRRITANT.

EYE IRRITATION:
RABBIT; NO IRRITATION OBSERVED.

SENSITIZER: NO
HUMAN REPEAT INSULT PATCH TEST; NOT A SENSITIZER.

DOT CORROSIVE: NO

PRIMARY ROUTE(S) OF ENTRY: CONTACT

- SIGNS & SYMPTOMS OF EXPOSURE -

SYMPTOMS OF INGESTION:
NO EFFECTS OF EXPOSURE EXPECTED.

SYMPTOMS OF INHALATION:
IF MISTED, NO EFFECTS OF EXPOSURE EXPECTED.

SYMPTOMS OF SKIN CONTACT:
NO EFFECTS OF EXPOSURE EXPECTED DUE TO ABSORPTION OR CONTACT. MAY POSSIBLY CAUSE IRRITATION OR DERMITITIS IN SOME INDIVIDUALS UPON PROLONGED CONTACT.

SYMPTOMS OF EYE CONTACT:
NO EFFECTS OF EXPOSURE EXPECTED WITH THE EXCEPTION OF POSSIBLE IRRITATION.

- EMERGENCY FIRST AID PROCEDURES -

FIRST AID FOR INGESTION:
GENERAL PRECAUTIONARY MEASURES SUGGEST INDUCING VOMITING IMMEDIATELY BY GIVING TWO GLASSES OF WATER AND STICKING FINGER DOWN THROAT. NEVER GIVE ANYTHING BY MOUTH TO AN UNCONSCIOUS PERSON. CALL A PHYSICIAN.

FIRST AID FOR INHALATION:
NONE REQUIRED.

FIRST AID FOR SKIN CONTACT:
FOR ALL FOREIGN MATERIALS, WASH AFTER EXPOSURE.

FIRST AID FOR EYE CONTACT:
FOR ALL FOREIGN MATERIALS, IMMEDIATELY FLUSH EYES WITH PLENTY OF WATER.

MEDICAL CONDITIONS AGGRAVATED BY EXPOSURE:
NO DATA FOUND.

EXPOSURE LIMITS:
NUISANCE DUST: TLV:TWA 10 MG/M3-TOTAL; 5 MG/M3-RESPIRABLE.
PEL:TWA 15 MG/M3-TOTAL; 5 MG/M3-RESPIRABLE.

- OTHER TOXICITY -

OTHER ACUTE TOXICITY: NO DATA FOUND

SUB CHRONIC ORAL TOXICITY:
RODENT AND DOG STUDIES; NO ADVERSE EFFECT LEVEL EXCEEDS 10% OF TOTAL DIET; NO EVIDENCE OF CARCINOGENIC ACTIVITY.

SUB CHRONIC INHALATION TOXICITY: NO DATA FOUND

SUB CHRONIC MISCELLANEOUS TOXICITY: NO DATA FOUND

AQUATIC TOXICITY: NO DATA FOUND

TUMORIGENICITY:
CHRONIC RODENT AND DOG FEEDING STUDIES SHOW THAT THE NO ADVERSE EFFECT LEVEL EXCEEDS 10% OF THE DIET WITH NO EVIDENCE OF CARCINOGENIC ACTIVITY.

MUTAGENICITY:
PVP WAS TESTED IN THE AMES ASSAY; DOMINANT LETHAL TEST ON MICE; L5178Y MOUSE (TK+/-) LYMPHOMA ASSAY; BONE MARROW CHROMOSOMAL ABERRATION ASSAY; AND THE BALB/C 3T3 TRANSFORMATION. IN EACH CASE PVP WAS FOUND NOT TO BE MUTAGENIC.

REPRODUCTIVE TOXICITY:
TERATOLOGY STUDIES WITH PVP CONCENTRATIONS UP TO 10% OF THE DIET SHOW NO EMBROTOXICITY, FETOTOXICITY OR TERATOGENICITY.

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SECTION 06 - HEALTH HAZARD DATA (CONT.)

MISCELLANEOUS TOXICITY: NO DATA FOUND

SECTION 07 - OCCUPATIONAL CONTROL PROCEDURES

VENTILATION:
GENERAL PRECAUTIONARY MEASURES SUGGEST USE WITH ADEQUATE VENTILATION.

RESPIRATORY PROTECTION:
DUST MASK WHERE DUSTING CANNOT BE AVOIDED.

EYE PROTECTION:
SAFETY GLASSES.

SKIN PROTECTION:
NONE REQUIRED.

PERSONAL HYGIENE:
OBSERVE ORDINARY MEASURES OF PERSONAL HYGIENE.

PROTECTIVE MEASURES DURING REPAIR/MAINTENANCE OF EQUIPMENT:
WASH EQUIPMENT THOROUGHLY WITH STEAM OR WARM WATER UNTIL CLEAN. CHECK FOR FLAMMABLES WITH AN "EXPLOSION METER" AND ALSO CHECK THE OXYGEN LEVEL WITH AN OXYGEN METER. IN ALL CASES, FOLLOW GOOD INDUSTRIAL SAFETY PRACTICES BEFORE ENTERING EQUIPMENT.

SECTION 08 - PRECAUTIONS FOR SAFE HANDLING,STORAGE, AND USE

PRECAUTIONARY MEASURES:
AVOID BREATHING DUST.

SPILL/LEAK CLEAN-UP PROCEDURES:
SCOOP UP. AVOID DUSTING. DISPOSE OF WITH SOLID WASTE ACCORDING TO FEDERAL, STATE AND LOCAL REGULATIONS. FLUSH SPILL AREA WITH WATER.

DISPOSAL METHOD:
DISPOSE OF WITH SOLID WASTE ACCORDING TO FEDERAL, STATE AND LOCAL REGULATONS.

EPA HAZARDOUS SUBSTANCE REPORTABLE QUANTITY:NOT LISTED

RCRA CLASS:NOT REGULATED

SECTION 09 - TRANSPORTATION DATA

- DOMESTIC DATA -
DOT SHIPPING NAME: NOT REGULATED
DOT HAZARD CLASS: NOT REGULATED
HAZARDOUS INGREDIENT(S): NONE
UN NUMBER: NONE

- EXPORT DATA -
EXPORT SHIPPING NAME: NOT REGULATED
EXPORT HAZARD CLASS: NOT REGULATED
HAZARDOUS INGREDIENT(S): NONE
UN NUMBER: NONE

ABBREVIATIONS

SECTION 01 — IDENTIFICATION

CAS REGISTRY NUMBER AND NAME — Chemical abstract service registry number and name as it appears in the EPA Toxic Substance Control Act Chemical Substance Inventory.

SECTION 02 — PHYSICAL AND HEALTH HAZARD INGREDIENTS

PEL — Permissible exposure limit for a chemical in the air as established by The Occupational Safety & Health Administration (OSHA).

TLV — Threshold limit value for a chemical in the air as established by The American Conference of Government Industrial Hygienists.

(PEL)TLV:TWA — The time-weighted average exposure for a normal 8-hour workday and a 40-hour workweek, to which nearly all workers may be repeatedly exposed without adverse effect.

TLV:STEL — The short term exposure limit is a 15-minute time-weighed average exposure which should not be exceeded at any time during a workday, even if the 8-hour TWA is within the TLV.

TLV:C — The ceiling concentration that should not be exceeded even instantaneously.

PEL: ACCEPTABLE CEILING CONCENTRATION — The concentration not to be exceeded during an 8-hour shift, except for a given time period, and not exceeding the concentration given as the acceptable maximum peak.

CARCINOGENIC REFERENCES — Will indicate whether the ingredient has been found to be a (potential) carcinogen by 1) IARC (International Agency for Research on Cancer), 2) NTP (National Toxicology Progam) or 3) OSHA (Occupational Safety & Health Administration).

SECTION 04 — PHYSICAL HAZARD DATA

FLASH POINT — Designated by method. CC — Closed Cup — OC — Open Cup.

NFPA HAZARD CODES — The National Fire Protection Association's Hazard Identification System intended to indicate inherent hazards of a chemical under emergency conditions such as fire. The degree of each of three hazards (Health/Flammability/Reactivity) is rated by a numerical designation ranging from low to high of 0 to 4.

HMIS HAZARD CODES — The National Paint & Coatings Association's Hazard Materials Identification System intended to estimate the inherent hazards of a chemical under normal workplace situations. The degree of each of three hazards (Health/Flammabilty/-Reactivity) is rated by a numerical designation ranging from low to high of 0 to 4.

SECTION 06 — HEALTH HAZARD DATA

ACUTE LD50/LC50 — The Lethal Dose/Concentration required to kill 50% of a population of test animals by the route of administration indicated.

SECTION 08 — HEALTH HAZARD DATA

RCRA — Resource Conservation and Recovery Act

SECTION 09 — TRANSPORTATION DATA

DOT — Department of Transportation

UN NUMBER — United Nations Number

GAF CHEMICALS CORPORATION manufactures industrial products for use as materials in the production of products by industrial customers. The information herein is intended for use by persons who have or should obtain professional knowledge and experience in the subjects discussed. GAF usually has only limited information about the products of its customers and their composition, methods of manufacture and use. Accordingly, GAF MAKES NO WARRANTY EXPRESS OR IMPLIED, AS TO THE ACCURACY, COMPLETENESS OR RELIABILITY OF INFORMATION HEREIN EXCEPT THAT SUCH INFORMATION IS, TO THE BEST OF GAF'S KNOWLEDGE AND BELIEF, ACCURATE AS OF THE DATE INDICATED. GAF recommends that customers independently test and evaluate its products and their products and processes in which GAF products are used in order to decide their safety and

REGISTERED TRADEMARKS OF GAF CHEMICALS CORPORATION

Alipal	Emulphogene	Igepal	Plasdone K
Antara	Emulphor	Igepon	Polection
Antarox	Gafac	Katapol	Polydar
Biopal	Gafamide	Katapone	Polyplasdone XL
Blancol	Gafgard	Ludigol	2-Pyrol
BLO	Gafoam	Nekal	[illegible]
Butoxyne	Gafquat	NMP	[illegible]
Cheelox	Gafsonic	Peregal	[illegible]
CHP	Ganex	Plasdone	[illegible]
Diazopon	Gantrez	Plasdone C	[illegible]

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ACUTE LD50/LC50 — The Lethal Dose/Concentration required to kill 50% of a population of test animals by the route of administration indicated.

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REGISTERED TRADEMARKS OF GAF CHEMICALS CORPORATION

Alipal	Emulphogene	Igepal	Plasdone K
Antara	Emulphor	Igepon	Polectron
Antarox	Gafac	Katapol	Polyclar
Biopal	Gafamide	Katapone	Polyplasdone XL
Blancol	Gafgard	Ludigol	2-[illegible]
BLO	Gafgam	Nekal	[illegible]
Butoxyne	Gafquat	NMP	[illegible]
Cheelox	Gafromin	Peregal	[illegible]
CHP	Gafrex	Plasdone	[illegible]
Diazopon	Gantrez	Plastone [illegible]	[illegible]

72-62-7820-03 MATERIAL SAFETY DATA SHEET	Ashland	ASHLAND CHEMICAL, INC. Subsidiary Of Ashland Oil, Inc P.O. BOX 2219 COLUMBUS, OHIO 43216 (614) 889-3333	24-HOUR Emergency Telephone 1(800) 274-5263 or 1(800) ASHLAND

METCO DIVISION
1101 PROSPECT AVE
WESTBURY NY 11590

05 50 878 5487420-001
TO: METCO DIVISION
220 MILLER PLACE
HICKSVILLE NY 11801

ATTN: PLANT MGR./SAFETY DIR.

****

ASHLAND PRODUCT NAME: KETJENFLEX MH

DATA SHEET NO: 0230117 -000 INVOICE: 243626 PRODUCT: 3511592
LATEST REVISION DATE: 08/28/92 INVOICE DATE: 01/08/93

LAIDLAW ENVIRONMENTAL SERVICES

NJSMU

Please print or type.

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD057773163963994 91 — Manifest Document No.

2. Page 1 of 2

Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address
SULZER METCO
325 DUFFY AVENUE, HICKSVILLE, NY 11801

4. Generator's Phone (516 338-2570

A. State Manifest Document Number

B. State Generator's ID SAME

5. Transporter 1 Company Name: FREEHOLD CARTAGE, INC.

6. US EPA ID Number: NJD054126164

C. State Transporter's ID

D. Transporter's Phone (732) 462-1001

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
SAFETY-KLEEN(TS)INC.
3527 WHISKEY BOTTOM ROAD
LAUREL, MD 20724

10. US EPA ID Number: MDD980554653

G. State Facility's ID A207

H. Facility's Phone (301) 939-6000

11. US DOT Description (Including Proper Shipping Name, Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. NON-REGULATED MATERIAL		025	DM	10000	P	NONE
b. NON-REGULATED MATERIAL		007	DM	02800	P	NONE
c. NON-REGULATED MATERIAL		006	DM	02400	P	NONE
d. NON-REGULATED MATERIAL		004	DM	01600	P	NONE

J. Additional Descriptions for Materials Listed Above
Additional EPA Waste Codes a. b. c. d.

K. Handling Codes for Wastes Listed Above
a.SB
b.SB
c.SL
d.SL

15. Special Handling Instructions and Additional Information
Approval Numbers a.6SMU-001 b.6SMU-002 c.6SMU-003 d.6SMU-005

Emergency Contact: 1-800-468-1760 (596) 3E

NY-JA-113

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Printed/Typed Name: Michael S. Lydon — Signature: [signature] — Month Day Year: 06 23 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: HOMER BLANKENSHIP — Signature: [signature] — Month Day Year: 06 23 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: CHRIS HERNANDEZ — Signature: [signature] — Month Day Year: 06 28 99

ORIGINAL - RETURN TO GENERATOR

LAIDLAW ENVIRONMENTAL SERVICES

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

NON-HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21. Generator's US EPA ID No.: NYD057731663

Manifest Document No.: 99491

22. Page: 2

Information in the shaded areas is not required by Federal law.

23. Generator's Name
SULZER METCO
325 DUFFY AVENUE, HICKSVILLE, NY 11801
(516) 338-2570

L. State Manifest Document Number

M. State Generator's ID: SAME

24. Transporter ____ Company Name: FREEHOLD CARTAGE, INC.

25. US EPA ID Number: NJD054126164

N. State Transporter's ID

O. Transporter's Phone: (732) 462-1001

26. Transporter ____ Company Name

27. US EPA ID Number

P. State Transporter's ID

Q. Transporter's Phone

	28. US DOT Description (Including Proper Shipping Name, Class and ID Number)	TIM	29. Containers No.	Type	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
a.	NON-REGULATED MATERIAL		011	DM	04400	P	NONE
b.	NON-REGULATED MATERIAL		004	DM	01600	P	NONE
c.	NON-REGULATED MATERIAL		004	DF	01600	P	NONE
d.							
e.							
f.							
g.							
h.							
i.							

GENERATOR

S. Additional Descriptions for Materials Listed Above

Add. EPA Waste Codes: a. b. c. d. e. f. g. h. i.

T. Handling Codes for Wastes Listed Above: a. SL b. SL c. SB d. e. f. g. h. i.

32. Special Handling Instructions and Additional Information

Approval Numbers: a. 65NU-008 b. 65NU-011 c. 65NU-001 d. e. f. g. h. i.

JA-113

M.S. Lydon 06-23-99

TRANSPORTER

33. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: HOMER BLANKENSHIP

Signature: Homer Blankenship

Date: Month 06 Day 23 Year 99

34. Transporter ____ Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date: Month Day Year

FACILITY

35. Discrepancy Indication Space

PRINTED WITH SOY INK

ORIGINAL - RETURN TO GENERATOR

LAIDLAW ENVIRONMENTAL SERVICES

Please print or type.

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD057731663 Manifest Document No. 99451

2. Page 1 of 2

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
SULZER METCO
325 DUFFY AVENUE, HICKSVILLE, NY 11801

4. Generator's Phone (516) 338-2570

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
FREEHOLD CARTAGE, INC.

6. US EPA ID Number NJD054126164

C. State Transporter's ID

D. Transporter's Phone (732) 462-1001

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
SAFETY-KLEEN(TS)INC.
3527 WHISKEY BOTTOM ROAD
LAUREL, MD 20724

10. US EPA ID Number MDD980554653

G. State Facility's ID A207

H. Facility's Phone (301) 939-6000

	11. US DOT Description (Including Proper Shipping Name, Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	NON-REGULATED MATERIAL		025	DM	10000	P	NONE
b.	NON-REGULATED MATERIAL		012	DM	12000	P	NONE
c.	NON-REGULATED MATERIAL		006	DM	2400	P	NONE
d.	NON-REGULATED MATERIAL		004	DM	1000	P	NONE

J. Additional Descriptions for Materials Listed Above
Additional EPA Waste Codes a. b. c. d.

K. Handling Codes for Wastes Listed Above
a. SB
b. SB
c. SL
d. SL

15. Special Handling Instructions and Additional Information
Approval Numbers a. 6SNU-001 b. 6SNU-002 c. 6SNU-003 d. 6SNU-005

Emergency Contact: 1-800-468-1760 (596) 3E

NY-JA-11

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Printed/Typed Name [illegible] Signature [illegible] Month Day Year 08 23 99

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name [illegible] Signature [illegible] Month Day Year 08 23 99

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Signature Month Day Year

GENERATOR TRANSPORTER FACILITY

GENERATOR COPY

P2SUL005636

LAIDLAW ENVIRONMENTAL SERVICES

Please print or type.

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD057731663 Manifest Document No. 99491

2. Page 1 of 2

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
SULZER METCO
325 DUFFY AVENUE, HICKSVILLE, NY 11801

4. Generator's Phone (516) 338-2570

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
FREEHOLD CARTAGE, INC.

6. US EPA ID Number NJD054126164

C. State Transporter's ID

D. Transporter's Phone (732) 462-1001

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
SAFETY-KLEEN(TS)INC.
3527 WHISKEY BOTTOM ROAD
LAUREL, MD 20724

10. US EPA ID Number MDD980554653

G. State Facility's ID A207

H. Facility's Phone (301) 939-6000

GENERATOR

	HM	11. US DOT Description (Including Proper Shipping Name, Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.		NON-REGULATED MATERIAL	025	DM	10000	P	NONE
b.		NON-REGULATED MATERIAL	002	DM	02000	P	NONE
c.		NON-REGULATED MATERIAL	002	DM	02000	P	NONE
d.		NON-REGULATED MATERIAL	004	DM	07000	P	NONE

J. Additional Descriptions for Materials Listed Above
Additional EPA Waste Codes a. b. c. d.

K. Handling Codes for Wastes Listed Above
a. SB
b. SB
c. SL
d. SL

15. Special Handling Instructions and Additional Information
Approval Numbers a. 6SNU-001
b. 6SNU-002
c. 6SNU-003
d. 6SNU-005

Emergency Contact: 1-800-468-1760 (596) 3R

NY-DEC

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Printed/Typed Name | Signature | Month Day Year 06 23 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

FILE COPY OR STATE COPY
P2SUL005637

LAIDLAW ENVIRONMENTAL SERVICES

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

NON-HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21. Generator's US EPA ID No.: NYD057731663

Manifest Document No.: 99491

22. Page: 2

Information in the shaded areas is not required by Federal law.

23. Generator's Name
SULZER METCO
325 DUFFY AVENUE, HICKSVILLE, NY 11801
(516) 338-2570

L. State Manifest Document Number

M. State Generator's ID: None

24. Transporter ____ Company Name: FREEHOLD CARTAGE, INC.

25. US EPA ID Number: NJD054126164

N. State Transporter's ID

O. Transporter's Phone: (732) 462-1001

26. Transporter ____ Company Name

27. US EPA ID Number

P. State Transporter's ID

Q. Transporter's Phone

	HM	28. US DOT Description (Including Proper Shipping Name, Class and ID Number)	29. Containers No.	Type	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
a.		NON-REGULATED MATERIAL	011	BM	0400	P	NONE
b.		NON-REGULATED MATERIAL	004	BM	0100	P	NONE
c.		NON-REGULATED MATERIAL	004	BF	0100	P	NONE
d.							
e.							
f.							
g.							
h.							
i.							

GENERATOR

S. Additional Descriptions for Materials Listed Above

Add. a. b. c. d. e. f. g. h. i.
EPA Waste Codes

T. Handling Codes for Wastes Listed Above

a.SL b.SL c.SB d. e. f. g. h. i.

32. Special Handing Instructions and Additional Information

Approval Numbers a.6SNU-008 b.6SNU-014 c. d. e. f. g. h. i.

SA-115

TRANSPORTER

33. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Homer Bonhomme

Signature

Date: Month 04 Day 23 Year 99

34. Transporter ____ Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date: Month Day Year

FACILITY

35. Discrepancy Indication Space

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GENERATOR COPY

LAIDLAW ENVIRONMENTAL SERVICES

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

NON-HAZARDOUS WASTE MANIFEST *(Continuation Sheet)*

21. Generator's US EPA ID No. NYD057731663 | Manifest Document No. 99491 | 22. Page 2 | Information in the shaded areas is not required by Federal law.

23. Generator's Name
SULZER METCO
325 DUFFY AVENUE, HICKSVILLE, NY 11801
(516) 338-2570

L. State Manifest Document Number

M. State Generator's ID

24. Transporter ____ Company Name: FREEHOLD CARTAGE, INC.
25. US EPA ID Number: NJD054126164

N. State Transporter's ID

O. Transporter's Phone (732) 462-1001

26. Transporter ____ Company Name
27. US EPA ID Number

P. State Transporter's ID

Q. Transporter's Phone

	HM	28. US DOT Description *(Including Proper Shipping Name, Class and ID Number)*	29. Containers No.	Type	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
a.		NON-REGULATED MATERIAL	001	DM	0400	P	NONE
b.		NON-REGULATED MATERIAL	004	DM	0100	P	NONE
c.		NON-REGULATED MATERIAL	004	DF	0200	P	NONE
d.							
e.							
f.							
g.							
h.							
i.							

GENERATOR

S. Additional Descriptions for Materials Listed Above

Add. EPA Waste Codes: a. b. c. d. e. f. g. h. i.

T. Handling Codes for Wastes Listed Above

a. SL b. SL c. SB d. e. f. g. h. i.

32. Special Handing Instructions and Additional Information

Approval Numbers: a. 6SNU-008 b. 6SNU-011 c. d. e. f. g. h. i.

TRANSPORTER

33. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: [illegible] | Signature: [illegible] | Date: Month [illegible] Day [illegible] Year [illegible]

34. Transporter ____ Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

35. Discrepancy Indication Space

PRINTED WITH SOY INK

FILE COPY OR STATE COPY

P3SU005639

LAIDLAW ENVIRONMENTAL SERVICES

FORM A

Customer Notification And Certification

Generator Name/Location: SULZER METCO 325 DUFFY AVE HICKSVILLE, NY

EPA I.D. Number: NYD057731663

Waste Profile or ARF Designation: SEE ATTACHED

Manifest Number: NON-HAZ 99491

EPA Waste Number(s): SEE ATTACHED

Waste Analysis Available? Yes (attached) _____ No X On file at receiving facility X

Unrestricted Waste Notification (*Category 1*)

Mark the statement below if you generate a waste that is not a land disposal restricted waste (the waste has no applicable treatment standards).

☒ *I notify that I am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that the waste is not restricted as specified in 40 CFR §268, Subpart D or any applicable prohibitions set forth in 40 CFR §268.32 or RCRA Section 3004(d).*

Restricted Waste/Debris Notification (*Category 2*)

Mark statement (2a) below if you generate a waste that is restricted from land disposal (the waste has applicable treatment standards). **NOTE-1:** A waste may pass one or more standards and require treatment or be varianced for others. In this case, all applicable categories must be checked. **NOTE-2:** D001, D002 and D012 - D043 wastes must be evaluated for underlying constituents found in 40 CFR §268. 48 (Table UTS), that are reasonably expected to be present. A list of these constituents must be included on **FORM B**, or attached to and accompany this notification with each waste shipment. Mark statement (2b) if you generate a debris waste that will be treated to the alternate debris standards located in 40 CFR §268.45.

☐ **(2a) Restricted Waste Notification**

I notify that I am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that the waste is subject to the treatment standards specified in 40 CFR §268 Subpart D. The waste: (a) must be treated to the appropriate regulatory treatment standard, by the appropriate regulatory treatment method; (b) qualifies for a variance as described in category 3 below; or (c) meets some or all of the standards as described in Category 4 below.

☐ **(2b) Alternate Debris Treatment Notification: This hazardous debris is subject to the alternate treatment standards of 40 CFR §268.45.**

The waste contains the following contaminants subject to treatment [check all that apply]:

_____§268.45(b)(1) - Toxicity characteristic debris;

_____§268.45(b)(2) - Debris contaminated with listed waste;

_____§268.45(b)(3) - Cyanide reactive debris.

Restricted Waste Variance Notification (*Category 3*)

Mark the statement below and list the applicable variance date on **Form B**, if you generate a waste which **does not** require treatment prior to land disposal because of a variance (including a case-by-case extension under 40 CFR §268.5, a nationwide variance under 40 CFR §268 Subpart C, a no migration petition under 40 CFR §268.6, or other applicable variance).

☐ *I notify pursuant to 40 CFR §268.7(a)(3) that I am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that this waste is subject to a national capacity variance under 40 CFR §268 Subpart C, or a case-by-case extension under 40 CFR §268.5, or an exemption under 40 CFR §268.6.*

Restricted Waste Certification (Treatment Standards Met) (*Category 4*)

Mark the certification statement below if you generate a waste that is restricted from land disposal (the waste has applicable treatment standards), and the waste meets the standards as generated. **Note:** All applicable constituent standards must be accounted for. A waste may pass one or more standards and require treatment or be variance for other constituents. In this case, all applicable categories must be checked.

☐ *I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA § 3004(d). I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.*

SIGNATURE: [signature] DATE: [illegible]

PRINT NAME: MICHAEL [illegible] TITLE: [illegible]

Revised 10/94 585-7510-585003

FORM A

FORM B1 ***(Must be accompanied by Form A)***

Generator Name/Location SULZER METCO 325 NOFFY AVE HICKSVILLE NY **Page** 2 **of** 2

EPA I.D. Number : NYD057731663 Manifest : NON-HAZ 9999

Waste Profile or ARF	Category No.	EPA or State Waste Code	Variance Date	Description/Sub Category	Treatability Group (WW or NWW)	Waste Constituents or Legend #
6SMU-001	1	NONE	-		NWW	
6SMU-002	1	NONE	-		NWW	
6SMU-003	1	NONE	-		NWW	
6SMU-005	1	NONE	-		NWW	
6SMU-008	1	NONE	-		NWW	
6SMU-011	1	NONE	-		NWW	

CONSTITUENTS IN SOLVENT, CALIFORNIA LIST AND CHARACTERISTIC WASTES.

F001 - F005 spent solvents

Legend #	Constituent Name
1	Acetone
2	Benzene
3	n-Butyl alcohol
*4	Carbon disulfide
5	Carbon tetrachloride
6	Chlorobenzene
7	Cresol (m-and p-isomers)
8	o-Cresol
*9	Cyclohexanone
10	1,2-Dichlorobenzene
11	Ethyl Acetate
12	Ethyl Benzene
13	Ethyl Ether
14	Isobutyl alcohol
*15	Methanol
16	Methylene Chloride
17	Methyl Ethyl Ketone
18	Methyl isobutyl ketone
19	Nitrobenzene
20	Pyridine
21	Tetrachloroethylene
22	Toluene
23	1,1,1-Trichloroethane
24	1,1,2-Trichloroethane
25	Trichlorothylene
26	1,1,2-Trichloro-1,2,2-trifluoroethane
27	Trichloromonofluoro-methane
28	Xylenes (total)

Legends 29-31 RESERVED

** If these constituents are present alone or in any combination of the three, then non waste water forms of these constituents must be treated to **TCLP** levels as indicated in §268.40.*

Technology-Based standards For F005 when the constituent is the only listed F00-F005 solvent

Legend #	Constituent Name
32	2-Ethoxyethanool
33	2-Nitropropane

Legends 34-43 RESERVED

CALIFORNIA LIST WASTES

Legend #	Constituent Name
44	Nickel
45	Thallium
46	Cyanide (Liquid)
47	Liquid Polychlorinated Biphenyls (PCB's)
48	Halogenated Organic compounds (HOC's)

SEE BACK FOR THE UNIVERSAL TREATMENT STANDARDS (UTS), Legends 49 - 264

Revised 6/96 585-7512A-585003

Safety-Kleen
WMS - State Manifest System
Container Cross Reference Report

06/22/99
16:31:45
Page 1

Generator Name: SULZER METCO
Generator EPA ID: NYD057731663
Manifest Load #: NJSMU

Page	D.O.T. Description	Lab Pack	Bulk	DR LB	990623 NJSMU - Drum Containers
1 a	NON-REGULATED MATERIAL		X	10000	01-25
b	NON-REGULATED MATERIAL		X	2800	30-36
c	NON-REGULATED MATERIAL		X	2400	37-42
d	NON-REGULATED MATERIAL		X	1600	36-46
2 a	NON-REGULATED MATERIAL		X	4400	47-57
b	NON-REGULATED MATERIAL		X	1600	58-61
c	NON-REGULATED MATERIAL		X	1600	26-29

THIS WASTE DOES NOT CONTAIN ANY DIOXINS, CHLORINATED FURANS, EXPLOSIVES OR RADIOACTIVE MATERIALS.

safety-kleen.

Container Contents

☒ Bulk ☐ Mixed Lab

Manifest # [illegible]
Manifest page 1 Line Item A
RQ

Container Number:	Year Month Day	Code	Number	Chemist
	990623	NJ[illegible]AU-	01-20	

DOT Shipping Name: [illegible]	Absorbent C V O
Container Type: [illegible] Size: 55	UN/NA Number / HM
Hazard Class: / Division:	Chemical: / Constituents:

Profile Number	[illegible]
Disposal Site	[illegible]
Approval Code	[illegible]

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01	[illegible]						L	1 x 900#		[illegible]
02	[illegible]									
03										
04										
05										
06										
07										
08										
09										
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ABSORBENT	PS - PHYSICAL STATE	IC - INTERNAL CONTAINER
C - CORN COB	L - LIQUID/POURABLE	G - GLASS M - METAL
V - VERMICULITE	S - SOLID	P - PLASTIC F - PAPER
O - OTHER	X - SLUDGE	

This Lab Pack list continues: YES ☐ NO ☐ This is page ___ of ___

ORIGINAL - FINAL T.S.D. • GREEN - TRANS/CERT • YELLOW - DISPOSER • PINK - 1ST T.S.D. • GOLD - GENERATOR

THIS WASTE DOES NOT CONTAIN ANY DIOXINS, CHLORINATED FURANS, EXPLOSIVES OR RADIOACTIVE MATERIALS.

safety-kleen.

Container Contents

☒ Bulk ☐ Mixed Lab

Manifest # NOMPAA 99171
Manifest page 1 Line Item A
RQ

Container Number:	Year 99	Month 06	Day 23	Code N J S 4 0	Number 21-25	Chemist
DOT Shipping Name: NON-REGULATED MATERIAL						Absorbent C V O
Container Type: M&Y	Size: 55	UN/NA Number —		HM —		
Hazard Class: Division: —		Chemical: Constituents: —				

Profile Number	65MU-001
Disposal Site	[illegible]
Approval Code	SR-[illegible]

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01	PETROLEUM OIL					40-60%	L	1 x YORK		NONE
02	LUBRICATING/CUTTING OIL					40-60%				
03						100%				
04										
05										
06										
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ABSORBENT	PS - PHYSICAL STATE	IC - INTERNAL CONTAINER	
C - CORN COB	L - LIQUID/POURABLE	G - GLASS	M - METAL
V - VERMICULITE	S - SOLID	P - PLASTIC	F - PAPER
O - OTHER	X - SLUDGE		

This Lab Pack list continues: YES ☐ NO ☒ This is page of

ORIGINAL - FINAL T.S.D. • GREEN - TRANS/CERT • YELLOW - DISPOSER • PINK - 1ST T.S.D. • GOLD - GENERATOR

THIS WASTE DOES NOT CONTAIN ANY DIOXINS, CHLORINATED FURANS, EXPLOSIVES OR RADIOACTIVE MATERIALS.

safety-kleen.

Container Contents

☒ Bulk ☐ Mixed Lab

Manifest # NJU-HAZ 99991
Manifest page 2 Line Item C
RQ

	Year	Month	Day	Code							Number	
Container Number:	9	9	0	6	2	3	N	J	S	M	U	–	26-29	Chemist
DOT Shipping Name: NON-REGULATED MATERIAL														Absorbent C V O
Container Type: DRM Size: 55	UN/NA Number —													HM
Hazard Class: — Division:	Chemical: — Constituents:													

Profile Number	[illegible]
Disposal Site	[illegible]
Approval Code	[illegible]

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01	PETROLEUM OIL				40-60%		L	1 x 400#		NONE
02	LUBRICATING/CUTTING OIL				40-60%					
03										
04										
05										
06										
07										
08										
09										
10										
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ABSORBENT	PS - PHYSICAL STATE	IC - INTERNAL CONTAINER
C - CORN COB	L - LIQUID/POURABLE	G - GLASS M - METAL
V - VERMICULITE	S - SOLID	P - PLASTIC F - PAPER
O - OTHER	X - SLUDGE	

This Lab Pack list continues: YES ☐ NO ☒ This is page ___ of ___

ORIGINAL - FINAL T.S.D. • GREEN - TRANS/CERT • YELLOW - TRANSPORTER • PINK - 1ST T.S.D. • GOLD - GENERATOR

THIS WASTE DOES NOT CONTAIN ANY DIOXINS, CHLORINATED FURANS, EXPLOSIVES OR RADIOACTIVE MATERIALS.

safety-kleen.

Container Contents

☒ Bulk ☐ Mixed Lab

Manifest # [illegible]
Manifest page 1 Line Item B
RQ

	Year	Month	Day	Code	Number
Container Number:	9 9	0 6	2 3	N J S N J –	30-36

Chemist

DOT Shipping Name:

Absorbent C V O

Container Type: Size:

UN/NA Number

HM

Hazard Class:
Division:

Chemical:
Constituents:

Profile Number	[illegible]
Disposal Site	[illegible]
Approval Code	[illegible]

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01	[illegible]						[illegible]	1 x 400#		[illegible]
02										
03										
04										
05										
06										
07										
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ABSORBENT	PS - PHYSICAL STATE	IC - INTERNAL CONTAINER	
C - CORN COB	L - LIQUID/POURABLE	G - GLASS	M - METAL
V - VERMICULITE	S - SOLID	P - PLASTIC	F - PAPER
O - OTHER	X - SLUDGE		

This Lab Pack list continues: YES ☐ NO ☒ This is page _____ of _____

ORIGINAL - FINAL T.S.D. • GREEN - TRANS/CERT • YELLOW - DISPOSER • PINK - 1ST T.S.D. • GOLD - GENERATOR

THIS WASTE DOES NOT CONTAIN ANY DIOXINS, CHLORINATED FURANS, EXPLOSIVES OR RADIOACTIVE MATERIALS.

safety-kleen.

Container Contents

☒ Bulk ☐ Mixed Lab

Manifest # [illegible]
Manifest page 1 Line Item C
RQ

	Year	Month	Day	Code	Number	
Container Number:	9[illegible]	[illegible]	[illegible]	N J [illegible]	37-42	Chemist
DOT Shipping Name:	[illegible]					Absorbent C V O
Container Type: [illegible]	Size: [illegible]	UN/NA Number			HM	
Hazard Class: Division:		Chemical: Constituents:				

Profile Number	[illegible]
Disposal Site	[illegible]
Approval Code	[illegible]

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01	[illegible]						5	1 x 100#		[illegible]
02										
03										
04										
05										
06										
07										
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28										

ABSORBENT	PS - PHYSICAL STATE	IC - INTERNAL CONTAINER	
C - CORN COB	L - LIQUID/POURABLE	G - GLASS	M - METAL
V - VERMICULITE	S - SOLID	P - PLASTIC	F - PAPER
O - OTHER	X - SLUDGE		

This Lab Pack list continues: YES ☐ NO ☑ This is page ____ of ____

ORIGINAL - FINAL T.S.D. • GREEN - TRANS/CERT • YELLOW - DISPOSER • PINK - 1ST T.S.D. • GOLD - GENERATOR

THIS WASTE DOES NOT CONTAIN ANY DIOXINS, CHLORINATED FURANS, EXPLOSIVES OR RADIOACTIVE MATERIALS.

safety-kleen.

Container Contents

☒ Bulk ☐ Mixed Lab

Manifest # [illegible]
Manifest page 1 Line Item D
RQ

Container Number:	Year	Month	Day	Code							Number	Chemist
	9	1	0	6	2	1	N	J	3	MV	– 93-96	

DOT Shipping Name: [illegible]	Absorbent C V O
Container Type: DRY Size: 55	UN/NA Number — HM —
Hazard Class: Division:	Chemical: Constituents:

Profile Number	[illegible]
Disposal Site	[illegible]
Approval Code	[illegible]

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01	[illegible]	[illegible]				99%	L	1 × 400#		[illegible]
02	METALS					<.01%				
03	[illegible]					<.1%				
04						<.05%				
05										
06										
07										
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ABSORBENT	PS - PHYSICAL STATE	IC - INTERNAL CONTAINER
C - CORN COB	L - LIQUID/POURABLE	G - GLASS M - METAL
V - VERMICULITE	S - SOLID	P - PLASTIC F - PAPER
O - OTHER	X - SLUDGE	

This Lab Pack list continues: YES ☐ NO ☒ This is page ____ of ____

ORIGINAL - FINAL T.S.D. • GREEN - TRANS/CERT • YELLOW - DISPOSER • PINK - 1ST T.S.D. • GOLD - GENERATOR

THIS WASTE DOES NOT CONTAIN ANY DIOXINS, CHLORINATED FURANS, EXPLOSIVES OR RADIOACTIVE MATERIALS.

safety-kleen.

Container Contents

☒ Bulk ☐ Mixed Lab

Manifest # NON-HAZ 79191
Manifest page 2 Line Item A
RQ

	Year	Month	Day	Code	Number
Container Number:	9 9	0 6	2 3	N J 3 M V –	97-57

Chemist

DOT Shipping Name: NON-REGULATED MATERIAL

Absorbent C V O

Container Type: DRM Size 55 | UN/NA Number – | HM

Hazard Class: – Division: Chemical: – Constituents:

Profile Number	CSMU-000
Disposal Site	WMI
Approval Code	AWD-2

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01	NYLON TURNINGS						S	1 x 400#		NONE
02	WATER TOLERANT OIL					0 %				
03										
04										
05										
06										
07										
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ABSORBENT	PS - PHYSICAL STATE	IC - INTERNAL CONTAINER
C - CORN COB	L - LIQUID/POURABLE	G - GLASS M - METAL
V - VERMICULITE	S - SOLID	P - PLASTIC F - PAPER
O - OTHER	X - SLUDGE	

This Lab Pack list continues: YES ☐ NO ☒ This is page ___ of ___

ORIGINAL - FINAL T.S.D. • GREEN - TRANS/CERT • YELLOW - DISPOSER • PINK - 1ST T.S.D. • GOLD - GENERATOR

THIS WASTE DOES NOT CONTAIN ANY DIOXINS, CHLORINATED FURANS, EXPLOSIVES OR RADIOACTIVE MATERIALS.

safety-kleen.

Container Contents

☒ Bulk ☐ Mixed Lab

Manifest # [illegible]
Manifest page 2 Line Item 3
RQ

	Year	Month	Day	Code					Number	
Container Number:	9	9	0	6	0	3	N	J	58-61	Chemist
DOT Shipping Name: NON REGULATED MATERIAL										Absorbent C V O
Container Type: Size:	UN/NA Number –							HM		
Hazard Class: – Division:	Chemical: – Constituents:									

Profile Number	[illegible]
Disposal Site	[illegible]
Approval Code	[illegible]

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01	[illegible]						[illegible]			[illegible]
02	[illegible]					<100%				
03						[illegible]				
04										
05										
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ABSORBENT	PS - PHYSICAL STATE	IC - INTERNAL CONTAINER
C - CORN COB	L - LIQUID/POURABLE	G - GLASS M - METAL
V - VERMICULITE	S - SOLID	P - PLASTIC F - PAPER
O - OTHER	X - SLUDGE	

This Lab Pack list continues: YES ☐ NO ☐ This is page ____ of ____

ORIGINAL - FINAL T.S.D. • GREEN - TRANS/CERT • YELLOW - DISPOSER • PINK - 1ST T.S.D. • GOLD - GENERATOR

Safety-Kleen.

CUSTOMER NO.	BILLING NO.	SALESPERSON	DATE
PICKUP DATE	CLIENT P.O.	DISP. SITE SWO	COUNTY

BILLING CUSTOMER

PICK-UP CUSTOMER AND ADDRESS

CHEMIST/DRIVER

TRANSPORTATION (04000)	UNIT/PRICE 30/55/3-5	UNIT/PRICE 85	EXTENSION
0-50 MILES			
51-100 MILES			
101-200 MILES			
200-500 MILES			
▶ 500 MILES			
TOTAL			

LABOR (04045)	HOURS	PRICE
Chemist 3 X 3HRS =	9HRS	
OTHER		
Project Manager		

PROFESSIONAL SERVICES (04035)	QUANTITY	PRICE
SAMPLE ANALYSIS		
WASTE STREAM EVALUATION		

EQUIPMENT (04065)	QUANTITY	PRICE

DISPOSAL (04060)

MATERIALS (04040)	QUANTITY	PRICE
85-G Salvage Drum-New		
55-G 17C, 17H, 17E Recon.		
55-G 37M - New		
30-G 17H - New		
30-G, 20-G Fiber New		
5-G Pail - 37E, 37A-New, 34-5, 35-50		
Dot Spec. Wooden Box		
Drum Thief		
Disposal Coliwassa		
Absorbant, Clay, Vermiculite, CornCob - Bag		
Drum Pump-Use & Decon.		
4 Mil Liners		
Reactive Bags		
Dot Labels	8	
EPA Labels	65	
Sample Bottles		
Protective Gear - Level I		
Protective Gear - Level II		
Packing Materials 5G		
Packing Materials 20G		
Packing Materials 300G, 55G		

OTHER (04055)	QUANTITY	PRICE
Minimum Charge		

PROFILE/LABPACK	DESCRIPTION	QTY.	UM	UNIT PRICE
6SMU-001	OIL	[illegible]	[illegible]	
6SMU-002	WATER SOLUBLE OIL	[illegible]	[illegible]	
6SMU-003	SPECIAL DRY/OIL	[illegible]	[illegible]	
6SMU-005	[illegible] WASTE [illegible]	4.00	[illegible]	
6SMU-008	MILLER TURNINGS	[illegible]	[illegible]	
6SMU-010	WASTE PAINT RELATED MATERIAL	[illegible]	[illegible]	
6SMU-011	SPRAY ALUMINUM	[illegible]	[illegible]	

X Michael [illegible]

Remarks

1. ACCTG-1	2. Customer Service Rep.	3. Customer Service Supv.	4. Operations

586-7546 (3-94)

GENR SIGNATURE P2SUL005651

FACILITY COPY

safety-kleen

Service Center

Tuesday, July 27, 1999

MICHAEL LYDON
SULZER METCO
1101 PROSPECT AVENUE
WESTBURY NY 11590

Dear Sir/Madam:

Enclosed please find a Certificate of Disposal which certifies that waste which Safety-Kleen (TS), Inc. picked up from your site on 06/23/1999, manifest number NJSMU-99491 , has been properly disposed.

This certificate indicates the container number, date of disposal, disposal site and disposal method for all of the material picked up on the referenced manifest.

If for any reason, your company address or information should change, please contact our manifest and records department at (301) 939-6014 or (301) 939-6024. It is imperative that we keep your records current at all times.
If you have any questions, please feel free to contact your customer service representative.

Safety-Kleen (TS), Inc..

Enclosure

Safety-Kleen (TS), Inc.
3527 Whiskey Bottom Road Laurel, Maryland 20724
Phone 301.939.6000 Fax 301.939.6066

HAZARDOUS MATERIALS WASTE DISPOSAL

safety-kleen.

SAFETY KLEEN (TS), INC.
3527 WHISKEY BOTTOM ROAD
LAUREL MD 20724-

Mail To: SULZER METCO
1101 PROSPECT AVENUE
WESTBURY NY 11590
Attention: MICHAEL LYDON

Pickup Address: SULZER METCO
325 DUFFY AVENUE
HICKSVILLE NY 11801

EPA ID: NYD057731663

Manifest No: NJSMU-99491

This is to certify that hazardous material removed from SULZER METCO

has been disposed of in accordance with all applicable local, state and federal regulations in the following manner.

Container	Date	Location	Method
990623-NJSMU-001 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-002 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-003 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-004 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-005 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-006 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-007 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-008 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-009 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-010 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-011 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-012 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-013 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-014 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery

Operations

Date: 07/26/99

HAZARDOUS MATERIALS WASTE DISPOSAL

safety-kleen

SAFETY KLEEN (TS), INC.
3527 WHISKEY BOTTOM ROAD
LAUREL MD 20724-

Page: 2 Manifest No: NJSMU-99491

This is to certify that hazardous material removed from SULZER METCO

has been disposed of in accordance with all applicable local, state and federal regulations in the following manner.

Container	Date	Location	Method
990623-NJSMU-015 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-016 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-017 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-018 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-019 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-020 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-021 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-022 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-023 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-024 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-025 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-026 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-027 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-028 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-029 6SMU-001	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-030 6SMU-002	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-031 6SMU-002	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery

Operations

Date: 07/26/99

HAZARDOUS MATERIALS WASTE DISPOSAL

safety-kleen

SAFETY KLEEN (TS), INC.
3527 WHISKEY BOTTOM ROAD
LAUREL MD 20724-

Page: 3 Manifest No: NJSMU-99491

This is to certify that hazardous material removed from SULZER METCO

has been disposed of in accordance with all applicable local, state and federal regulations in the following manner.

Container	Date	Location	Method
990623-NJSMU-032 6SMU-002	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-033 6SMU-002	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-034 6SMU-002	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-035 6SMU-002	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-036 6SMU-002	06/28/99	SAFETY-KLEEN CORPORATION LINDEN NJ	BTU Recovery
990623-NJSMU-037 6SMU-003	07/15/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990623-NJSMU-038 6SMU-003	07/15/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990623-NJSMU-039 6SMU-003	07/15/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990623-NJSMU-040 6SMU-003	07/15/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990623-NJSMU-041 6SMU-003	07/15/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990623-NJSMU-042 6SMU-003	07/15/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990623-NJSMU-043 6SMU-005	07/08/99	SAFETY-KLEEN (PINEWOOD), INC. PINEWOOD SC	Chemically Secure Landfill
990623-NJSMU-044 6SMU-005	07/08/99	SAFETY-KLEEN (PINEWOOD), INC. PINEWOOD SC	Chemically Secure Landfill
990623-NJSMU-045 6SMU-005	07/08/99	SAFETY-KLEEN (PINEWOOD), INC. PINEWOOD SC	Chemically Secure Landfill
990623-NJSMU-046 6SMU-005	07/08/99	SAFETY-KLEEN (PINEWOOD), INC. PINEWOOD SC	Chemically Secure Landfill
990623-NJSMU-047 6SMU-008	07/15/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990623-NJSMU-048 6SMU-008	07/15/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)

Brinton H. Hoar

Operations

Date: 07/26/99

HAZARDOUS MATERIALS WASTE DISPOSAL

safety-kleen

SAFETY KLEEN (TS), INC.
3527 WHISKEY BOTTOM ROAD
LAUREL MD 20724-

Page: 4 Manifest No: NJSMU-99491

This is to certify that hazardous material removed from SULZER METCO

has been disposed of in accordance with all applicable local, state and federal regulations in the following manner.

Container	Date	Location	Method
990623-NJSMU-049 6SMU-008	07/15/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990623-NJSMU-050 6SMU-008	07/15/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990623-NJSMU-051 6SMU-008	07/15/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990623-NJSMU-052 6SMU-008	07/15/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990623-NJSMU-053 6SMU-008	07/15/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990623-NJSMU-054 6SMU-008	07/15/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990623-NJSMU-055 6SMU-008	07/15/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990623-NJSMU-056 6SMU-008	07/15/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990623-NJSMU-057 6SMU-008	07/15/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990623-NJSMU-058 6SMU-011	07/08/99	SAFETY-KLEEN (PINEWOOD), INC. PINEWOOD SC	Chemically Secure Landfill
990623-NJSMU-059 6SMU-011	07/08/99	SAFETY-KLEEN (PINEWOOD), INC. PINEWOOD SC	Chemically Secure Landfill
990623-NJSMU-060 6SMU-011	07/08/99	SAFETY-KLEEN (PINEWOOD), INC. PINEWOOD SC	Chemically Secure Landfill
990623-NJSMU-061 6SMU-011	07/08/99	SAFETY-KLEEN (PINEWOOD), INC. PINEWOOD SC	Chemically Secure Landfill

Brandon H. Howard

Operations

Date: 07/26/99

Please print or type
(Form designed for use on elite (12 pitch) typewriter.)

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. N Y D 1 3 1 3 1 8 6 5 1

Manifest Document No.

2. Page 1 of

3. Generator's Name and Mailing Address
Sulzer Metco
1101 Prospect Ave., Westbury, NY 11590

4. Generator's Phone (516) 338-2337

Same

5. Transporter 1 Company Name: Chemical Pollution Control Inc.

6. US EPA ID Number: N Y D 0 8 2 7 8 5 4 2 9

A. Transporter's Phone: 516-586-0333

7. Transporter 2 Company Name

8. US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address
Chemical Pollution Control Inc.
120 South Fourth Street
Bay Shore, NY 11706

10. US EPA ID Number: N Y D 0 8 2 7 8 5 4 2 9

C. Facility's Phone: 516-586-0333

11. Waste Shipping Name and Description	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. METAL- CERAMIC POWDER	003	DM	00767	P
b. GLASS BEADS ALUMINUM OXIDE-STEEL GRIT	001	DM	00701	P
c. CERAMIC POWDER	001	DM	00547	P
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

Emergency Response (516)586-0333

A) 3375 B
B) 3375 K
C) 3375 M

16. **GENERATOR'S CERTIFICATION:** I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.

Printed/Typed Name	Signature	Month	Day	Year
Michael S. Lydon	Michael S. Lydon	05	06	98

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
MICHAEL J SMITH	[illegible]	05	06	98

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
FRANK FAZIO	Frank Fazio	05	06	98

GENERATOR
TRANSPORTER
FACILITY

Printed by J. PETKELLER & ASSOCIATES, INC.
Neenah, WI 54957-0368

ORIGINAL – RETURN TO GENERATOR

PE-BL 8475 Rev. 1/97

Please print or type
(Form designed for use on elite (12-pitch) typewriter.)

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD131318651
Manifest Document No.
2. Page 1 of

3. Generator's Name and Mailing Address
Sulzer Metco
1101 Prospect Ave., Westbury, NY 11590
4. Generator's Phone (516) 338-2337

Same

5. Transporter 1 Company Name: Chemical Pollution Control Inc.
6. US EPA ID Number: NYD082785429
A. Transporter's Phone: 516-586-0333

7. Transporter 2 Company Name
8. US EPA ID Number
B. Transporter's Phone

9. Designated Facility Name and Site Address
Chemical Pollution Control Inc.
120 South Fourth Street
Bay Shore, NY 11706
10. US EPA ID Number: NYD082785429
C. Facility's Phone: 516-586-0333

11. Waste Shipping Name and Description	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. METAL-CERAMIC POWDER	003	DM	00767	P
b. GLASS BEADS ALUMINUM OXIDE-STEEL GRIT	001	DM	00701	P
c. CERAMIC POWDER	001	DM	00547	P
d.				

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
Emergency Response (516) 586-0333
A) 3375 B
B) 3375 K
C) 3375 M

16. **GENERATOR'S CERTIFICATION:** I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.

Printed/Typed Name	Signature	Month	Day	Year
Michael S. Lydon	Michael S. Lydon	05	06	98

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
MICHAEL J. SMITH	[illegible]	05	06	98

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year

GENERATOR — TRANSPORTER — FACILITY

Printed by J. J. KELLER & ASSOCIATES, INC.
Neenah, WI 54957-0368

GENERATOR'S COPY

12-BLS-C5 Rev. 1/97

Hazardous Waste Prospect Avenue 2008

Shipment Date	HWM Manifest #	Date HWM TSDF Copy Received	Waste Description	TSDF	TSDF EPA ID#	TSDF Profile	HW Codes	Number	Container Type	Quantity	UOM	Total in Pounds	Total in Tons	Handling Code
01/12/07	000600407 FLE	01/17/07	Waste Chromic Acid Solution	Clean Harbors	MAD039322250	CH189142	D002, D006, D007, D008	1	Drum	574	P	574	0.287	T
02/02/07	000600960FLE	02/11/07	Hazardous Waste Solid (Filters, Chromium)	Clean Harbors	MAD039322250	CH189135	D007	10	Drum	906	P	906	0.453	L
03/30/07	000943783FLE	04/09/07	Waste Chromic Acid Solution	Clean Harbors	MAD039322250	CH189142	D002, D006, D007, D008	3	DF	1,499	P	1,499	0.7495	T
03/30/07	000943783FLE	04/09/07	Hazardous Waste Solid (Filters, Chromium)	Clean Harbors	MAD039322250	CH189135	D007	1	CW	441	P	441	0.2205	L
03/30/07	000943783FLE	04/09/07	Waste Consumer Commodity, ORM-D (Ammonium Hydroxide)	Clean Harbors	MAD039322250	CH248157	D002	1 Skid	CW	192	P	192	0.096	B
04/09/07	000948519FLE	04/17/019	Waste aerosols	Clean Harbors	MAD039322250	LOORQ	D001	1	DF	12	P	12	0.006	B
04/09/07	000948519FLE	04/17/019	RQ, Waste Paint Related Material (Toluene Paint)	Clean Harbors	MAD039322250	LFB1	D001, U220	1	Drum	180	P	180	0.09	B
04/09/07	000948519FLE	04/17/019	Waste Paint	Clean Harbors	MAD039322250	CH202786	D001	2	Drum	400	P	400	0.2	B
04/09/07	000948519FLE	04/17/019	Waste Paint	Clean Harbors	MAD039322250	CH202792	D001	3	Drum	600	P	600	0.3	B
04/09/07	000948519FLE	04/17/019	Waste Flammable Liquid, Toxic, Corrosive	Clean Harbors	MAD039322250	LOORD	D001, D002, F002, U220	1	DF	30	P	30	0.015	B
04/09/07	000948519FLE	04/17/019	Waste Toxic Liquids, Organic	Clean Harbors	MAD039322250	LOORO	U080, U210	1	DF	60	P	60	0.03	B
04/09/07	000948519FLE	04/17/019	Waste Sodium Hydroxide Solution	Clean Harbors	MAD039322250	LOORB	D002	1	DF	4	P	4	0.002	B
04/09/07	000948519FLE	04/17/019	Waste Amines, liquid, corrosive	Clean Harbors	MAD039322250	LOORC	D002	1	DF	40	P	40	0.02	B
04/09/07	000948519FLE	04/17/019	RQ, Waste Mercury	Clean Harbors	MAD039322250	LCHG2	D009	1	DF	4	P	4	0.002	R
04/09/07	000948519FLE	04/17/019	Env. Haz. Substances (nickel cadmium batteries)	Clean Harbors	MAD039322250	CH202699	None	1	Drum	10	P	10	0.005	R
04/09/07	000948519FLE	04/17/019	Combustible liquid	Clean Harbors	MAD039322250	CH249400	None	1	Drum	369	P	369	0.1845	B
04/09/07	000948519FLE	04/17/019	Waste Lithium	Clean Harbors	MAD039322250		D001, D003	1	Drum	12	P	12	0.006	B
04/26/07	000948558FLE	04/26/07	Ceramic Oxide, Chromium	Clean Harbors	MAD039322250	CH245367	D007	2	Drum	461	P	461	0.2305	
05/07/07	000934065FLE	05/10/07	Ceramic Oxide, Chromium	Clean Harbors	MAD039322250	CH245367	D007	5	Drum	1,873	P	1,873	0.9365	
05/18/07	000934267FLE	05/23/07	Ceramic Oxide, Chromium	Clean Harbors	MAD039322250	CH245367	D007	1	Drum	282	P	282	0.141	L
06/01/07	000934381FLE	06/09/07	Ceramic Oxide, Chromium	Clean Harbors	MAD039322250	CH245367	D007	1	Drum	296	P	296	0.148	L
06/01/07	000934382FLE	06/09/07	Waste Paint Related Material	Clean Harbors	MAD039322250	CH203842	D001	1	Drum	457	P	457	0.2285	B
06/01/07	000934392FLE	06/09/07	Waste Paint	Clean Harbors	MAD039322250	CH202792	D001	1	Drum	83	P	83	0.0415	B
06/01/07	000934392FLE	06/09/07	Hydrochloric Acid, Nitric Acid	Clean Harbors	MAD039322250	CH189112	D002, D006, D007, D008	1	Drum	472	P	472	0.236	T
06/01/07	000934392FLE	06/09/07	Filters, Chromium	Clean Harbors	MAD039322250	CH189135	D007	2	CW	633	P	633	0.3165	L
06/11/07	000934432FLE	07/03/07	Methanol, Graphite	Clean Harbors	MAD039322250	CH92537	F003	1	Drum	237	P	237	0.1185	B
07/27/07	000932217FLE	08/27/07	Waste Paint	Clean Harbors	MAD039322250	CH202797	D001	1	Drum	28	P	28	0.014	B
07/27/07	000932217FLE	08/27/07	Waste Corrosive Liquid	Clean Harbors	MAD039322250	CH189106	D002, D006	2	Drum	933	P	933	0.4665	T
07/27/07	000932217FLE	08/27/07	Waste Chromium Acid Solution	Clean Harbors	MAD039322250	CH189142	D002, D006	1	Drum	447	P	447	0.2235	T
07/27/07	000932217FLE	08/27/07	Haz Waste Liquid (Chromium sludge)	Clean Harbors	MAD039322250	CH266112	D007	1	Drum	575	P	575	0.2875	L
08/24/07	000540107FLE	09/24/07	Waste Aerosols 2.1 UN1950	Clean Harbors	MAD039322250	CH259424	D001, F002	1	DF	5	P	5	0.0025	B
08/24/07	000540107FLE	09/24/07	Waste Corrosive Liquid	Clean Harbors	MAD039322250	CH189112	D002, D006, D007, D008	1	DF	524	P	524	0.262	T
08/24/07	000540107FLE	09/24/07	Waste Chromic Acid Solution	Clean Harbors	MAD039322250	CH189142	D002, D006, D007, D008	1	DF	509	P	509	0.2545	T

09/07/07	000540185FLE	09/26/07	Waste Chromic Acid Solution	Clean Harbors	MAD039322250	CH189142	D002, D006, D007, D008	1	DF	.491	P	.491	0.2455	T
10/17/07	000540444FLE	11/06/07	Waste Kerosene	Clean Harbors	MAD039322250	CH189103	D001	2	Drum	.674	P	.674	0.337	B
10/17/07	000540444FLE	11/06/07	Waste Corrosive Acid	Clean Harbors	MAD039322250	CH189112	D002, D006, D007, D008	1	Drum	.493	P	.493	0.2465	T
10/17/07	000540444FLE	11/06/07	Haz Waste Solid (Chromium)	Clean Harbors	MAD039322250	CH275813	D007	1	Drum	.322	P	.322	0.161	L
10/17/07	000540444FLE	11/06/07	Waste Chromic Acid Solution	Clean Harbors	MAD039322250	CH189142	D002, D006, D007, D008	1	DF	.423	P	.423	0.2115	T
11/16/07	001055822FLE	11/16/07	Waste Chromic Acid Solution	Clean Harbors	MAD039322250	CH189142	D002, D006, D007, D008	1	Drum	.500	P	.500	0.25	T
11/30/2007	001867543FLE		Methanol, Graphite	Clean Harbors	MAD039322250	CH92537	F003	1	Drum	.484	P	.484	0.242	B
11/30/2007	001867543FLE		Waste Chromic Acid Solution	Clean Harbors	MAD039322250	CH189142	D002, D006, D007, D008	1	Drum	.487	P	.487	0.2435	T
12/28/2007	001056291FLE		Ceramic Oxide, Chromium	Clean Harbors	MAD039322250	7707	D007	5	Drum	1.633	P	1.633	0.8165	L

FORM CODES

FORM CODES DESCRIBE THE GENERAL PHYSICAL AND CHEMICAL CHARACTERISTICS OF A HAZARDOUS WASTE.

CODE	FORM CODE GROUP
	MIXED MEDIA/DEBRIS/DEVICES - WASTE THAT IS A MIXTURE OF ORGANIC AND INORGANIC WASTES, LIQUID AND SOLID WASTES, OR DEVICES THAT ARE NOT EASILY CATEGORIZED
W001	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE
W002	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, EMPTY FIBER OR PLASTIC CONTAINERS, GLASS, PIPING, OTHER SOLIDS (USUALLY FROM CONSTRUCTION, DEMOLITION, CLEANING, REMEDIATION)
W004	LAB PACKS CONTAINING ACUTE HAZARDOUS WASTE
W301	CONTAMINATED SOIL (USUALLY FROM SPILL CLEAN UP, DEMOLITION REMEDIATION
W309	BATTERIES, BATTERY PARTS, CORES, CASINGS (LEAD ACID OR OTHER TYPES)
W310	FILTERS, SOLID ADSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON (USUALLY FROM PRODUCTION, INTERMITTENT PROCESSES, OR REMEDIATION)
W320	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.)
W512	SEDIMENT OR LAGOON DRAGOUT, DRILLING OR OTHER MUDS
W801	COMPRESSED GASES
	INORGANIC LIQUIDS - WASTE THAT IS PRIMARILY INORGANIC AND HIGHLY FLUID (E.G., AQUEOUS), WITH LOW SUSPENDED INORGANIC SOLIDS AND LOW ORGANIC CONTENT
W101	VERY DILUTE AQUEOUS WASTE CONTAINING MORE THAN 99% WATER (LAND DISPOSAL RESTRICTION DEFINED WASTEWATER THAT IS NOT EXEMPT UNDER SPDES OR POTW DISCHARGES)
W103	SPENT CONCENTRATED ACID (5% OR MORE)
W105	ACIDIC AQUEOUS WASTES LESS THAN 5% ACID <DILUTE BUT PH < 2
W107	AQUEOUS WASTE CONTAINING CYANIDES (GENERALLY CAUSTIC)
W110	CAUSTIC AQUEOUS WASTE WITHOUT CYANIDES (PH > 12.5)
W113	OTHER AQUEOUS WASTE OR WASTEWATERS (FLUID BUT NOT SLUDGE)
W117	WASTE LIQUID MERCURY (METALLIC)
W119	OTHER INORGANIC LIQUID (SPECIFY IN COMMENTS)
	ORGANIC LIQUIDS - WASTE THAT IS PRIMARILY ORGANIC AND IS HIGHLY FLUID, WITH LOW INORGANIC SOLIDS CONTENT AND LOW-TO-MODERATE WATER CONTENT
W200	STILL BOTTOMS IN LIQUID FORM (FLUID BUT NOT SLUDGE)
W202	CONCENTRATED HALOGENATED (E.G., CHLORINATED) SOLVENT
W203	CONCENTRATED NON-HALOGENATED (E.G., NON-CHLORINATED) SOLVENT
W204	CONCENTRATED HALOGENATED/ NON-HALOGENATED SOLVENT MIXTURE
W205	OIL-WATER EMULSION OR MIXTURE (FLUID BUT NOT SLUDGE)
W206	WASTE OIL
W209	PAINT, INK, LACQUER, OR VARNISH (FLUID - NOT DRIED OUT OR SLUDGE)
W210	REACTIVE OR POLYMERIZABLE ORGANIC LIQUIDS AND ADHESIVES (FLUID - BUT NOT SLUDGE)
W211	PAINT THINNER OR PETROLEUM DISTILLATES
W219	OTHER ORGANIC LIQUID (SPECIFY IN COMMENTS)

SOURCE CODES

SOURCE CODES DESCRIBE THE TYPE OF PROCESS OR ACTIVITY (I.E., SOURCE) FROM WHICH A HAZARDOUS WASTE WAS GENERATED.

CODE	SOURCE CODE GROUP
	WASTES FROM ONGOING PRODUCTION AND SERVICE PROCESSES
G01	DIP, FLUSH OR SPRAY RINSING(USING SOLVENTS TO CLEAN OR PREPARE PARTS OR ASSEMBLIES FOR FURTHER PROCESSING)
G02	STRIPPING AND ACID OR CAUSTIC CLEANING(USING CAUSTICS TO REMOVE COATINGS OR LAYERS FROM PARTS OR ASSEMBLIES)
G03	PLATING AND PHOSPHATING (ELECTRO - OR NON-ELECTROPLATING)
G04	ETCHING(USING CAUSTICS OR OTHER METHODS TO REMOVE LAYERS)
G05	METAL FORMING AND TREATMENT (PICKLING, HEAT TREATING, ETC.)
G06	PAINTING AND COATING(MANUFACTURING, BUILDING, OR MAINTANENCE)
G07	PRODUCT AND BY-PRODUCT PROCESSING (DIRECT FLOW OF WASTES FROM CHEMICAL MANUFACTURING OR PROCESSING)
G08	REMOVAL OF SPENT PROCESS LIQUIDS OR CATALYSTS(BULK REMOVAL OF WASTE FROM CHEMICAL MANUFACTURING OR PROCESSING)
G09	OTHER PRODUCTION OR SERVICE-RELATED PROCESSES (SPECIFY IN COMMENTS)
	OTHER INTERMITTENT EVENTS OR PROCESSES
G11	DISCARDING OFF-SPECIFICATION OR OUT-OF-DATE CHEMICALS OR PRODUCTS(UNUSED CHEMICALS OR PRODUCTS - CORRESPONDS TO P AND U WASTES ONLY)
G12	LAGOON OR SEDIMENT DRAGOUT AND LEACHATE COLLECTION(LARGE SCALE OPERATION IN OPEN PITS, PONDS OR LAGOONS)
G13	CLEANING OUT PROCESS EQUIPMENT(PERIODIC SLUDGE OR RESIDUAL REMOVAL FROM ENCLOSED PROCESSES INCLUDING INTERNAL SCRUBBING)
G14	REMOVAL OF TANK SLUDGE, SEDIMENTS OR SLAG(PERIODIC SLUDGE OR RESIDUAL REMOVAL FROM STORAGE TANKS INCLUDING INTERNAL SCRUBBING)
G15	PROCESS EQUIPMENT CHANGE-OUT OR DISCONTINUATION OF EQUIPMENT USE(FINAL MATERIALS AND RESIDUALS REMOVAL)
G16	OIL CHANGES AND FILTER OR BATTERY REPLACEMENT(AUTOMOTIVE, MACHINERY)
G19	OTHER ONE-TIME OR INTERMITTENT PROCESSES (SPECIFY IN COMMENTS)
	POLLUTION CONTROL AND WASTE MANAGEMENT PROCESS RESIDUALS
G21	AIR POLLUTION CONTROL DEVICES (BAGHOUSE DUST OR ASH FROM STACK SCRUBBERS OR PRECIPATATORS, VAPOR COLLECTORS, ETC.)
G22	LABORATORY ANALYTICAL WASTES (USED CHEMICALS)
G23	WASTEWATER TREATMENT (SLUDGE, FILTER CAKE, ETC.)
G24	SOLVENT OR PRODUCT DISTILLATION OR RECOVERY (SLUDGE, WASTE SOLVENT, BOTTOMS FROM RECOVERY/RECYCLING OF USED PRODUCT)
G25	HAZARDOUS WASTE MANAGEMENT - INDICATE MANAGEMENT METHOD
G26	LEACHATE COLLECTION(FROM LANDFILL OPERATIONS)
G27	HAZARDOUS RESIDUAL FROM TREATMENT OR RECOVERY OF UNIVERSAL WASTE
	SPILLS AND ACCIDENTAL RELEASES
G31	ACCIDENTAL CONTAMINATION OF PRODUCTS, MATERIALS OR CONTAINERS(OTHER THAN G11)
G32	CLEANUP OF SPILL RESIDUES(INFREQUENT, NOT ROUTINE)
G33	LEAK COLLECTION AND FLOOR SWEEPING(ONGOING, ROUTINE)
G39	OTHER CLEANUP OF CURRENT CONTAMINATION (SPECIFY IN COMMENTS)
	REMEDIATION OF PAST CONTAMINATION
G41	CLOSURE OF HAZARDOUS WASTE MANAGEMENT UNIT UNDER RCRA
G42	CORRECTIVE ACTION AT A SOLID WASTE MANAGEMENT UNIT UNDER RCRA
G43	REMEDIAL ACTION OR EMERGENCY RESPONSE UNDER SUPERFUND
G44	STATE PROGRAM OR VOLUNTARY CLEANUP
G45	UNDERGROUND STORAGE TANK CLEANUP
G49	OTHER REMEDIATION (SPECIFY IN COMMENTS)

MANAGEMENT METHOD CODES

MANAGEMENT METHOD CODES DESCRIBE THE TYPE OF HAZARDOUS WASTE MANAGEMENT SYSTEM USED TO TREAT OR DISPOSE A HAZARDOUS WASTE.

CODE	MANAGEMENT METHOD CODE GROUP
	RECLAMATION AND RECOVERY
H010	METALS RECOVERY INCLUDING RETORTING, SMELTING, CHEMICAL, ETC.
H020	SOLVENTS RECOVERY (DISTILLATION, EXTRACTION)
H039	OTHER RECOVERY OR RECLAMATION FOR REUSE INCLUDING ACID REGENERATION, ORGANICS RECOVERY, ETC. (SPECIFY IN COMMENTS)
H050	ENERGY RECOVERY AT THIS SITE - USE AS FUEL (INCLUDES ON-SITE FUEL BLENDING)
H061	FUEL BLENDING PRIOR TO ENERGY RECOVERY AT ANOTHER SITE
	DESTRUCTION OR TREATMENT PRIOR TO DISPOSAL AT ANOTHER SITE
H040	INCINERATION - THERMAL DESTRUCTION OTHER THAN USE AS A FUEL (INCLUDES ANY PREPARATION PRIOR TO BURNING)
H071	CHEMICAL REDUCTION WITH OR WITHOUT PRECIPITATION (INCLUDES ANY PREPARATION OR FINAL PRECESSES FRO CONSOLIDATION OF RESIDUALS)
H073	CYANIDE DESTRUCTION WITH OR WITHOUT PRECIPITATION (INCLUDES ANY PREPARATION OR FINAL PRECESSES FRO CONSOLIDATION OF RESIDUALS)
H075	CHEMICAL OXIDATION (INCLUDES ANY PREPARATION OR FINAL PRECESSES FRO CONSOLIDATION OF RESIDUALS)
H076	WET AIR OXIDATION (INCLUDES ANY PREPARATION OR FINAL PRECESSES FRO CONSOLIDATION OF RESIDUALS)
H077	OTHER CHEMICAL PRECIPITATION WITH OR WITHOUT PRE-TREATMENT (INCLUDES ANY PREPARATION OR FINAL PRECESSES FRO CONSOLIDATION OF RESIDUALS)
H081	BIOLOGICAL TREATMENT WITH OR WITHOUT PRECIPITATION (INCLUDES ANY PREPARATION OR FINAL PRECESSES FRO CONSOLIDATION OF RESIDUALS)
H082	ADSORPTION (AS THE MAJOR COMPONENT OF TREATMENT)
H083	AIR OR STEAM STRIPPING (AS THE MAJOR COMPONENT OF TREATMENT)
H101	SLUDGE TREATMENT AND/OR DEWATERING (AS THE MAJOR COMPONENT OF TREATMENT; NOT H071-H075, H077, OR H082)
H103	ABSORPTION (AS THE MAJOR COMPONENT OF TREATMENT)
H111	STABILIZATION OR CHEMICAL FIXATION PRIOR TO DISPOSAL AT ANOTHER SITE (AS THE MAJOR COMPONENT OF TREATMENT; NOT H071-H075, H077, OR H082)
H112	MACRO-ENCAPSULATION PRIOR TO DISPOSAL AT ANOTHER SITE (AS THE MAJOR COMPONENT OF TREATMENT; NOT H071-H075, H077, OR H082)
H121	NEUTRALIZATION ONLY (NO OTHER TREATMENT)
H122	EVAPORATION (AS THE MAJOR COMPONENT OF TREATMENT; NOT REPORTABLE AS H071-H083)
H123	SETTLING OR CLARIFICATION (AS THE MAJOR COMPONENT OF TREATMENT; NOT REPORTABLE AS H071-H083)
H124	PHASE SEPARATION (AS THE MAJOR COMPONENT OF TREATMENT; NOT REPORTABLE AS H071-H083)
H129	OTHER TREATMENT (SPECIFY IN COMMENTS)
	DISPOSAL
H131	LAND TREATMENT OR APPLICATION (TO INCLUDE ON-SITE TREATMENT AND/OR STABILIZATION)
H132	LANDFILL OR SURFACE IMPOUNDMENT THAT WILL BE CLOSED AS LANDFILL (TO INCLUDE ON-SITE TREATMENT AND/OR STABILIZATION)
H134	DEEPWELL OR UNDERGROUND INJECTION (WITH OR WITHOUT TREATMENT)
H135	DISCHARGE TO SEWER/POTW OR NPDES (WITH PRIOR STORAGE - WITH OR WITHOUT TREATMENT)
	STORAGE AND TRANSFER
H141	STORAGE, BULKING, AND/OR TRANSFER OFF SITE - NO TREATMENT/RECOVERY (H010-H129), FUEL BLENDING (H061), OR DISPOSAL (H131-H135) AT THIS SITE **DO NOT USE THIS CODE ON FORM GM, SECTION 1, BOX D, OR IN SECTION 2**

ALUMINUM COMPANY OF AMERICA
SPECIALTY METALS DIVISION
POST OFFICE BOX 472
ROCKDALE, TEXAS 76567

ALCOA

1992 September 16

METCO, INC.
1101 PROSPECT AVENUE
WESTBURY, NY 11590

Dear NANCY ST. NICHOLAS:

For many years aluminum atomized powders have been listed by name as regulated materials under the United Nations Recommendations on the Transportation of Dangerous Goods. In the past, in the absence of test criteria to the contrary, we made our shipments of these materials under the UN recommendations as applied by the International Maritime Organization's Dangerous Goods Code (IMO). This practice entailed using UN-marked non-bulk packaging, applying hazardous warning labels and markings to this packaging, and identifying the powders on shipping documents as regulated dangerous goods by UN number and UN hazard class.

Recently, the Bureau of Mines of the United States Department of the Interior, an authorized testing facility, under DOT Hazardous Materials Transportation Regulations completed a thorough test program in accordance with these regulations and has determined that all grades, coated and uncoated, of Alcoa's aluminum atomized powder do not meet these definitions; therefore, are not covered by the UN recommendations. Specifically, the Bureau of Mines confirms that none of Alcoa's coated or uncoated aluminum powders meet the UN definitions of Division 4.1 or Division 4.3 and in accordance with special provision 184 these materials are, therefore, considered non-dangerous in transportation.

Also, they are not subject to the IMO Dangerous Goods Code, ICAO Technical Instructions, or the U.S. adaptation of the international recommendations published by the U.S. Department of Transportation in their Docket No. HM-181 and the Canadian adaptation of their Transportation of Dangerous Goods Regulations. In summary, we are implementing this change effective September 1, 1992, and will take the following action:

1) Reference to and use of United Nations hazard Class (4.1 and 4.3) and number (1309 and 1396) will be discontinued for shipping documentation, marking and labeling of all Alcoa aluminum powders.

2) Notification of this action is being sent to freight carriers and forwarders, port authorities, distribution centers and Chemtrec.

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SEP 29 1992
DIVISION OF PE

3) Section IX of the MSDS, copy attached, has been changed to read: "Tested under UN criteria (Appendix E.DOT) and found not to meet the definition of any transportation hazard class. Therefore, not regulated by DOT, ICAO, IMO, Canadian TDG and UN Recommendations. See 172.101(c) 49CFR."

You may wish to pass this letter on to your transportation department in the event that a carrier has refused to deliver your atomized powder.

Sincerely,

Sue B. Key

Sue B. Key
Sales Service Representative

Specialty Metals Division

Material Safety Data Sheet

Aluminum Company of America, SMD Powder, P.O. Box 472, Rockdale, TX 76567

ALCOA NO. 123

Common Name	Phone	Date
Atomized Aluminum Powder	Emergency: 412-553-4001 Chemtrec: 800-424-9300 Technical: 412-553-4649	Rev 92-09-01 Orig 80-09-17

Prepared by the Hazardous Materials Control Committee.

SECTION I. Material Description

Chemical Name & Formula: Aluminum, Al
Other Designation: Grade Series 12, 12C, 101, 102, 102H, 104, 105, 108, 110, 115, 119, 120, 123, 126, 132, 200, 1126, 1202, 1203, 1204, 1220, 1221, 1222, 1224, 1230, 1231, 1233, 1235, 1261, 1401, 1620, 1622, 6401, 7123, 7124, 7125, 7126, 7401, 8401, 8122, 9280.
CAS No.: Aluminum (7429-90-5)
Manufacturer: Aluminum Co. of America
Product Use: Various metallurgical/chemical/structural/coating applications.

SECTION II. Ingredients and Occupational Exposure Limits

	% by Weight Typical		TWA in mg/m³ ACGIH TLV	TWA in mg/m³ OSHA PEL
Aluminum	. . 99.7	Aluminum, total dust	10	15, 5 (respirable)

SECTION III. Physical Data

Physical Form: Finely divided aluminum powder.
Boiling Temperature: Not applicable
Freeze-Melt Temperature: 1195-1215°F (646-657°C)
Vapor Pressure (mm): Not applicable
Vapor Density (air = 1): Not applicable
Evaporation Rate: Not applicable
Specific Gravity: Not applicable
Density: 50-81 lb/ft³ (0.8-1.3 g/cm³)
Water Solubility: Insoluble; insoluble in organic solvents
pH: Not applicable
Color: Varies from dull gray to metallic silver
Odor: None
Odor Threshold (ppm): Not applicable
Coefficient of water/oil distribution: Not applicable

SECTION IV. Fire and Explosion Data

Flashpoint:	Auto-Ignition Temp.:	Flammability Limits in Air: Upper:	Lower:
None	650°C (layered)	Minimum Explosive Concentration in Air	40 mg/L

Aluminum powder may be explosive when dispersed in air. Even a minor dust cloud can explode violently.

In case of fire: Use extreme care to prevent dust cloud formation. Use gentle surface application of Class D extinguishing agent or dry inert granular material (e.g., sand) to cover and ring the burning powder. Do not use fire extinguishers rated for Class A, B, or C fires. Do not use water or halogenated fire extinguishing agents. Do not disturb the burning powder or cause mixing of the agent with the burning powder. Do not disturb the powder until completely cool.

Firefighters should wear NIOSH approved, positive pressure, self-contained breathing apparatus and protective clothing when appropriate.

SECTION V. Reactivity Data

With water: Generates hydrogen and heat slowly. Water/aluminum powder mixtures may be especially hazardous when confined.
With heat: Oxidizes at a rate dependent on temperature.
With strong oxidizers: Violent reaction with much heat generated.
With halogenated compounds: Many halogenated hydrocarbons, including halogenated fire extinguishing agents, can react violently with finely divided aluminum.

When exposed to fire, aluminum oxide and aluminum nitride are formed.

SECTION VI. Health Hazard Information (See Section II for exposure limits.)

Aluminum dust/fines are low health risks by inhalation. Aluminum should be treated as a nuisance dust and is so defined by the American Conference of Governmental Industrial Hygienists (ACGIH).

SECTION VII. Spill, Leak & Disposal Procedures

Avoid all ignition sources around spill area. Prohibit smoking. Do not use water for spill clean-up. Avoid dusting of powder to the greatest extent possible. Sweep spilled powder with natural bristle broom (push type recommended). Pick up material with non-sparking shovel. Place carefully in dry, water-tight containers. Seal containers.

For disposal of this material as a waste, act in accordance with all applicable federal, state, and local waste management regulations.

After complete clean-up by sweeping, area may be washed down with copious quantities of water, if necessary.

RCRA Hazardous Waste No. Not Federally Regulated

SECTION VIII. Special Protection and Precautions

Use with adequate explosion-proof ventilation to meet the exposure limits as listed in Section II. Use non-sparking handling equipment per NFPA 651, 65. Cover and reseal partially empty containers. Keep absolutely dry. Storage rooms must be of fire resistant construction. It is preferable not to store powder in same room as other combustible materials. Smoking is prohibited.

Where respiratory protection is necessary, select appropriate NIOSH-approved respiratory protection (dust respirator, etc.) based on the actual or potential airborne contaminants and their concentrations present.

SECTION IX. Regulatory Information

Components of this product are listed on the TSCA inventory (USA), the Domestic Substances List (Canada), and the EINECS core inventory (EC Market).

All electrical equipment must be suitable for use in hazardous atmospheres involving aluminum powder in accordance with 29 CFR 1910.307. The National Electrical Code, NFPA 70, contains guidelines for determining the type and design of equipment and installation which will meet this requirement.

For purposes of SARA III reporting, this substance contains the following listed ingredients:

Aluminum (fume/dust) -- Section 313 List

This material fits the EPA Hazard Category definitions of Reactive and Sudden Release of Pressure Hazards, under SARA Sections 311, 312.

Transportation

Tested under UN criteria (Appendix E, DOT) and found not to meet the definition of any transportation hazard class. Therefore, not regulated by DOT, ICAO, IMO, Canadian TDG and UN Recommendations. (See 712.101 (c), 49CFR.)

SECTION X. References

Aluminum Association Bulletin TR-2, "Recommendations for Storage and Handling of Aluminum Pigments and Powders"

Bureau of Mines #6516, "Explosibility of Metal Powders (1964)"

NFPA 651, "Standard for the Manufacture of Aluminum and Magnesium Powder"

NFPA 65, "Standard for the Processing and Finishing of Aluminum"

U.S. Dept. of Health and Human Services, NIOSH: Registry of Toxic Effects of Chemical Substances, 1985-86 Edition

Sax, N. Irving: Dangerous Properties of Industrial Materials, Van Nostrand Reinhold Co., Inc., 1984

Information herein is given in good faith as authoritative and valid; however, no warranty, express or implied, can be made.

Specialty Metals Division

Material Safety Data Sheet

Aluminum Company of America, SMD Powder, P.O. Box 472, Rockdale, TX 76567

ALCOA NO. 126

Common Name	Phone	Date
Atomized Aluminum/Silicon Alloy Powder	Emergency: 412-553-4001 Chemtrec: 800-424-9300 Technical: 412-553-4649	Rev 92-09-01 Orig 80-09-17

Prepared by the Hazardous Materials Control Committee.

SECTION I. Material Description

Chemical Name & Formula: Alloy of aluminum (Al) and silicon (Si)
Other Designation: Atomized Powder 718
CAS No.: Aluminum (7429-90-5); Silicon (7440-21-3)
Manufacturer: Aluminum Co. of America
Product Use: Various metallurgical/chemical/structural/coating applications.

SECTION II. Ingredients and Occupational Exposure Limits

	% by Weight Typical		TWA in mg/m³ ACGIH TLV	OSHA PEL
Aluminum. . .	87.5			
Silicon . . .	12.0	Aluminum, total dust	10	15, 5 (respirable)
		Silicon dust	10	10, 5 (respirable)

Silicon: oral rat LD_{50}: 3160 mg/kg body weight

SECTION III. Physical Data

Physical Form: Finely divided aluminum powder
Boiling Temperature: Not applicable
Freeze-Melt Temperature: 1070-1080°F (577-582°C)
Vapor Pressure: Not applicable
Evaporation Rate: Not applicable
Specific Gravity: Not applicable
Density: 69 lb/ft³ (1.1 g/cm³)
Water Solubility: Insoluble; insoluble in organic solvents
pH: Not applicable
Color: Varies from dull gray to metallic silver
Odor: None

SECTION IV. Fire and Explosion Data

Flashpoint:	Auto-Ignition Temp.:	Flammability Limits in Air: Upper:	Lower:
None	650°C (layered)	Minimum Explosive Concentration in Air	40 mg/L

Aluminum powder may be explosive when dispersed in air. Even a minor dust cloud can explode violently.

In case of fire: Use extreme care to prevent dust cloud formation. Use gentle surface application of Class D extinguishing agent or dry inert granular material (e.g., sand) to cover and ring the burning powder. Do not use fire extinguishers rated for Class A, B, or C fires. Do not use water or halogenated fire extinguishing agents. Do not disturb the burning powder or cause mixing of the agent with the burning powder. Do not disturb the powder until completely cool.

Firefighters should wear NIOSH approved, positive pressure, self-contained breathing apparatus and protective clothing when appropriate.

SECTION V. Reactivity Data

With water: Generates hydrogen and heat slowly. Water/aluminum powder mixtures may be especially hazardous when confined.
With heat: Oxidizes at a rate dependent on temperature.
With strong oxidizers: Violent reaction with much heat generated.
With halogenated compounds: Many halogenated hydrocarbons, including halogenated fire extinguishing agents, can react violently with finely divided aluminum.
When exposed to fire, aluminum oxide and aluminum nitride are formed.

SECTION VI. Health Hazard Information (See Section II for exposure limits.)

Chronic exposure to inert dusts of silicon may cause increased airways resistance and contribute to chronic bronchitis. Intratracheal administration of silicon in rabbits produced significant pulmonary lesions.

Aluminum dust/fines and fumes are low health risks by inhalation. Aluminum should be treated as a nuisance dust and is so defined by the American Conference of Governmental Industrial Hygienists (ACGIH).

SECTION VII. Spill, Leak & Disposal Procedures

Avoid all ignition sources around spill area. Prohibit smoking.

Do not use water for spill clean-up. Avoid dusting of powder to the greatest extent possible. Sweep spilled powder with natural bristle broom (push type recom- mended). Pick up material with non-sparking shovel. Place carefully in dry, water-tight containers. Seal containers.

For disposal of this material as a waste, act in accordance with all applicable federal, state, and local waste management regulations.

After complete clean-up by sweeping, area may be washed down with copious amounts of water, if necessary.

RCRA Hazardous Waste No. Not Federally Regulated

SECTION VIII. Special Protection and Precautions

Use with adequate explosion-proof ventilation to meet the exposure limits as listed in Section II. Use non-sparking handling equipment per NFPA 651, 65. Cover and reseal partially empty containers. Keep absolutely dry. Storage rooms must be of fire resistant construction. It is preferable not to store powder in same room as other combustible materials. Smoking is prohibited.

Where respiratory protection is necessary, select appropriate NIOSH-approved respiratory protection (dust respirator, etc.) based on the actual or potential airborne contaminants and their concentrations present.

SECTION IX. Regulatory Information

Components of this product are listed on the TSCA inventory (USA), the Domestic Substances List (Canada), and the EINECS core inventory (EC Market).

All electrical equipment must be suitable for use in hazardous atmospheres involving aluminum powder in accordance with 29 CFR 1910.307. The National Electric Code, NFPA 70, contains guidelines for determining the type and design of equipment and installation which will meet this requirement.

For purposes of SARA III reporting, this substance contains the following listed ingredients:

Aluminum (fume/dust) -- Section 313 List

This material fits the EPA Hazard Category definitions of Reactive and Sudden Release of Pressure Hazards and Delayed (Chronic) Health Hazard under SARA Sections 311, 312.

Transportation

Tested under UN criteria (Appendix E, DOT) and found not to meet the definition of any transportation hazard class. Therefore, not regulated by DOT, ICAO, IMO, Canadian TDG and UN Recommendations. (See 172.101 (c), 49CFR.)

SECTION X. References

Aluminum Association Bulletin TR-2, "Recommendation for Storage and Handling of Aluminum Pigments and Powders"

Bureau of Mines #6516, "Explosibility of Metal Powders (1964)"

NFPA 651, "Standard for the Manufacture of Aluminum and Magnesium Powder"

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(9-94)-7

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

Please print or type. DO NOT STAPLE.

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.

2. Page 1 of

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number NY C 420097-4

B. Generator's ID.

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Phone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone ( )

9. Designed Facility Name and Site Address | 10. US EPA ID Number

G. State Facility's ID

H. Facility's Phone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. c.

b. d.

K. Handling Codes for Wastes Listed Above

a. c.

b. d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR,** if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

NY C 420097-4

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 5-Generator-Mailed by TSD facility

P2SUL006901

48-14-1 (9-94)-7f

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

Form Approved OMB No. 2050-0039, Expires 9-30-96

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. [illegible] | Manifest Document No. [illegible]
2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address [illegible]
4. Generator's Phone ([illegible])

A. State Manifest Document Number NY C 420097-4
B. Generator's ID [illegible]

5. Transporter 1 (Company Name) [illegible]
6. US EPA ID Number [illegible]

C. State Transporter's ID
D. Transporter's Phone ([illegible])

7. Transporter 2 (Company Name)
8. US EPA ID Number

E. State Transporter's ID
F. Transporter's Phone ( )

9. Designed Facility Name and Site Address [illegible]
10. US EPA ID Number [illegible]

G. State Facility's ID
H. Facility's Phone ( ) [illegible]

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. [illegible]	1	[illegible]	[illegible]	[illegible]	EPA [illegible] STATE
b. [illegible]	1	[illegible]	[illegible]	[illegible]	EPA [illegible] STATE
c.					EPA STATE
d.					EPA STATE

J. Additional Descriptions for Materials Listed Above
a. [illegible] D008 D018, D035, D039, D040
b. [illegible] D008, D006 D018, D035, D039, D040
c.
d.

K. Handling Codes for Wastes Listed Above
a. [illegible] b. c. d.

15. Special Handling Instructions and Additional Information
[illegible]

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Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

NY C 420097-4

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 8-Generator-retained by generator

P2SUL006902

safety-kleen

2-116-09

LAND DISPOSAL RESTRICTION AND WASTE ANALYSIS CRITERIA FORM

PHASE II LDR NOTICE: GENERATOR IS NOT REQUIRED TO LIST UNDERLYING CONSTITUENTS BECAUSE TREATER WILL MONITOR FOR ALL 216 REGULATED CONSTITUENTS PRIOR TO DISPOSAL.

TO: SAFETY-KLEEN CORP. (DESIGNATED FACILITY) EPA ID NO. _____ (DESIGNATED FACILITY)

ADDRESS: _____

Under manifest/sales service number _____ the generator noted below is shipping to you a waste determined to be restricted under 40 CFR Part 268. In accordance with 40 CFR Part 268.7, the generator hereby provides notice that the waste is restricted from land disposal. A copy of this form must be kept by the generator and facility for five (5) years from the date of waste shipment.

PLEASE ✓ THE APPROPRIATE BOXES

WASTE NAME (FOR NON-WASTE WATER)	WASTE CODE	THE WASTE MAY CONTAIN THE FOLLOWING RESTRICTED CONSTITUENTS	TREATMENT STANDARD OR METHOD
☐ Waste Petroleum Naphtha 105	D001	Ignitable Liquid (High TOC Subcategory)	COMBUSTION (CMBST)
		Halogenated Organic Compounds (HOC's)≥1000 mg/l	or recovery (RORGS)(40 CFR 268.42)(non-waste water)
	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/KG
	D035	Methyl Ethyl Ketone	36 (non-waste water) MG/KG
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
	D040	Trichloroethylene	6.0 (non-waste water) MG/KG
☐ Waste Petroleum Naphtha 140	D001	Ignitable Liquid (High TOC Subcategory)	CMBST, or RORGS (40 CFR 268.42)(non-waste water)
	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/KG
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
☐ Actrel Solvent (If customer specific TCLP is not available)	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/KG
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
	D040	Trichloroethylene	6.0 (non-waste water) MG/KG
☐ Aqueous Parts Washer	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
☐ 150 Premium Solvent	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/KG
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
	D040	Trichloroethylene	6.0 (non-waste water) MG/KG
☐ AQUEOUS BRAKE CLEANER	D006	Cadmium	1.0 (non-waste water) MG/L
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
☐ Waste Petroleum Naphtha (sludges from Safety-Kleen Service Center Operations)	D001	Ignitable Liquid (High TOC Subcategory)	CMBST, or RORGS (40 CFR 268.42)(non-waste water)
	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
	D040	Trichloroethylene	6.0 (non-waste water) MG/KG
☐ Photo Imaging	D011	Silver	5.0 (non-waste water) MG/KG
☐ Waste Compound Cleaning Liquid/ Immersion cleaner 699	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/L
	D027	1, 4-Dichlorobenzene	6.0 (non-waste water) MG/KG
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
	D040	Trichloroethylene	6.0 (non-waste water) MG/KG
☐ Waste Gasoline Filters	D001	Ignitable Liquid (High TOC Subcategory)	CMBST, or RORGS (40 CFR 268.42)(non-waste water)
	D018	Benzene	10 (non-waste water) MG/KG

OPTIONAL STATE INFO.

MACHINE NUMBER	SPECIFIC GRAVITY	EXCESS FLUID IN DRUM? (MS>2/3)(C>1/3)(Y/N)	OFF-COLOR? (Y/N)	MORE THAN 30% SOLIDS? (Y/N)	UNUSUAL ODOR? (Y/N)	UNUSUAL MATERIALS INCLUDED/ADDED? (Y/N)

SPECIFIC GRAVITY ACCEPTANCE GUIDELINES

SALES REPRESENTATIVE SIGNATURE
(FOR OPTIONAL STATE INFORMATION)

The constituent composition is based on knowledge of the waste (via Material Safety Data Sheets for the chemical(s) used, and the process which created the waste).

***These treatment standards do not preclude reclamation prior to final disposition.**

Generator Company _____ P2SUL006903 EPA ID NO.: _____

GENERATOR

FORM 1339 (1/96)

Is your RETURN ADDRESS completed on the reverse side?

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

NEW YORK STATE
DIV SOLID & HAZARDOUS WASTE
MANIFEST SECTION
PO BOX 12820
ALBANY NY 12212

4a. Article Number
P 610 811 729

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: *(Print Name)*

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature: *(Addressee or Agent)*
X

PS Form **3811**, December 1994 Domestic Return Receipt

Thank you for using Return Receipt Service.

P 610 811 729

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail *(See reverse)*

Sent to NYS Div Solid & Hazardous Waste- Manifest Section
Street & Number PO Box 12820
Post Office, State, & ZIP Code Albany, NY 12212

Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form **3800**, April 1995

Fold at line over top of envelope to the right of the return address

CERTIFIED MAIL

P 610 811 729

P2SUL006904

VHW-001 (REV. 9/86)

State of New Jersey
Department of Environmental Protection
Division of Hazardous Waste Management
Manifest Section
CN 028, Trenton, NJ 08625

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. N Y D 1 3 1 8 6 5 1 — Manifest Document No.

2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
PERKIN ELMER CORP METCO DIVISION
1101 PROSPECT AVE WESTBURY NY 11590

4. Generator's Phone (516) 334-1300

A. State Manifest Document Number **NJA 945030**

B. State Generator's ID NYJA043 SAME
NJX137EW

5. Transporter 1 Company Name ENVIRONMENTAL TRANSFER CORPORATION — 6. US EPA ID Number N J D 9 9 1 2 9 1 5 8 4

C. State Trans. ID NJDEPS6321 64024

7. Transporter 2 Company Name — 8. US EPA ID Number

D. Transporter's Phone (201) 347-2215

E. State Trans. ID

9. Designated Facility Name and Site Address
ADVANCED ENVIRONMENTAL TECHNOLOGY CORPORATION
1 EDEN LANE
FLANDERS NJ 07836

10. US EPA ID Number N J D 9 8 0 5 3 6 5 0 3

F. Transporter's Phone ( )

G. State Facility's ID N/A

H. Facility's Phone (201) 347-1902

11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*

	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X	~~HAZARDOUS WASTE SOLID, NOS~~ CRM-E NA9189 WASTE CHEMICALS, NOS	0001	DF	000050	P	D007
b.		DOT NON-REGULATED NONE	0005	DM	002000	P	X91
c.							
d.							

J. Additional Descriptions for Materials Listed Above
S/E-ACID SPILL CLEAN-UP
a. S/T-100% ALUMINUM OXIDE
b.
c.
d. ~~PACKING SLIPS ATTACHED FOR CLARIFICATION (TRANSIT ONL~~

K. Handling Codes for Wastes Listed Above
a.
b.

15. Special Handling Instructions and Additional Information
(X910 REGULATED BY NJDEP ONLY)

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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GENERATOR

Printed/Typed Name: WILLIAM F. TITANSKI — Signature — Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

TRANSPORTER

Printed/Typed Name — Signature — Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space

FACILITY

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name — Signature — Month Day Year

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

NJA

EPA Form 8700-22 (Rev. 9/86) Previous editions are obsolete.

SIGNATURE AND INFORMATION *MUST* BE LEGIBLE ON ALL COPIES

3 — TSD MAIL TO - GENERATOR

P2SUL007704

VHW-001 (REV. 9/86)

State of New Jersey
Department of Environmental Protection
Division of Hazardous Waste Management
Manifest Section
CN 028, Trenton, NJ 08625

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.
Manifest Document No.
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

A. State Generator's ID
NJA 945030
B. State Transporter's ID

4. Generator's Phone ( )

5. Transporter 1 Company Name
6. US EPA ID Number
C. State Transporter's ID

7. Transporter 2 Company Name
8. US EPA ID Number
D. Transporter's Phone
E. State Transporter's ID

9. Designated Facility Name and Site Address
10. US EPA ID Number
F. Facility's Phone
G. State Facility's ID
H. Facility Owner or Operator:

GENERATOR

11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*

	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.		~~[illegible]~~ (GC)					
b.	X	WASTE CHEMICALS, NOS					
c.							
d.							

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

a. ~~[illegible]~~
b. (GC)
c.
d.

15. Special Handling Instructions and Additional Information

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Printed/Typed Name | Signature | Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

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Printed/Typed Name | Signature | Month Day Year

EPA Form 8700-22 (Rev. 9/88) Previous editions are obsolete.

SIGNATURE AND INFORMATION MUST BE LEGIBLE ON ALL COPIES

B — GENERATOR COPY

P2SUL007705

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

NJA

VHW-001 (REV. 9/88)

State of New Jersey
Department of Environmental Protection
Division of Hazardous Waste Management
Manifest Section
CN 028, Trenton, NJ 08625

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Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD131318651 Manifest Tracking No.

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
PERKIN ELMER CORP METCO DIVISION
1101 PROSPECT AVE WESTBURY NY 11590

4. Generator's Phone (516) 334-1300

A. State Manifest Document Number **NJA 0945030**

B. State Generator's ID NYJA043 SAME
NJXL37EW

5. Transporter 1 Company Name: ENVIRONMENTAL TRANSFER CORPORATION
6. US EPA ID Number: NJD991291584

C. State Trans. ID ~~NJDEPS6321-64024~~

7. Transporter 2 Company Name
8. US EPA ID Number

D. Transporter's Phone (201) 347-2215

E. State Trans. ID

9. Designated Facility Name and Site Address
ADVANCED ENVIRONMENTAL TECHNOLOGY CORPORATION
1 EDEN LANE
FLANDERS NJ 07836
10. US EPA ID Number: NJD980536593

F. Transporter's Phone ( )

G. State Facility's ID N/A

H. Facility's Phone (201) 347-1909

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	~~HAZARDOUS WASTE SOLID, NOS~~ ORM-E NA9189 WASTE CHEMICALS, NOS	X	0001	DF	000050	P	D007
b.	DOT NON-REGULATED NONE		0005	DM	002000	P	X910
c.							
d.							

J. Additional Descriptions for Materials Listed Above
S/E-ACID SPILL CLEAN-UP
a. ~~S/T 100% ALUMINUM OXIDE~~
b.
c.
d. ~~PACKING SLIPS ATTACHED FOR CLARIFICATION (TRANSIT ONLY)~~

K. Handling Codes for Wastes Listed Above
a. NY = B
b. NY = L
c.
d.

15. Special Handling Instructions and Additional Information
(X910 REGULATED BY NJDEP ONLY)

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR,** if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: CONSTANCE L. CORREY Signature: Constance L Correy Month Day Year 1 12 0 7 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: WILLIAM F. TITANSKI Signature: William F. Titanski Month Day Year 1 12 0 7 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name Signature Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name Signature Month Day Year

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

NJA0945030

EPA Form 8700-22 (Rev. 9/88) Previous editions are obsolete.

SIGNATURE AND INFORMATION *MUST* BE LEGIBLE ON ALL COPIES

1 — TSD MAIL TO - TSD'S STATE

P2SUL007706

AETC
ADVANCED ENVIRONMENTAL TECHNOLOGY CORPORATION

Field Services

Shipping/Receiving

1987©

Worksheet # _____

P.O. # _____

Date _____

Company: _____

Address: _____

City/State: _____

Destination: _____

Transporter: _____

Placard: _____

UNITS	CONTAINER SIZE	NET WEIGHT	DISPOSAL CODE	AETC PRODUCT CODE	DESCRIPTION
	ID / OD				
	ID / OD				
	ID / OD				
	ID / OD				
	ID / OD				
	ID / OD				
	ID / OD				
	ID / OD				
	ID / OD				
	ID / OD				
	ID / OD				
	ID / OD				
	ID / OD				
	ID / OD				
	ID / OD				
	ID / OD				

_____ TOTAL DRUMS	_____ TOTAL NET WEIGHT	MANIFEST NUMBER	PAGE(S) _____
_____ TOTAL PIECES	SUBJECT TO CHANGE BY SCALE		

MANPOWER

NAME	TIME IN	TIME OUT	LUNCH

MATERIALS / EQUIPMENT

VERMICULITE	10936		SAWDUST	10940/10941		RO-CON 21C-60	10954
17H DRUMS	10900		17E DRUMS	10903		RO-CON 21C-115	10953
6O DRUMS	10905		6D PAILS	10909			
85 GAL METAL RECOVERY	10911		10 GAL METAL RECOVERY	10915			
ENVIROPAX PLASTIC RECOVERY	10913		15A WOOD	10926			
12A50 FIBER	10923		12B15 FIBER	10925			
12A60 FIBER	10922		12A80 FIBER	10921			
30 GAL. 21C FIBER	10919		30 GAL. N/M 21C FIBER	11025			
EQUIPMENT LEVEL A B C					HOURS		
EMERGENCY RESPONSE			CASE NUMBER				

TRAVEL TIME ROUND TRIP		MILEAGE ROUND TRIP		OVERNIGHT JOB		NUMBER OF NIGHTS		NUMBER OF VEHICLES	

COMMENTS: _____

I the undersigned having full authority to execute this document on behalf of said company (Generator) confirm that Advanced Environmental Technology Corporation (A.E.T.C.) has been contracted to perform waste packaging and or waste removal services and has satisfactorily documented and completed these services for which they were hired. Therefore as the authorized representative of the contracting company (Generator) I guarantee full and prompt payment to A.E.T.C. for services rendered.

COMPANY (GENERATOR) AUTHORIZED REPRESENTATIVE

A.E.T.C. AUTHORIZED REPRESENTATIVE

CUSTOMER COPY

AETC
ADVANCED ENVIRONMENTAL TECHNOLOGY CORPORATION

PACKING SLIP

©1985 AETC

DATE ACCUMULATED	DATE SHIPPED	CONTAINER #
12/07/90	12/07/90	NJ11723 01 COM

PERKIN ELMER CORP (326900)
1101 PROSPECT AVE
METCO DIVISION
WESTBURY NY 11590
NYD131318651

GENERATOR — ADDRESS — EPA #

WASTE CHEMICALS, NOS

DOT NON-REGULATED NONE

DOT PROPER SHIPPING NAME — HAZARD CLASS UN/NA

DISPOSAL CODE	W.I.P. #	GROUP
OAKT95855	67749	

MANIFEST	PG/LINE	COMMON DRUMS	EPA CODE	CONTAINER TYPE
NJA0945030	1B	5	/X910	5517HDM

Page 1 of 1

UNIT	CONTAINER SIZE	NET WEIGHT	CHEMICAL NAME	WASTE TYPE
1	55 gal		100% ALUMINUM OXIDE	X910
			5 DRUMS TOTAL	

TOTAL NET WEIGHT 400 lb each Bill T.

TECHNICAL SUPERVISOR

INITIAL

FORM #W-15C-3

AETC
ADVANCED ENVIRONMENTAL TECHNOLOGY CORPORATION

PACKING SLIP

©1985 AETC

DATE ACCUMULATED	DATE SHIPPED	CONTAINER #
12/07/90	12/07/90	NJ11723 02

PERKIN ELMER CORP (326900)
1101 PROSPECT AVE
METCO DIVISION
WESTBURY NY 11590
NYD131318651

GENERATOR — ADDRESS — EPA #

HAZARDOUS WASTE SOLID, NOS
ORM-E NA9189

DOT PROPER SHIPPING NAME — HAZARD CLASS — UN/NA

ST000056980 106517

DISPOSAL CODE — W.I.P. # — GROUP

NJA0945030 1A

MANIFEST — PG/LINE

1 K/D007 30GALDF

COMMON DRUMS — EPA CODE — CONTAINER TYPE

4.09 cF

UNIT	CONTAINER SIZE	NET WEIGHT	CHEMICAL NAME (Page 1 of 1)	WASTE TYPE
1	30gal		70-80% GLASS,PLASTIC,PAPER,GLOVES,SPEEDI-DRY,20-30% SODIUM BICARBONATE,0-5% CHROMIC ACID,SULFURIC ACID,HYDROCHLORIC ACID, NITRIC ACID,ACETIC ACID,<1% WATER	D007

TOTAL NET WEIGHT: 50 lb

BILL T.

TECHNICAL SUPERVISOR — INITIAL

FORM #W-15C-3

TOXICITY CHARACTERISTIC CERTIFICATION FORM

Generator: McTco (Pelton Elmer) Prospect Ave
NKD131318651

Waste Information Profile (WIP) Number: 67749

Based on knowledge of the wastestream or analysis that has been conducted, this wastestream contains the following organic constituents at or above the regulatory concentrations:

	EPA HW Number	Contaminant	Regulatory Level (mg/l)
____	D018	Benzene	0.5
____	D019	Carbon tetrachloride	0.5
____	D020	Chlordane	0.03
____	D021	Chlorobenzene	100.0
____	D022	Chloroform	6.0
____	D023	o-Cresol	200.0
____	D024	m-Cresol	200.0
____	D025	p-Cresol	200.0
____	D026	Cresol	200.0
____	D027	1,4-Dichlorobenzene	7.5
____	D028	1,2-Dichloroethane	0.5
____	D029	1,1-Dichloroethylene	0.7
____	D030	2,4-Dinitrotoluene	0.13
____	D031	Heptachlor (and its hydroxide)	0.008
____	D032	Hexachlorobenzene	0.13
____	D033	Hexachloro-1,3-butadiene	0.5
____	D034	Hexachloroethane	3.0
____	D035	Methyl ethyl ketone	200.0
____	D036	Nitrobenzene	2.0
____	D037	Pentachlorophenol	100.0
____	D038	Pyridine	5.0
____	D039	Tetrachloroethylene	0.7
____	D040	Trichloroethylene	0.5
____	D041	2,4,5-Trichlorophenol	400.0
____	D042	2,4,6-Trichlorophenol	2.0
____	D043	Vinyl chloride	0.2

X Waste does not contain any of the above organic toxicity characteristic constituents in excess of the indicated regulatory levels.

I hereby certify that I have personally examined and am familiar with the information submitted in this and all attached documents. Based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate and complete to the best of my knowledge and ability and that all known and suspected hazards have been disclosed.

Signature: [illegible] Phone: 414-353-1311

Name (print or type): Christine L. Conway Title: Administrator

AETC

NUMERICAL TREATMENT STANDARDS
RESTRICTED WASTE NOTIFICATION FORM

Revised 8/8/90

This notice is being sent to you in accordance with 40 CFR 268.7 to inform you that this shipment contains wastes restricted from land disposal by the USEPA under the land dispos restrictions program. The following wastes or residue from the treatment of these wastes is restricted from land disposal unless the waste is below the treatment standards as specif in 40 CFR 268.41 and 40 CFR 268.43 for nonwastewater(N) or wastewater(W).

Generator Perkin Elmer Corp. Manifest # NJA0945030 Waste Analysis data is/is not attached. (Circle One)

D003 (___W - CN)
D003 (___N - CN)
D004 (___W ___N)
D005 (___W ___N)
D006 (___W ___N)
D007 (___W ✓N)
D008 (___W ___N)
D009 (___W)
D009 (___N - loHg)
D010 (___W ___N)
D011 (___W ___N)
D012 (___N)
D013 (___N)
D014 (___N)
D015 (___N)
D016 (___N)
D017 (___N)

F006 (___W ___N)
F007 (___W ___N)
F008 (___W ___N)
F009 (___W ___N)
F010 (___W ___N)

P004 (___W ___N)
P010 (___W ___N)
P011 (___W ___N)
P012 (___W ___N)
P013 (___W ___N)
P020 (___W ___N)
P021 (___W ___N)
P022 (___W)
P024 (___W ___N)
P029 (___W ___N)
P030 (___W ___N)
P036 (___W ___N)
P037 (___W ___N)
P038 (___W ___N)
P039 (___W ___N)
P047 (___W 4,6-Dinitro)
P047 (___N 4,6-Dinitro)
P048 (___W ___N)
P050 (___W ___N)
P051 (___W ___N)
P056 (___W)
P059 (___W ___N)
P060 (___W ___N)
P063 (___W ___N)
P065 (___W)
P065 (___N - Lo Hg IR)
P065 (___N - Lo Hg RMERC)
P071 (___W ___N)
P073 (___W ___N)
P074 (___W ___N)
P077 (___W ___N)
P082 (___W)
P089 (___W ___N)
P092 (___W)
P092 (___N - Lo Hg IR)
P092 (___N - Lo Hg RMERC)
P094 (___W ___N)
P097 (___W ___N)
P098 (___W ___N)
P099 (___W ___N)
P101 (___W ___N)
P103 (___W ___N)
P104 (___W ___N)
P106 (___W ___N)
P110 (___W ___N)
P113 (___W)
P114 (___W ___N)
P115 (___W)
P119 (___W)
P120 (___W)
P121 (___W ___N)
P123 (___W ___N)

U002 (___W ___N)
U003 (___W)
U004 (___W ___N)
U005 (___W ___N)
U009 (___W ___N)
U012 (___W ___N)
U018 (___W ___N)
U019 (___W ___N)
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U144 (___W ___N)
U145 (___W ___N)
U146 (___W ___N)
U151 (___W)
U151 (___N - Lo Hg RMERC)
U151 (___N - Lo Hg IR)
U152 (___W ___N)
U155 (___W ___N)
U157 (___W ___N)
U158 (___W ___N)
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U165 (___W ___N)
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U169 (___W ___N)
U170 (___W ___N)
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U183 (___W ___N)
U185 (___W ___N)
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U188 (___W ___N)
U190 (___W ___N)
U192 (___W ___N)
U196 (___W ___N)
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U209 (___W ___N)
U210 (___W ___N)
U211 (___W ___N)

U214 (___W)
U215 (___W)
U216 (___W)
U217 (___W)
U220 (___W ___N)
U225 (___W ___N)
U226 (___W ___N)
U227 (___W ___N)
U228 (___W ___N)
U235 (___W ___N)
U239 (___W ___N)
U240 (___W - 2,4,D)
U240 (___N - 2,4,D)
U243 (___W ___N)
U247 (___W ___N)
_____ (___W ___N)
_____ (___W ___N)
_____ (___W ___N)
_____ (___W ___N)
_____ (___W ___N)
_____ (___W ___N)
_____ (___W ___N)
_____ (___W ___N)

Signature Constance J Carey Date 12-07-90

AETC

EDEN LANE
FLANDERS, NJ 07836
201-347-7111

ADVANCED ENVIRONMENTAL TECHNOLOGY CORPORATION

WASTE INFORMATION PROFILE © 1986 AETC

AETC USE ONLY
DISP CODE: ST 56980

WASTE NAME: Acid Spill Clean Up
GENERATOR EPA I.D.: NYD131318651
GENERATOR NAME: MeTCO (Renew Glass)
WASTE I.D.: D007
ADDRESS: 1101 Prospect Ave

UNITS ____ PROD ____ CS ____ PC ____ COD ____ APP ____ **FOR AETC USE ONLY**

SHIPPING NAME: Hazardous Waste Solid, n.o.s.
HAZARD CLASS: ORM E
UN/NA: 9189
RQ: ____
PROCESS GENERATING WASTE: Spill Clean up

HALOGENS
- ☑ <2%
- ☐ 2-5%
- ☐ 5-10%
- ☐ 10-30%
- ☐ >30%
- ☐ Cl
- ☐ F
- ☐ Br
- ☐ I
- EXACT ____

LAYERS
- ☑ MULTILAYERED
- ☐ BI-LAYERED
- ☐ SINGLE PHASE

COLOR:

SOLIDS
- ☐ SUSPENDED
- ☐ SETTLEABLE
- ☐ DISSOLVED ____ %
- 100 %

ODOR
- ☐ NONE
- ☑ MILD
- ☐ STRONG
- DESCRIBE: Acidic

PHYSICAL STATE
- ☑ SOLID
- ☐ SEMI SOLID
- ☐ LIQUID
- ☐ GAS
- ☐ FLOWABLE POWDER
- ☐ PUMPABLE SEMISOLID

VISCOSITY
- ☐ HIGH (SYRUP)
- ☐ MEDIUM (OIL)
- ☐ LOW (WATER)
- N/A

PH
- ☐ <2
- ☐ 2-5
- ☐ 5-9
- ☐ 9-12.5
- ☐ >12.5
- ☐ EXACT ____

SPECIFIC GRAV.
- ☐ <.8
- ☑ .8-1.0
- ☐ 1.0
- ☐ 1.0-1.2
- ☐ >1.2
- ☐ EXACT ____

FLASH POINT (°F)
- ☐ <80
- ☐ 80-100
- ☐ 101-140
- ☐ 141-200
- ☐ >200
- ☐ NO FLASH
- ☐ EXACT ____

BTU/LB. ____
% ASH ____
WATER SOLUBILITY ____

HAZARDOUS CHARACTERISTICS
- ☐ REACTIVE
- SPECIFY N/A
- ☐ RADIOACTIVE
- ☐ EXPLOSIVE

CHEMICAL COMPOSITION — ACCOUNT FOR 100%

Name	%
Chemic, Hydrochloric, Perchloric, Nitric, Sulfuric, Acetic Acids	0-5
Broken glass, Paper, Plastic Gloves, Vermiculite, Speedidry	70-80
Sodium Carbonate	20-30
Water	<1

TOXICITY CHARACTERISTICS (AND OTHER METALS AND ORGANICS)
TOTAL (%) ☐ TOTAL (PPM) ☐ TCLP (mg/L) ☐

CONTAMINANT	CONC.
None	

FOR AETC USE ONLY

PRESENT CONTAINER (TYPE/SIZE): ☐ 17H ☐ 17E ☐ 6D ☑ FIBER DR. ☐ BOX ☐ OTHER ____ SIZE 30 gal

SHIPPING CONTAINER (TYPE/SIZE): ☐ 17H ☐ 17E ☐ 6D ☑ FIBER DR. ☐ BOX ☐ OTHER ____ SIZE 30 gal

ANTICIPATED VOLUME: ____ ☐ GALS. ☑ DRUMS ☐ CU. YDS. ☐ OTHER ____ PER ☑ ONE TIME ☐ MONTH ☐ YEAR

ADDITIONAL INFORMATION: ____

CERTIFICATION
I hereby certify that I have personally examined and am familiar with the information submitted in this and all attached documents. Based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete to the best of my knowledge and ability and that all known and suspected hazards have been disclosed.

Patrick A Tighe — SIGNATURE
12/7/90 — DATE
PHONE ____

Patrick A. Tighe — NAME (PRINT OR TYPE)
TITLE ____

106517

P2SUL007712

AETC

EDEN LANE
FLANDERS, NJ 07836
201-347-7111

ADVANCED ENVIRONMENTAL TECHNOLOGY CORPORATION

WASTE INFORMATION PROFILE © 1986 AETC

AETC USE ONLY

DISP CODE

WASTE NAME

GENERATOR EPA I.D.

GENERATOR NAME

WASTE I.D.

ADDRESS

UNITS PROD CS PC COD

FOR AETC USE ONLY

APP

SHIPPING NAME

HAZARD CLASS UN/NA RQ

PROCESS GENERATING WASTE

HALOGENS
- ☐ <2%
- ☐ 2-5%
- ☐ 5-10%
- ☐ 10-30%
- ☐ >30%

☐ Cl ☐ F ☐ Br ☐ I EXACT

LAYERS
- ☐ MULTILAYERED
- ☐ BI-LAYERED
- ☐ SINGLE PHASE

SOLIDS
- ☐ SUSPENDED ___ %
- ☐ SETTLEABLE ___ %
- ☐ DISSOLVED ___ %

COLOR:

ODOR
- ☐ NONE
- ☐ MILD
- ☐ STRONG

DESCRIBE:

PHYSICAL STATE
- ☐ SOLID
- ☐ SEMI SOLID
- ☐ LIQUID
- ☐ GAS
- ☐ FLOWABLE POWDER
- ☐ PUMPABLE SEMISOLID

PH
- ☐ <2
- ☐ 2-5
- ☐ 5-9
- ☐ 9-12.5
- ☐ >12.5
- ☐ EXACT

SPECIFIC GRAV.
- ☐ <.8
- ☐ .8-1.0
- ☐ 1.0
- ☐ 1.0-1.2
- ☐ >1.2
- ☐ EXACT

FLASH POINT (°F)
- ☐ <80
- ☐ 80-100
- ☐ 101-140
- ☐ 141-200
- ☐ >200
- ☐ NO FLASH
- ☐ EXACT

BTU/LB.

% ASH

WATER SOLUBILITY

VISCOSITY
- ☐ HIGH (SYRUP)
- ☐ MEDIUM (OIL)
- ☐ LOW (WATER)

HAZARDOUS CHARACTERISTICS
- ☐ REACTIVE
  SPECIFY
- ☐ RADIOACTIVE
- ☐ EXPLOSIVE

CHEMICAL COMPOSITION ACCOUNT FOR 100%

Name: %

TOXICITY CHARACTERISTICS
(AND OTHER METALS AND ORGANICS)

TOTAL (%) ☐ TOTAL (PPM) ☐ TCLP (mg/L) ☐

CONTAMINANT	CONC.

FOR AETC USE ONLY

PRESENT CONTAINER (TYPE/SIZE): ☐ 17H ☐ 17E ☐ 6D ☑ FIBER DR. ☐ BOX ☐ OTHER SIZE

SHIPPING CONTAINER (TYPE/SIZE): ☐ 17H ☐ 17E ☐ 6D ☐ FIBER DR. ☐ BOX ☐ OTHER SIZE

ANTICIPATED VOLUME: ☐ GALS. ☑ DRUMS ☐ CU. YDS. ☐ OTHER PER ☐ ONE TIME ☐ MONTH ☐ YEAR

ADDITIONAL INFORMATION:

CERTIFICATION

I hereby certify that I have personally examined and am familiar with the information submitted in this and all attached documents. Based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete to the best of my knowledge and ability and that all known and suspected hazards have been disclosed.

SIGNATURE DATE PHONE

106517

NAME (PRINT OR TYPE) TITLE

P2SUL007713

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0060
RUN DATE: 08/01/88

C 282200 1828 00029 W I
LOCATION FAC EP

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/07/87
(5) 11590	(10) REP: A TEICHER 334-1300	PRIOR CO ISSUE DATE 11/16/87
		PRIOR CO EXPIRATION DATE 11/15/88

FACILITY EMIS-CLASS / PGM-CODE: A2 POINT EMIS-CLASS / PGM-CODE:

EMISSION POINT 00029
(41)UTM-E: 622.2 KM. (42)STACK HEIGHT: 30 FT. (43)EXIT VELOCITY: 50.00 FT/SEC (44)SIC: 3569 (45)AGENCY-CODE-1: C (COUNTY)
(46)UTM-N: 513.4 KM. (47)HT ABV STRUC: 15 FT. (48)EXIT FLOW: 1975.00 ACFM (49)CO FEE: $25.00 (50)AGENCY-CODE-2: C (COUNTY)
(51)GRND ELEV: 139 FT. (52)STK DIAM: 11 IN. (53)EXIT TEMP: 72 DEGR F (54)CO CONDITIONS:

UNIT I
(55)HOURS/DAY: 1.0 (56)DAYS/YEAR: 200 (57)% OP BY SEASON: 25 25 25 25 (58)SOURCE CODE: 1303 SPRAYING (OTHER THAN
(59)BLDG: 1101 (60)FLOOR NAME: (61)RULE 1: 212.00 (62)RULE 2:

PROCESS/UNIT DESCRIPTION (72)DESCRIPTION 1. SPRAYING OF METAL WIRES OR POWDERS FOR TESTING
2. PURPOSES OF EQUIPMENT AND/OR WIRES OR POWDERS

CONTROL EQUIPMENT (73)TYPE: 012 IMPINGEMENT PLATE (74)MFG: UNITED SWIRL ORIFICE SCRUBBERS STM 25 (75)ID: 01 (76)DATE INSTALLED: 01/65
(77)DISPOSAL METHOD: 09 OTHER (78)USEFUL LIFE: 20 YEARS

AIR CONTAMINANTS	CAS NUMBER	ENV RATING	EMISSIONS ACTUAL	UNIT	HOW DET	PERMISSIBLE	% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR	ANNUAL EMISSIONS (LBS/YEAR) ACTUAL	10x	PERMISSIBLE
TUNGSTEN W	(085) 07440-33-7	(086) C	(087) .001	(088) 15	(089) 06	(090) .001	(091)	(092) .001	(093) .200	(094) 0	(095) .200
MOLYBDENUM (8CI9CI)	(096) 07439-98-7	(097) C	(098) .001	(099) 01	(100) 06	(101) .001	(102) 90.0	(103) .001	(104) .200	(105) 0	(106) .200
ALUMINUM	(107) 07429-90-5	(108) C	(109) .001	(110) 01	(111) 06	(112) .001	(113) 90.0	(114) .001	(115) .200	(116) 0	(117) .200
ALUMINUM OXIDE	(118) 01344-28-1	(119) C	(120) .001	(121) 01	(122) 06	(123) .001	(124) 90.0	(125) .001	(126) .200	(127) 0	(128) .200
TITANIUM OXIDE	(129) 13463-67-7	(130) C	(131) .001	(132) 01	(133) 06	(134) .001	(135) 90.0	(136) .001	(137) .200	(138) 0	(139) .200
NICKEL	(140) 07440-02-0	(141) C	(142) .001	(143) 01	(144) 06	(145) .001	(146) 90.0	(147) .001	(148) .200	(149) 0	(150) .200

NOTE - SHOULD NEW EVIDENCE REQUIRE LOWER AMBIENT LEVELS BE MET FOR THE ABOVE UNDERSCORED CAS NUMBER(S),

THE SOURCE OWNER MAY BE REQUIRED TO REDUCE EMISSIONS.

SPECIAL CONDITIONS (151)CONDITION 1. AG1 COMPLIANCE

CONTINUED ON NEXT PAGE

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0078
RUN DATE: 08/01/88

C 282200 1828 00035 W I
LOCATION FAC EP

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/07/87
(5) 11590	(10) REP: A TEICHER 334-1300	PRIOR CO ISSUE DATE 11/16/87
		PRIOR CO EXPIRATION DATE 11/15/88

FACILITY EMIS-CLASS / PGM-CODE: A2 POINT EMIS-CLASS / PGM-CODE:

EMISSION POINT 00035
(41)UTM-E: 622.2 KM. (42)STACK HEIGHT: 30 FT. (43)EXIT VELOCITY: 50.00 FT/SEC (44)SIC: 3569 (45)AGENCY-CODE-1: C (COUNTY)
(46)UTM-N: 513.4 KM. (47)HT ABV STRUC: 15 FT. (48)EXIT FLOW: 1975.00 ACFM (49)CO FEE: $25.00 (50)AGENCY-CODE-2: C (COUNTY)
(51)GRND ELEV: 139 FT. (52)STK DIAM: 11 IN. (53)EXIT TEMP: 72 DEGR F (54)CO CONDITIONS:

UNIT I
(55)HOURS/DAY: 1.0 (56)DAYS/YEAR: 200 (57)% OP BY SEASON: 25 25 25 25 (58)SOURCE CODE: 1303 SPRAYING (OTHER THAN
(59)BLDG: 1101 (60)FLOOR NAME: (61)RULE 1: 212.00 (62)RULE 2:

PROCESS/UNIT DESCRIPTION
(72)DESCRIPTION 1. SPRAYING OF METAL WIRES & POWDERS FOR TESTING
2. PURPOSES OF EQUIPMENT AND/OR WIRES OR POWDERS

CONTROL EQUIPMENT
(73)TYPE: 012 IMPINGEMENT PLATE (74)MFG: UNITED SWIRL ORIFICE SCRUBBERS STM 25 (75)ID: 01 (76)DATE INSTALLED: 06/72
(77)DISPOSAL METHOD: 09 OTHER (78)USEFUL LIFE: 20 YEARS

AIR CONTAMINANTS	CAS NUMBER	ENV RATING	EMISSIONS ACTUAL	UNIT	HOW DET	PERMISSIBLE	% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR	ANNUAL EMISSIONS (LBS/YEAR) ACTUAL	10x	PERMISSIBLE
TUNGSTEN W	(085) 07440-33-7	(086) C	(087) .001	(088) 15	(089) 06	(090) .001	(091)	(092) .001	(093) .200	(094) 0	(095) .200
MOLYBDENUM (8CI9CI)	(096) 07439-98-7	(097) C	(098) .001	(099) 01	(100) 06	(101) .001	(102) 90.0	(103) .001	(104) .200	(105) 0	(106) .200
ALUMINUM	(107) 07429-90-5	(108) C	(109) .001	(110) 01	(111) 06	(112) .001	(113) 90.0	(114) .001	(115) .200	(116) 0	(117) .200
ALUMINUM OXIDE	(118) 01344-28-1	(119) C	(120) .001	(121) 01	(122) 06	(123) .001	(124) 90.0	(125) .001	(126) .200	(127) 0	(128) .200
TITANIUM OXIDE	(129) 13463-67-7	(130) C	(131) .001	(132) 01	(133) 06	(134) .001	(135) 90.0	(136) .001	(137) .200	(138) 0	(139) .200
NICKEL	(140) 07440-02-0	(141) C	(142) .001	(143) 01	(144) 06	(145) .001	(146) 90.0	(147) .001	(148) .200	(149) 0	(150) .200

NOTE - SHOULD NEW EVIDENCE REQUIRE LOWER AMBIENT LEVELS BE MET FOR THE ABOVE UNDERSCORED CAS NUMBER(S),

THE SOURCE OWNER MAY BE REQUIRED TO REDUCE EMISSIONS.

SPECIAL CONDITIONS
(151)CONDITION 1. AG1 COMPLIANCE

CONTINUED ON NEXT PAGE

DEFINITIONS

Off-Site Facility	A hazardous waste treatment, storage, or disposal area that is located at a place away from the generating site.
On-Site Facility	A hazardous waste treatment, storage, or disposal area that is located on the generating site.
Operator	Person responsible for the overall operation of the site.
Opportunity Assessment	A procedure that identifies practices that can be implemented to reduce the generation of hazardous waste (source reduction) or the quantity that must subsequently be treated, stored, disposed, or recycled.
Part A Permit, Part B Permit	(See Interim Permit Status.)
Part A Permit Application	The first step in obtaining a RCRA permit to treat, store, or dispose hazardous waste. This application defines the processes to be used for treatment, storage, and/or disposal of hazardous waste; the design capacity of such processes; and the specific hazardous waste to be handled at the applying facility. A Part A application must have been filed to obtain interim status to allow facilities existing prior to promulgation of the RCRA regulations to continue operations until a final permit is issued. Thus, if the site has either interim status, or a final RCRA permit to handle hazardous waste, a Part A application has been submitted for the site.
Part B Permit Application	The second step in obtaining a RCRA permit to treat, store, or dispose hazardous waste. To obtain a permit, a site must provide EPA with information about the hazardous waste treatment, storage, and disposal facilities that will be at the site. The Hazardous Waste Report respondent should know whether or not the site has completed the Part B permit application.
Part 373 Permit	New York State equivalent of the federal Part B permit. It is a control document issued by NYSDEC to implement the requirements of 6 NYCRR Part 373.
Publicly Owned Treatment Works (POTW)	A waste treatment works owned by a State, unit of local government, or Indian tribe, usually designed to treat domestic wastewaters.
Process Unit	A single piece of equipment -- e.g., one tank, one distillation column, or one surface impoundment -- in which hazardous waste is treated, disposed, or recycled.
Resource Conservation and Recovery Act (RCRA)	The Federal statute that regulates the generation, treatment, storage, disposal, or recycling of solid and hazardous waste.
RCRA Interim (Permit) Status	Period during which treatment, storage, and disposal facilities regulated under RCRA in 1980 are temporarily permitted to operate while awaiting denial or issuance of a permanent permit. Permits issued

RECEIVED
JUN - 2 2004

Site Address:
SAME

WORK ORDER NO. D3781101

DOCUMENT NO. 78713

STRAIGHT BILL OF LADING

TRANSPORTER 1 Clean Harbors Env Services Inc — VEHICLE ID # 511B

EPA ID # MAD039322250 — TRANS. 1 PHONE (781) 849-1800

TRANSPORTER 2 MAUMEE EXPRESS INC. — VEHICLE ID #

EPA ID # NJD986607380 — TRANS. 2 PHONE 732-424-8421

DESIGNATED FACILITY			SHIPPER		
Spring Grove Resource Recovery			Sulzer Metco US Inc		
FACILITY EPA ID #			SHIPPER EPA ID #		
OHD000816629			NYD131318651		
ADDRESS			ADDRESS		
4879 Spring Grove Avenue			1101 Prospect Avenue		
CITY	STATE	ZIP	CITY	STATE	ZIP
Cincinnati	OH	45232	Westbury	NY	11590

CONTAINERS NO. & SIZE	TYPE	HM	DESCRIPTION OF MATERIALS	TOTAL QUANTITY	UNIT WT/VOL
2x55	DM.		A. NON DOT REGULATED MATERIAL, (ABSORBENT PADS, OIL FILTERS), NON DOT HAZARDOUS, NONE	-358-	-P-
2x55	DM.		B. NON DOT REGULATED MATERIAL, (MAGNESIUM OXIDE, TITANIUM OXIDE), NON DOT HAZARDOUS, NONE	-1300-	-P-
4x55	DM		C. NON DOT REGULATED MATERIAL, (NYLON SOLIDS), NON DOT HAZARDOUS, NONE	-682-	-P-
2x55	DM.		D. NON DOT REGULATED MATERIAL, (KITCHEN GREASE), NON DOT HAZARDOUS, NONE	-832-	-P-
2x55	DF		E. NON DOT REGULATED MATERIAL, (ORGANIC BINDER SOLUTION), NON DOT HAZARDOUS, NONE	-985-	-P-
1x55	DM		F. NON DOT REGULATED MATERIAL, (OIL, SPEEDY DRY), NON DOT HAZARDOUS, NONE	310	-P-
1x55	DM.		G. NON DOT REGULATED MATERIAL, (OILY SOAP), NON DOT HAZARDOUS, NONE	-510-	P-
1x55	DM		H. NON DOT REGULATED MATERIAL, (CRSTALLINE SILICA, IRON OXIDE), NON DOT HAZARDOUS, NONE, NONE	-649	-P-

SPECIAL HANDLING INSTRUCTIONS — 24 Hour Emergency # (800) 483-3718
A: CH189102 B: CH189107 C: CH189144 D: CH66105 E: CH66106 F: CH66118 G: CH36427 H: CH36421
NYDEC:A,B,C,D,F,G,H: L NYDEC:E: B NYMA006 NYDEC:07259 DECAL: # 02649

SHIPPERS CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

	PRINT	SIGN	DATE
SHIPPER	DAVID WALZAK		5-7-04
TRANSPORTER 1	JOSE M. CANTILLO		5-7-04
TRANSPORTER 2	CHUCK SPENCER		5-7-04
RECEIVED BY			5/18/04

2

CHI 107

Site Address:
SAME

WORK ORDER NO. D3781101

DOCUMENT NO. 78713

STRAIGHT BILL OF LADING

TRANSPORTER 1 Clean Harbors Env Services Inc VEHICLE ID # 5118

EPA ID # M A D 0 3 9 3 2 2 2 5 0 TRANS. 1 PHONE (781) 849-1800

TRANSPORTER 2 VEHICLE ID #

EPA ID # TRANS. 2 PHONE

DESIGNATED FACILITY			SHIPPER		
Spring Grove Resource Recovery			Sulzer Metco US Inc		
FACILITY EPA ID # O H D 0 0 0 8 1 6 6 2 9			SHIPPER EPA ID # N Y D 1 3 1 3 1 8 6 5 1		
ADDRESS 4879 Spring Grove Avenue			ADDRESS 1101 Prospect Avenue		
CITY Cincinnati	STATE OH	ZIP 45232	CITY Westbury	STATE NY	ZIP 11590

CONTAINERS NO. & SIZE	TYPE	HM	DESCRIPTION OF MATERIALS	TOTAL QUANTITY	UNIT WT/VOL
2x55	DM.		A. NON DOT REGULATED MATERIAL, (ABSORBENT PADS, OIL FILTERS), NON DOT HAZARDOUS, NONE	-358-	-P-
2x55	DM.		B. NON DOT REGULATED MATERIAL, (MAGNESIUM OXIDE, TITANIUM OXIDE), NON DOT HAZARDOUS, NONE	-1300-	-P-
4x55	DM		C. NON DOT REGULATED MATERIAL, (NYLON SOLIDS), NON DOT HAZARDOUS, NONE	-682-	-P-
2x55	DM.		D. NON DOT REGULATED MATERIAL, (KITCHEN GREASE), NON DOT HAZARDOUS, NONE	-832-	-P-
2x55	DF		E. NON DOT REGULATED MATERIAL, (ORGANIC BINDER SOLUTION), NON DOT HAZARDOUS, NONE	-985	-PL
1x55	DM		F. NON DOT REGULATED MATERIAL, (OIL, SPEEDY DRY), NON DOT HAZARDOUS, NONE	310	-P-
1x55	DM.		G. NON DOT REGULATED MATERIAL, (OILY SOAP), NON DOT HAZARDOUS, NONE	-510-	P-
1x55	DM		H. NON DOT REGULATED MATERIAL, (CRSTALLINE SILICA, IRON OXIDE), NON DOT HAZARDOUS, NONE, NONE	-649	-P-

SPECIAL HANDLING INSTRUCTIONS 24 Hour Emergency # (800) 483-3718
A: CH189102 B: CH189107 C: CH189144 D: CH66105 E: CH66106 F: CH66118 G: CH36427 H: CH36421
NYDEC:A,B,C,D,F,G,H: L NYDEC:E: B NYMA006 NYDEC:07259 DECAL: # 02649

SHIPPERS CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SHIPPER	PRINT DAVID WALZAK	SIGN	DATE 5-7-04
TRANSPORTER 1	PRINT JOSE M. CARTILL	SIGN	DATE 5-7-04
TRANSPORTER 2	PRINT	SIGN	DATE
RECEIVED BY	PRINT	SIGN	DATE

4

CHI 107

Hazmat Storage Buildings
Bio-Hazard
Self-Contained Compactors
Safety Cabinets
Hazmat Collection Trailers
Seismic Shelving
Spill Containment
Pallets
Tanks
Totes
Carts
Safety Containers
Overpacks & Drums
Grating
Pipe Hangers & Supports
Compressed Gas Storage

Hazmat Chemical Storage, Inc.
Ph: **(800) 401-5877**
Fax: **(714) 542-6338**

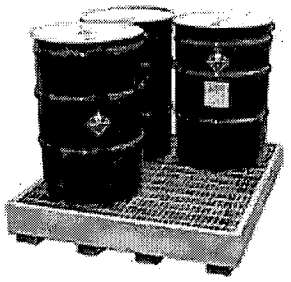
Email:

info@hazmatstorage.com

SPILL CONTAINMENT PALLETS

Largest Selection in the World at the *Best Prices!*

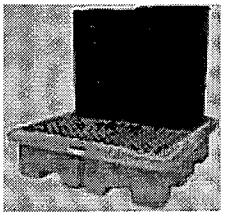
GET A QUOTE FAST!



Steel Containment Pallets

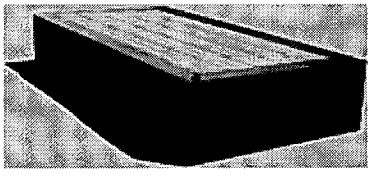
Steel Pallets From 5 to 24 Feet Long and Up to 10 Feet Wide Capacities from 4 to 60 -55 Gallon Drums - Forkliftable, Seismic Tie Downs, Grounding Connection, Drain Plug

Huge Selection!
Polyethelene Spill Containment Pallets and Containment Basins
Click Here to Review Selection



We now have Battery Storage Pallets!
Click Here to Review Specifications.

Custom Pallets
We manufacture pallets to meet your special needs. Pallet shown is 18" deep for the National Labratory at Oakridge TN.



(IMPORTANT: Type or print; read instructions before completing form)

Form Approved OMB Number: 2070-0093
Approval Expires: 11/92

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FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER: 11590PRKNL1101P

Toxic Chemical, Category, or Generic Name: ALUMINUM POWDER

WHERE TO SEND COMPLETED FORMS:
1. EPCRA Reporting Center, P.O. Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 92

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?
[ ] Yes (Answer question 2.2; Attach substantiation forms)
[X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [X] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official: JOE MACRI, MANAGER FACILITIES

Signature: Joseph Macri

Date Signed: June 30, 1993

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: METCO DIVISION PERKIN-ELMER

TRI Facility ID Number: 11590PRKNL1101P

Street Address: 1101 Prospect Avenue

City: Westbury

County: Nassau

State: New York

Zip Code: 11590

Mailing Address (if different from street address):

City:

State:

Zip Code:

PUT LABEL HERE

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PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
ALUMINUM POWDER

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check only one)	a. [ ] An entire facility	b. [X] Part of a facility
4.3	Technical Contact	Name: JOE MACRI	Telephone Number (include area code): (516) 334-1300
4.4	Public Contact	Name: JOE MACRI	Telephone Number (include area code): (516) 334-1300

4.5	SIC Code (4-digit)	a. 3542	b.	c.	d.	e.	f.
4.6	Latitude and Longitude	Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		075	09	50	027	53	16

4.7	Dun & Bradstreet Number(s) (9 digits)	a. 05-773-1663	b.
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. NYD131318651	b.
4.9	Facility NPDES Permit Number(s) (9 characters)	a. N/A	b.
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. N/A	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	[ ] NA PERKIN-ELMER CORPORATION
5.2	Parent Company's Dun & Bradstreet Number	[ ] NA (9 digits) 00-118-4480

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United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
ALUMINUM POWDER

SECTION 1. TOXIC CHEMICAL IDENTITY

(Important: DO NOT complete this section if you complete Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	7429-90-5
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	ALUMINUM (FUME OR DUST)
1.3	Generic Chemical Name (Important: Complete **only** if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)
	N/A

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
	N/A

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1	Manufacture the toxic chemical:	a. ☐ Produce b. ☐ Import	If produce or import: c. ☐ For on-site use/processing d. ☐ For sale/distribution e. ☐ As a byproduct f. ☐ As an impurity
3.2	Process the toxic chemical:	a. ☐ As a reactant b. ☐ As a formulation component	c. ☐ As an article component d. ☐ Repackaging
3.3	Otherwise use the toxic chemical:	a. ☐ As a chemical processing aid b. ☐ As a manufacturing aid	c. ☒ Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	04 (Enter two-digit code from instruction package.)

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
ALUMINUM POWDER

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	X NA			
5.2	Stack or point air emissions	X NA			
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name				
	N/A				
5.3.2	Stream or Water Body Name				
	N/A				
5.3.3	Stream or Water Body Name				
	N/A				
5.4	Underground injections on-site	X NA			
5.5	Releases to land on-site				
5.5.1	Landfill	X NA			
5.5.2	Land treatment/ application farming	X NA			
5.5.3	Surface impoundment	X NA			
5.5.4	Other disposal	X NA			

☐ Check here only if additional Section 5.3 information is provided on page 5 of this form.

Range Codes: A = 1 - 10 pounds; B = 1
C = 500 - 999 pounds.

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
ALUMINUM POWDER

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3 Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__ Stream or Water Body Name N/A			
5.3.__ Stream or Water Body Name N/A			
5.3.__ Stream or Water Body Name N/A			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate	
6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)
N/A	

6.1.B POTW Name and Location Information			
6.1.B.__ POTW Name N/A		6.1.B.__ POTW Name	
Street Address		Street Address	
City	County	City	County
State	Zip Code	State	Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ]
(example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 C = 500 - 999 pounds.

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 11590PRKNL1101P

Toxic Chemical, Category, or Generic Name: ALUMINUM POWDER

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: LONI-JO SCRAP METAL

Street Address: 70 Kinkel Street

City: Westbury

County: Nassau

State: NY

Zip Code: 11590

Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. B	1. M	1. M 24
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: N/A

Street Address:

City:

County:

State:

Zip Code:

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Section 6.2 page this is, here. [ ] (example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 1 C = 500 - 999 pounds.

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
ALUMINUM POWDER

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] **Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.**

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b 1 2 3 4 5 6 7 8	7A.1c	7A.1d %	7A.1e Yes [ ] No [ ]
7A.2a	7A.2b 1 2 3 4 5 6 7 8	7A.2c	7A.2d %	7A.2e Yes [ ] No [ ]
7A.3a	7A.3b 1 2 3 4 5 6 7 8	7A.3c	7A.3d %	7A.3e Yes [ ] No [ ]
7A.4a	7A.4b 1 2 3 4 5 6 7 8	7A.4c	7A.4d %	7A.4e Yes [ ] No [ ]
7A.5a	7A.5b 1 2 3 4 5 6 7 8	7A.5c	7A.5d %	7A.5e Yes [ ] No [ ]

If additional copies of page 7 are attached, indicate the total number of pages in this box [ ] and indicate which page 7 this is, here. [ ] (example: 1, 2, 3, etc.)

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
ALUMINUM POWDER

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.**

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.**

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 11590PRKNL1101P

Chemical, Category, or Generic Name: ALUMINUM POWDER

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

All quantity estimates can be reported using up to two significant figures.	Column A 1991 (pounds/year)	Column B 1992 (pounds/year)	Column C 1993 (pounds/year)	Column D 1994 (pounds/year)
8.1 Quantity released*	0	0	0	0
8.2 Quantity used for energy recovery on-site	0	0	0	0
8.3 Quantity used for energy recovery off-site	0	0	0	0
8.4 Quantity recycled on-site	0	0	0	0
8.5 Quantity recycled off-site	30	170	170	170
8.6 Quantity treated on-site	0	0	0	0
8.7 Quantity treated off-site	0	0	0	0
8.8 Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	N/A			
8.9 Production ratio or activity index	.95			

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	W19	a. T04	b.	c.
8.10.2	W29	a. T04	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11 Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)

YES [ ] NO [X]

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

NYC 6638782

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 12/00)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No.
Manifest Document No.
2. Page 1 of 1

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address
4. Generator's Telephone ( )

A. State Manifest Document Number: NYC 6638782
B. Generator's ID: SAME

5. Transporter 1 (Company Name)
6. US EPA ID Number
C. State Transporter's ID
D. Transporter's Telephone

7. Transporter 2 (Company Name)
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
10. US EPA ID Number
G. State Facility ID
H. Facility's Telephone

11. US DOT Description (including Proper Shipping Name, Hazard Class and ID Number)
12. Containers No. / Type
13. Total Quantity
14. Unit Wt/Vol
I. Waste No.

GENERATOR

a. — 001 — 000550 — EPA / STATE
b. — EPA / STATE
c. — EPA / STATE
d. — EPA / STATE

J. Additional Descriptions for Materials Listed Above
a. b. c. d.

K. Handling Codes for Wastes Listed Above
a. b. c. d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR,** if I am a small generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name — Signature — Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name — Signature — Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name — Signature — Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name — Signature — Mo. Day Year

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

COPY 5 - GENERATOR - MAILED BY TSD FACILITY

P2SUL008310

K54474-R5732 SAFETY-KLEEN 12/22/01 PAGE: 1
LOCATION: 211808 LDR NOTIFICATION FORM 08:48:00

GENERATOR NAME: SULZER METCO INC MANIFEST NO.: NYC663878-2
OR SALES SERVICE NO.: 19784001

CUST#: 0002-1604-17

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01A SK PROFILE NO.: 0000
SKDOT#: 0000801

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 LQ LIQUID >= 10% TOC
D018
D039
D040

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSITITUENT NOTIFICATION:
229 TETRACHLOROETHYLENE
237 TRICHLOROETHYLENE
250 CADMIUM
255 LEAD
257 MERCURY - ALL OTHERS
260 SILVER

N O T E S

EXP NOTICE: THIS LDR EXPIRES ON 12/31/2001.

GENERATOR'S AUTHORIZED SIGNATURE — DAVID WALZOK FAC SPEC III (NAME & TITLE (PRINTED OR TYPED)) — 01/14/02 (DATE)

EQ#: 5903 LOC: 211808 TERR: 21 REF#: 19784001 SW: 0203

TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFE

safety-kleen.

1301 Gervais Street - Suite 300
Columbia, South Carolina 29201
CUSTOMER NO.

WE CARE

DUNS NO. 05-397-6551 FED. ID NO. 396090019

CUSTOMER

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
C	[illegible]	[illegible]

BUSINESS TYPE	CHAIN	OUTER COUNTY	SVC. P/C	PROD. P/C
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

LOCATION	TAX EXEMPTION NO.
[illegible]	

CUSTOMER GENERATOR

0 0 3 9 - 1 6 0 4 - 3 7

PULSER METCO INC
1101 PROSPECT AVE
WESTBURY NY 11590

BILL TO

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	HANDLING CODE		ASSOC. CODE	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
[illegible]	[illegible]		516-334-1300	33-150-8179		[illegible]		.035	.035	.035

	DEPT	SERVICE/ PRODUCT	SERIAL NUMBER	REMARKS/ UNIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS CLEAN	SPENT	# OF CONT.	SK DOT	CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)	(INITIAL)	CHANGE SCH. DATE (YY WW)	INV. CODE	PROMO NO.	RELEASE NO.	MSDS GIVEN
1	[illegible]	[illegible]	[illegible]	[illegible]	1	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	1	[illegible]		4							☐
2	[illegible]			[illegible]											0							☐
3																						☐
4																						☐
5																						☐
6																						☐
7																						☐
8																						☐
9																						☐
10																						☐
11																						☐
12																						☐

JAN 24 2002

TOTAL-SERVICE/PRODUCTS [illegible] .67 [illegible]

CHECK APPROPRIATE BOXES →

	GOOD	POOR
MACHINE CONDITION & CLEANLINESS	☑	☐
LAMP ASSEMBLY CONDITION	☑	☐

	YES	NO
DECALS IN PLACE AND LEGIBLE	☐	☐
FUSIBLE LINK INSTALLED	☐	☐
EMERGENCY CLOSING OF LID UNOBSTRUCTED	☐	☐
MACHINE PROPERLY GROUNDED	☑	☐
LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	☐	☐
SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	☐	☐

USEPA TRANSPORTER 1 ID NO.	USEPA TRANSPORTER 2 ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.
[illegible]		NYD[illegible]	

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)

		12. CONTAINERS NO.	TYPE	13. TOTAL QUANTITY	14. UNIT WT/VOL.	SK DOT NUMBER				
A.	WASTE COMBUSTIBLE LIQUID, N.O.S. PETROLEUM NAPHTHA, NA1993 PG III, RQ: D001 EPG#128 6.7 LBS/GAL D018,D039,D040	1	DM	14	G	NOS				1
B.										
C.										
D.										

I CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES

0 TO 220 LBS./MONTH — INITIALS

220 LBS. TO 2,200 LBS./MONTH — INITIALS

GREATER THAN 2,200 LBS./MONTH — INITIALS

DESIGNATED FACILITY NAME AND ADDRESS SAFETY-KLEEN SYSTEMS, INC. NO ANDOVER, NY 17201

I CERTIFY THAT NO MATERIAL CHANGE HAS OCCURRED EITHER IN THE CHARACTERISTICS OF THE WASTE MATERIALS OR IN THE PROCESS GENERATING THE WASTE MATERIALS.

USA EPA ID NO. NYD000204198

STATE ID NO.

PAYMENT RECEIVED SECTION

CASH ☐	TOTAL RECEIVED	APPLY PAYMENT TO:
CHECK NUMBER		☐ TODAY'S SERVICE/SALE ☐ PREVIOUS BALANCE AS FOLLOWS

INVOICE #	AMOUNT $	INVOICE #	AMOUNT $

PREVIOUS CREDIT CARD NO →

CREDIT CARD NO. | AMEX VISA MC | EXP. DATE

CUSTOMER REFERENCE

MANIFEST NO. [illegible]

LDR MESSAGE

LDR [illegible]

MANIFEST CODE	SEQ #
[illegible]	[illegible]

IN THE EVENT OF AN EMERGENCY CALL 1-800-468-1760 (24 HOURS)

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.

"This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation."

Print Customer Name

By: Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	[illegible]
WASTE MIN. (FROM ABOVE)	[illegible]
TOTAL DUE	[illegible]

DO NOT WRITE IN THE AREA BELOW

[illegible]

SERVICE AND SALES ACKNOWLEDGMENT
PART 1366 (Rev. 09/00)

CERTIFICATE OF INSURANCE

DATE: 05/12/89

PRODUCER

Gerrity, Baker, Williams Inc
23 Route 206, Waterloo Plaza
P.O. Box 337
Stanhope , NJ 07874
(201) 347-0335

INSURED

Environmental Transfer Corporation
Gold Mine Road
Flanders, NJ 07836

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHT UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW

COMPANIES AFFORDING COVERAGE

COMPANY LETTER A	Planet Insurance Company
COMPANY LETTER B	American Casualty Company(CNA)
COMPANY LETTER C	Transcontinental Insurance Company
COMPANY LETTER D	
COMPANY LETTER E	

COVERAGES

THIS IS TO CERTIFY THAT POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS, AND CONDITIONS OF SUCH POLICIES.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE	LIABILITY LIMITS IN 1000'S	EACH OCCURR.	AGGREGATE
A	GENERAL LIABILITY [X] COMPREHENSIVE FORM [X] PREMISES/OPERATIONS [ ] UNDERGROUND EXPLOSION & COLLAPSE HAZARD [X] PRODUCTS/COMP. OPERATIONS [X] CONTRACTUAL [X] INDEPENDENT CONTRACTORS [ ] BROAD FORM PROPERTY DAMAGE [X] PERSONAL INJURY [ ]	N61258968	10/11/88	10/11/89	BODILY INJURY	$	$
					PROPERTY DAMAGE	$	$
					BI & PD COMBINED	$ 1000	$ 1000
					PERSONAL INJURY		$ 1000
B	AUTOMOBILE LIABILITY [ ] ANY AUTO [ ] ALL OWNED AUTOS(PRIV. PASS) [ ] ALL OWNED AUTOS(OTHER THAN) (PRIV. PASS) [X] HIRED AUTOS [X] NON-OWNED AUTOS [ ] GARAGE LIABILITY [X] described vehicles	ARB3104557	04/16/89	04/16/90	BOD INJ. (PERSON)	$	
					BOD INJ. ACCIDENT	$	
					PROPERTY DAMAGE	$	
					BI & PD COMBINED	$ 5000	
	EXCESS LIABILITY [ ] UMBRELLA FORM [ ] OTHER THAN UMBRELLA				BI & PD COMBINED	$	$
C	WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY	WC502180547	07/15/88	07/15/89	STATUTORY		
						$ 1000 (EACH ACCIDENT)	
						$ 1000 (DISEASE-POLICY)	
						$ 1000 (DISEASE-EA EMP)	
A	OTHER Pollution Legal Liability	NT1259619-88	10/28/88	10/28/89	3,000,000 occ/6,000,000 agg.		

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

The above auto liability policy includes the MCS90
(Environmental Restoration Endorsement)

CERTIFICATE HOLDER

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

TP-550 (9/90)

New York State Department of Taxation and Finance

Return of Special Assessments on Generation, Treatment or Disposal of Hazardous Waste in New York State

For the period July 1, 1990 through September 30, 1990

(Use for periods beginning on or after June 1, 1985 only)

Before making any entries below, be sure to read instructions.

Please print or type

Environmental Protection Agency number	Employer federal identification number or Social Security number *(if not shown on label)*.
NYD131318651 060490270 390	

Name: PERKIN-ELMER CORP-METCO DIV

Street: PATRICK A TIGHE
1101 PROSPECT AVE

City: WESTBURY NY 11590

Use labeled form and return envelope and mail completed return to:
HW Return Processing Unit
855 Central Avenue
Albany, N.Y. 12206

I Calculation of Hazardous Waste Subject to Special Assessments

1	Tons of hazardous waste generated in New York State that were treated, or disposed of, or shipped to a storage facility for later treatment or disposal during this period	1	.4
2	Tons received from out-of-state for treatment or disposal or for storage prior to such treatment or disposal in a New York State facility during this period	2	
3	Total number of tons dealt with *(add lines 1 and 2)*	3	.4
4	Tons not subject to assessment *(from line 29, Part III of this form)*	4	.4
5	Total number of tons of hazardous waste subject to assessment *(subtract line 4 from line 3)*	5	-0-

II Computation of Special Assessments

			Tons *(to nearest 1/10 ton)*	× Rate =	Assessment
6	Tons disposed of in landfill on-site of generation	6		× $ 27 =	
7	Tons disposed of in landfill off-site of generation or shipped for storage prior to landfill disposal	7		× $ 27 =	
8	Tons treated or disposed of *(except by landfill or incineration)* at facility off-site of generation or shipped for storage prior to such treatment or disposal	8		× $ 16 =	
9	Tons incinerated off-site of generation	9		× $ 9 =	
10	Tons incinerated on-site of generation	10		× $ 2 =	
11	Tons received from out-of-state for landfill disposal or for storage prior to such disposal	11		× $ 27 =	
12	Tons received from out-of-state for treatment or disposal, other than landfill disposal and incineration, or for storage prior to such treatment or disposal	12		× $ 16 =	
13	Tons received from out-of-state for incineration or for storage prior to incineration	13		× $ 9 =	
14	Total number of tons subject to assessment *(add tons column, lines 6 through 13)*	14	-0-		
15	Total assessment for current quarter *(add assessment column, lines 6 through 13)*	15	-0-		
16	Unpaid balance due from previous quarters this calendar year	16			
17	Total assessment due *(add lines 15 and 16)*	17	-0-		
18	Interest due for late payment *(see instructions)*	18			
19	Additional charges for late filing, late payment, etc. *(see instructions)*	19			
20	Total due *(add lines 17, 18 and 19)*	20	-0-		
21	Amount deferred *(see instructions)*	21			
22	Total remittance. Make check payable to **"Commissioner of Taxation and Finance"**	22	-0-		

I hereby certify that to the best of my knowledge and belief, this is a true and complete return.

Name of owner, partner or officer *(please print or type)*	Area code Business telephone	Date
Frank Mc Kendry	(516) 334-1300	October 16, 1990
Signature of owner, partner of officer: for Q McKy	Title: Controller	

PRINT OR TYPE

P2SUL007702

P 692 175 212

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

Sent to HW Return Processing Unit	
Street and No. 855 Central Avenue	
P.O., State and ZIP Code Albany, NY 12206	
Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	$
Postmark or Date	

PS Form 3800, June 1985

Fold at line over top of envelope to the right of the return address

CERTIFIED

P 692 175 212

MAIL

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.
1. ☐ Show to whom delivered, date, and addressee's address. *†(Extra charge)†*
2. ☐ Restricted Delivery *†(Extra charge)†*

3. Article Addressed to:
HW RETURN PROCESSING UNIT
855 Central Avenue
Albany, NY 12206

4. Article Number
P 692 175 212

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

8. Addressee's Address *(ONLY if requested and fee paid)*

6. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery

PS Form 3811, Mar. 1987 ★ U.S.G.P.O. 1987-178-268 **DOMESTIC RETURN RECEIPT**

P2SUL007703

Hazardous Waste Prospect Avenue
2004

EPHM-2 REV. 5/97

4105

STATE OF CONNECTICUT

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST PROGRAM
79 Elm St., Hartford, CT 06106-5127

BK927823
PPW 04/12/2005 FOR STATE USE ONLY

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No. C.R.W.	Manifest Document No. 727778	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but may be required by State law.

3. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Phone (516 338-2337)

A. State Manifest Document Number: CT F 1172778

B. G.S.I. (Gen. Site Address): SAME

5. Transporter 1 Company Name: Clean Harbors Env Services Inc — 6. US EPA ID Number: MAD093222250

7. Transporter 2 Company Name: ANDREY VELICHKO — 8. US EPA ID Number: MAD093222250

C. S.T.I. (Trans. Lic. Plate #): 69345 PA

D. Tran. Phone (781 849-1800)

E. S.T.I. (Trans. Lic. Plate #): 69345 PA

F. Tran. Phone (781 849-1800)

9. Designated Facility Name and Site Address
Clean Harbors Of Conn Inc
51 Broderick Road
Bristol, CT, 06010

10. US EPA ID Number: CTD000604488

G. State Facility's ID (Not Required)

H. Facility's Phone (860) 583-8917

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. NON DOT REGULATED MATERIAL, (CERAMIC OXIDE), NONE, NONE	001	TT	01600	G	EPA NONE / STATE CR01
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
(L)
a. b. c. d.

K. Handling Codes for Wastes Listed Above
a. Interim Final b. Interim Final c. d.

15. Special Handling Instructions and Additional Information
EMERGENCY PHONE #: (800) 483-3718
11a: ch82414bb

Point of Departure: CT

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: MICHAEL J. MUELLER — Signature: [signature] — Month Day Year: 04 20 05

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Andrey Velichko — Signature: [signature] — Month Day Year: 04 20 05

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: [signature] — Month Day Year: 04 22 05

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Christopher E. Roy — Signature: [signature] — Month Day Year: 04 20 05

GENERATOR — TRANSPORTER — FACILITY

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802. FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILL RESPONSE AT (860) 424-3338

COPY 3: FACILITY TO GENERATOR

CT F 11 / 2 / 8

RECEIVED MAY - 5 2005

EPA Form 8700-22 (Rev. 9/91) Form Approved OMB No.2050-0039

COPY 3: FACILITY TO GENERATOR

PARTIAL INSTRUCTIONS FOR COMPLETING THE CONNECTICUT UNIFORM HAZARDOUS WASTE MANIFEST

IMPORTANT: READ ALL INSTRUCTIONS ON THE COVER SHEET BEFORE COMPLETING THIS FORM. ALL 8 COPIES MUST BE TOTALLY LEGIBLE.

GENERAL INFORMATION

The Hazardous Waste Manifest is designed to track waste from the point of generation to final disposal ("cradle to grave"). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete, incorrect or illegible manifests are violations of the law, and could subject you to civil or criminal liabilities as specified in Connecticut Hazardous Waste Management Regulations.

The Connecticut manifest contains 8 copies. ALL COPIES MUST BE LEGIBLE! (Illegible manifests submitted to the State will be returned to the Generator for proper completion). This form is designed for use on a 12 pitch (elite) typewriter. A firm ball point pen may also be used only if you press down HARD. The eight copies must be filed with the appropriate parties as they are completed.

* Be aware that hazardous wastes manifested into or out of Connecticut are subject to a hazardous waste assessment per C.G.S. 22a-132. Please contact the Dept. of Revenue Services at (860) 541-3225 for more information.

COPY DISTRIBUTION is as follows:

COPY 1: FACILITY MAILS TO DESTINATION STATE: This copy is mailed by the Facility to the responsible state agency in the state in which the facility is located, upon receipt of the waste.

COPY 2: FACILITY MAILS TO GENERATOR STATE: This copy is mailed by the facility to the appropriate agency in the Generator's state, upon receipt of the waste.

COPY 3: FACILITY MAILS TO GENERATOR: This copy is mailed to the generator by the facility upon receipt of the waste. This copy is the generator's documentation that the facility received the waste.

COPY 4: FACILITY-RETAINS: This copy is retained by the facility for his records.

COPY 5: TRANSPORTER 1 RETAINS: This copy is retained by the Transporter for his records. This copy is the Transporter's documentation that this shipment was transported from the generator to the facility.
NOTE: If a continuing Transporter is used, the generator is responsible for supplying him with a legible photocopy of the manifest, which must contain signatures where required.

COPY 6: GENERATOR MAILS TO DESTINATION STATE: This copy is mailed by the generator to the appropriate agency in the destination state (the state in which the facility is located).

COPY 7: GENERATOR MAILS TO GENERATOR STATE: This copy is mailed by the generator to the appropriate state agency in his state.

COPY 8: GENERATOR RETAINS: This copy is retained by the generator for his records.

GENERATOR SECTION

Item 12: CONTAINERS (NO. & TYPE) - Enter the number of containers for each waste and the appropriate abbreviation from TABLE 1 (below) for the type of container used.

TABLE 1 - CONTAINER TYPE

DM = Metal drums, barrels, kegs	TP = Tanks, Portable	CM = Metal boxes, cartons, cases (incl. roll-offs)
DW = Wooden drums, barrels, kegs	TT = Cargo Tanks (tank trucks)	CW = Wooden boxes, cartons, cases
DF = Fiberboard or plastic drums, barrels, kegs	TC = Tank Cars	CF = Fiber or plastic boxes, cartons, cases
CY = Cylinders	DT = Dump Trucks	BA = Burlap, cloth, paper, plastic bags

Item 13: TOTAL QUANTITY - Enter the total quantity of waste described on each line, relative to the units used in Item 14.

Item 14: UNIT (Wt./Vol.) - Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line. DO NOT use fractions.

TABLE II - UNITS OF MEASURE

G = Gallons (liquids only)	L = Liters (liquids only)	Y = Cubic Yards
P = Pounds	K = Kilograms	N = Cubic Meters
T = Tons (2000 lb.)	M = Metric Tons (1000 kg.)	

TRANSPORTER SECTION

Item 17: TRANSPORTER 1 ACKNOWLEDGEMENT - Print or type the name of the person accepting the waste on behalf of the 1st transporter. That person must acknowledge acceptance of the waste described on the manifest by signing & entering the date of receipt.

Item 18: TRANSPORTER 2 ACKNOWLEDGEMENT - If applicable, follow instructions for Item 17 for Transporter 2.

DESIGNATED FACILITY (TSDF) SECTION

Item K: HANDLING CODES (TSDF COMPLETES) - Refer to Item K in full instructions.

TABLE III - PROCESS CODES/HANDLING METHOD CODES

STORAGE:	S01 (Containers)	S02 (Tank)	S03 (Waste Pile)	S04 (Surface Impoundment)	S05 (Other - Specify)
TREATMENT:	T01 (Tank)	T02 (Surface Impoundment)	T03 (Incinerator)	(Other Treatment - specify code from 40 CFR 265 Appendix I).	
DISPOSAL:	D80 (Injection well)	D81 (Landfill)	D82 (Land Application)	D84 (Surface Impoundment)	
			D83 (Ocean Disposal)	D85 (Other - Specify)	

Item 19: DISCREPANCY INDICATION SPACE - The authorized representative of the designated facility's owner or operator must note in this space any significant discrepancy between the waste described on the manifest & the waste actually received at the facility. Any rejected materials should be listed here, along with an indication of the disposition of the rejected materials. **Any applicable Discrepancy or Rejection reporting requirements must also be complied with. Federal & State regulations vary.**

Item 20: FACILITY OWNER OR OPERATOR CERTIFICATION - Print or type the name of the person accepting the waste on behalf of the owner or operator of the designated TSDF. That person must acknowledge acceptance of the waste described on the manifest by signing (by hand) & entering the date of the receipt. The signature of the authorized TSDF agent indicates acceptance (except for items specified in Item 19) & agreement with the statements on this manifest.

* NOTE: FOR INTERSTATE SHIPMENTS (between different states) YOU MAY BE REQUIRED TO COMPLY WITH THE MANIFESTING REQUIREMENTS OF BOTH THE DESTINATION & GENERATOR STATES REGARDING THE COMPLETION OF SPECIFIC INFORMATION INCLUDED IN LETTERED ITEMS A-K. You may wish to contact State agencies for more information on this subject.

REMINDER: ALL 8 COPIES OF THIS FORM MUST BE TOTALLY LEGIBLE.

Public reporting burden for this collection of information is estimated to average: 37 minutes for generator, 15 minutes for transporter, 10 minutes for treatment, storage and disposal facility. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to CHIEF, INFORMATION POLICY BRANCH, PM-223, U.S. ENVIRONMENTAL PROTECTION AGENCY, 401 M STREET SW, WASHINGTON, D.C. 20460; and to the OFFICE OF INFORMATION AND REGULATORY AFFAIRS, OFFICE OF MANAGEMENT AND BUDGET, WASHINGTON, D.C. 20503.

NYG 3892518

Please type or print. Do not staple

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

D3933729

PPW 03/10/2005 (Waste Manifest 1/23/03)

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.	Manifest Doc. No.	2. Page 1 of	Information within heavy bold line is not required by Federal Law.
	NYD131318351	92518	2	

3. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Telephone Number (516 338-2337

A. NYG 3892518

B. Generator's ID SAME

5. Transporter 1 (Company Name): Clean Harbors Env Services Inc
6. US EPA ID Number: MAD039322250
C. State Transporter's ID
D. Transporter's Telephone (781 848-1800

7. Transporter 2 (Company Name)
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4879 Spring Grove Avenue
Cincinnati, OH, 45232
10. US EPA ID Number: OHD000816929
G. State Facility ID
H. Facility Telephone (513 681-5738

	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	WASTE FLAMMABLE LIQUIDS, N.O.S., (METHANOL, GRAPHITE), 3, UN1993, PG II	XX1	DM	XX448	P	EPA F003 / STATE
b.	WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II	XX1	DM	XX473	P	EPA D002 / STATE
c.	HAZARDOUS WASTE, SOLID, N.O.S., (CERAMIC OXIDE, CHROMIUM), 9, NA3077, PG III	XX1	DM	XX557	P	EPA D007 / STATE
d.	NON DOT REGULATED MATERIAL, (ABSORBENT PADS, OIL FILTERS), NA, NONE	XX2	DM	XX721	P	EPA NONE / STATE

J. Additional Descriptions for Materials listed Above
a. ERG#128 (L),(I) METHANOL/AQUADAG/WATER
c. ERG#171 (8),(E) RCRA METAL & CERAMIC POWDER
b. ERG#154 (L),(C,E) COPPER CLEANER/CHROMIC ACID
d. (8) OIL SPILL CLEANUP/FILTERS

K. Handling Codes for Wastes Listed Above
a. B
c. T
b. T
d. B

15. Special Handling Instructions and Additional Information
EMERGENCY PHONE #: (800) 483-3718
11a: CH192637 11b: CH189142 D006 D007 D008 11c: CH189108 11d: CH189102 NJDEP#07259 DECAL# 087644

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: PETER D. PIETRANTONIO | Signature | Mo. 03 Day 18 Year 05

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Louis Irizarry | Signature | Mo. 03 Day 18 Year 05

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Mo. Day Year

GENERATOR

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

COPY 5—Generator—Mailed by TSD Facility

INSTRUCTIONS FOR THE NEW YORK STATE UNIFORM HAZARDOUS WASTE MANIFEST

General Information

New York State regulation requires proper completion of all information on a manifest. Omissions, false coding or illegibility is considered a violation. All generators are responsible under New York State and Federal Law for the proper identification, labeling, manifesting and ultimate disposal of all hazardous waste they generate. The manifest system is designed to track hazardous waste from the point of generation until its final disposal (cradle to grave). In order to accomplish this goal, it is essential that all **items on a manifest be properly completed.**

Distribution

Distribution of each copy of the manifest is indicated on the bottom of the form. Copies of the manifest must be mailed promptly. New York State regulations provide five (5) working days for generator and two (2) for a TSDF. The disposer's state is the state in which the designated TSD facility is located. Generator's state is the state in which the installation generating the hazardous waste is located. TSD facility is a treatment, storage or disposal facility.

Generator Section

Item 1-Enter the US EPA ID number (twelve digit number issued by the federal government). The generator must assign a sequential unique, five digit number different for each manifest, as the manifest document number.

Item 2-If a continuation sheet is used, please enter the total number of sheets here. Any EPA approved continuation sheet may be used, but distribution and completion must meet New York manifest requirements. The document number in Item A must be placed in Item L of each continuation sheet.

Items 3-and **4**-Self explanatory. These must correspond to the generator's US EPA ID number.

Items 5, 6, 7 and **8**- These are self-explanatory. These numbers must be secured from the transporter. If more than one transporter is used, the generator must supply additional copies of this manifest for each transporter copy (#5).

Items 9 and **10**-The designated TSD facility, name, address and ID number should appear here.

NOTE: All US EPA ID numbers are a twelve digit code starting off with the letters corresponding to the state in which the facility or transporter is located.

NOTE: Only New York State authorized transporters and TSD facilities are allowed to transport or receive hazardous waste in New York State. The generator shall check for authorization.

Item 11-USDOT requires the word "waste" before or in the shipping name for all hazardous waste. See 49 CFR 171 thru 177. Contact USDOT office for description assistance. Any waste in this box is considered a hazardous waste.

Item 12-

Number-indicate number of containers (use whole numbers).

Containers/Type

DM-Metal drums, barrels, kegs	DT-Dump trucks
DW-Wooden drums, barrels, kegs	CY-Cylinders
DF-Fiberboard or plastic drums, kegs	CM-Metal boxes, cartons, cases, roll-offs
TP-Tanks, portable	CW-Wooden boxes, cartons, cases
TT-Cargo tank, tank trucks	CF-Fiber or plastic boxes, cartons, cases
TC-Tank cars	BA-Burlap, cloth, paper or plastic bags

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to: Chief Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street S.W., Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503

Item 13-Actual number of units indicated in box 14. (Do not use fractions or decimals).

Item 14-Units (wt/vol)

G-Gallons (liquids only)	L-Liters (liquids only)
P-Pounds	K-Kilograms
T-Tons (2,000 pounds)	M-Metric Tons (1,000 kilograms)
Y-Cubic Yards	N-Cubic Meters

Item 15-Use this space to indicate special transportation, treatment, storage or disposal or Bill of Lading information. If an alternate facility is designated, note it here. For international shipments, enter point of departure. Emergency response telephone numbers, or similar information may be included here.

Item 16-The authorized agent of the generator must read and then sign (by hand) and date this certification. The date is the date of receipt by transporter.

NEW YORK STATE REQUIRES THIS ADDITIONAL INFORMATION

Item A-Number preprinted by New York State Department of Environmental Conservation (NYSDEC).

Item B-Generator site address if different from mailing address. If same, write in same.

Item C and **E**-State of registration and motor vehicle license plate number of waste carrying portion of vehicle used to transport.

Item D and **F**-Telephone number of authorized agent.

Item G-No entry required by NYSDEC

Item H-Telephone number at site of TSD facility.

Item I-Hazardous waste numbers (letter and three digits) as assigned by 6 NYCRR Part 371 or 40 CFR 261 must be used to identify hazardous waste. Enter in top box by EPA. If waste is not hazardous in New York but regulated by another state, enter that state's waste code in bottom box.

Item J-If description in Item 11 (a,b,c,d) contains NOS or other general term, the hazardous waste constituent must be provided here for each. The specific gravity assumed to be one (1.00) unless indicated in lower right of each box.

Item K-Each material **must** be assigned an ultimate disposal method code as follows: L=Landfill, B=Incineration, heat recovery, burning, T=Chemical, physical, or biological treatment, R=Material recovery of more than 75 percent of the total material. Both the generator and the TSDF should agree on codes assigned in this item.

Transporter Section

Items 17 and **18**-Print or type the full name of person accepting responsibility and acknowledging receipt of material as listed on manifest for transport. Enter date of receipt and signature.

TSDF Section

Item 19-The authorized representative of the TSDF must note in the space any discrepancy between waste described on manifest and waste actually received. Any rejected materials should be listed and destination of those materials provided.

Item 20-The signature (by hand) of the authorized TSDF agent indicates acceptance (except for Item 19) and agreement with statements on this manifest. The date is the date of signature and receipt of shipment. A TSDF not providing ultimate disposal agrees to transfer waste to a TSDF authorized to provide ultimate disposal as indicated in Item K.

Additional Information

1. If the disposer state supplies a manifest, that state's form must be used. In any case, New York requires that both the generator and TSDF mail copies to the generator's state and the disposer's state, with the ultimate disposal method indicated in Item K.
2. There may be variations in the requirements between various states regarding Items A thru K, therefore, the generator should contact the disposer's state for specific details.
3. If assistance is needed in completion of this manifest, please contact NYSDEC Data Management Section at 518/402-8738 weekdays from 9:00 a.m. to 4:00 p.m.

NYC 551388-3

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4/97)

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Document No.

2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number NYC 551388-3

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. | c.

b. | d.

K. Handling Codes for Wastes Listed Above

a. | c.

b. | d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR,** if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford

Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name: Joyce Zimmerman | Signature | Mo. 01 Day 06 Year 11

COPY 5-Generator-Mailed by TSD facility

P2SUL007851

NYC 551388-3

2-118-08

Please print or type. DO NOT STAPLE.

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

(Hazardous Waste Manifest 4/97)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No.: NYD 131318651
Manifest Document No.: 87748
2. Page 1 of 1

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address
SULZER METCO
1101 PROSPECT AVE J WEBER/MAP LAB
WESTBURY NY 11590

4. Generator's Phone (516) 334-1300

A. State Manifest Document Number: NYC 551388-3

B. Generator's ID: SAME

5. Transporter 1 (Company Name): SAFETY-KLEEN SYSTEMS, INC

6. US EPA ID Number: ILD 984908202

C. State Transporter's ID: NY EH2621

D. Transporter's Telephone (516) 842-6311

7. Transporter 2 (Company Name):

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address: 211808
SAFETY-KLEEN SYSTEMS, INC
80 SEABRO
NO AMITYVILLE, NY 11701

10. US EPA ID Number: NYD 000708198

G. State Facility ID:

H. Facility's Telephone: (516) 842-6311

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a. WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII(D001 D018, D039, D040)(ERG#128)6.7LBS/GAL	01	DM	09	G	EPA D001 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
I(A) D018 D039
a. (A) D040
b.
c.
d.

K. Handling Codes for Wastes Listed Above
a. R
b.
c.
d.

15. Special Handling Instructions and Additional Information
*
EMERGENCY RESP#1-800-468-1760 24HR
9901 96460488 987748 2-118-08-3011 01

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

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Printed/Typed Name: DAVID WALZAK
Signature: D. Walzak
Mo. 01 Day 06 Year 99

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: FRANK BURCZYK
Signature: Frank Burczyk
Mo. 01 Day 06 Year 99

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name:
Signature:
Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name:
Signature:
Mo. Day Year

A: 704 B: C: D:

COPY 3-Disposer State-mailed by generator

P2SUL007852

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

NYC 551388-3

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4/97)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Document No.

2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number NYC 551388-3

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. | c.

b. | d.

K. Handling Codes for Wastes Listed Above

a. | c.

b. | d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

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Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

COPY 8-Generator-retained by generator

P2SUL007853

TO: SAFETY-KLEEN SYSTEMS, INC.
20 [illegible]
[illegible] NY 11701

EPA ID NO. NYD000708198
(DESIGNATED FACILITY)

UNDER MANIFEST/BILL OF SERVICE NUMBER NYC5513883 THE GENERATOR NOTED BELOW IS SHIPPING THE A WASTE DETERMINED TO BE RESTRICTED UNDER 40 CFR PART 268. IN ACCORDANCE WITH 40 CFR 268.7 AND 6NYCRR 371.[illegible] THE GENERATOR HEREBY PROVIDES NOTICE THAT THE WASTE IS RESTRICTED FROM LAND DISPOSAL. A COPY OF THIS FORM MUST BE KEPT BY THE GENERATOR FOR FIVE(5) YEARS FROM THE DATE OF SHIPMENT.

WASTE NAME: SOLVENT 105 (GAL DRUMS)
WASTE CODE(S): D001 D018 D027 D040
TREATABILITY GROUP: NONWASTEWATERS

SKDOT#: 0000704

EPA WASTE CODES	WASTE DESCRIPTION AND TREATMENT/REGULATORY SUBCATEGORY OR REGULATED HAZARDOUS CONSTITUENT	TREATMENT STANDARD (*) CONCENTRATION OR TECHNOLOGY CODE
D001	HIGH TOT IGNITABLE CHARACTERISTIC WASTE	NORGS; OR CMBST **
D018	BENZENE	10 MG/KG ****
D027	TETRACHLOROETHYLENE	6.0 MG/KG ****
D040	TRICHLOROETHYLENE	5.0 MG/KG ****

N O T E S

THE CONSTITUENT CONCENTRATION IS BASED ON KNOWLEDGE OF THE WASTE (VIA MATERIAL SAFETY DATA SHEETS FOR THE CHEMICAL(S) USED, AND THE PROCESS WHICH CREATED THE WASTE).

NOTES: * THESE TREATMENT STANDARDS DO NOT PRECLUDE RECLAMATION PRIOR TO FINAL DISPOSAL FOR
** NEW TREATMENT STANDARDS UNDER FEDERAL RULES EFFECTIVE 12-19-94.
*** TREATMENT STANDARDS APPLICABLE IN CERTAIN HSWA-AUTHORIZED STATES AND MEET UNIVERSAL TREATMENT STANDARDS.
**** NEW TREATMENT STANDARDS UNDER FEDERAL RULES EFFECTIVE 7-8-96.
***** NEW TREATMENT STANDARDS UNDER FEDERAL RULES EFFECTIVE 8-24-98.

UNC NOTICE: GENERATOR IS NOT REQUIRED TO TEST UNDERLYING CONSTITUENTS WHEN TREATED MONITORS FOR ALL REGULATED CONSTITUENTS PRIOR TO DISPOSAL.

EXP NOTICE: THIS FORM EXPIRES ON 12/31/99.

GENERATOR NAME: [illegible]
EPA ID: NYD131318651

SEQ#: [illegible] LIC: [illegible] CUST: 2-110-08-[illegible] TERM: 01 REF#: 987748 SW: 9901

TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFER

Z 593 811 048

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail *(See reverse)*

Sent to NYSDEC DIV.OF SOLID & HAZ.MATERIALS	
Street & Number PO BOX 12820	
Post Office, State, & ZIP Code ALBANY, NY 12212	
Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form 3800, April 1995

Fold at line over top of envelope to the right of the return address

CERTIFIED

Z 593 811 048

MAIL

Is your RETURN ADDRESS completed on the reverse side?

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
NYSDEC
Division of Solid & Haz. Materia
P.O. Box 12820
Albany, NY 12212

4a. Article Number
Z 593 811 048

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
1/12/99

5. Received By: *(Print Name)*

6. Signature: *(Addressee or Agent)*
X

8. Addressee's Address *(Only if requested and fee is paid)*

PS Form **3811**, December 1994 Domestic Return Receipt

Thank you for using Return Receipt Service.

WORK COPY PA

SITE NAME _____

EPA ID NO. ___ ___ ___ ___

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

1993 HAZARDOUS WASTE REPORT

FORM WR

WASTE RECEIVED FROM OFF- SITE

INSTRUCTIONS: Read the detailed instructions beginning on page 29 of the Hazardous Waste Report booklet before completing this form.

Waste 1

A. Description of hazardous waste: - Instructions, Page 29

B. EPA hazardous waste code: Instructions, Page 29

C. New York State hazardous waste code: Instructions, Page 30

D. EPA ID Number of facility from which waste was shipped: Instr., Page 30

E. Quantity managed in 1993 Instructions, Page 30

F. UOM: Instr., Page 30

Density: ___ . ___ ☐ 1. lbs/gal. ☐ 2. sg.

G. Waste form code: Instructions, Page 30 B

H. RCRA Radioactive- mixed: Instructions, Page 31

I. System type: Instructions, Page 31 M

Waste 2

A. Description of hazardous waste: - Instructions, Page 29

B. EPA hazardous waste code: Instructions, Page 29

C. New York State hazardous waste code: Instructions, Page 30

D. EPA ID Number of facility from which waste was shipped: Instr., Page 30

☐ Check if I.D. is the same as Waste 1

E. Quantity managed 1993: Instructions, Page 30

F. UOM: Instr., Page 30

Density: ___ . ___ ☐ 1. lbs/gal. ☐ 2. sg.

G. Waste form code: Instructions, Page 30 B

H. RCRA Radioactive- mixed: Instructions, Page 31

I. System type: Instructions, Page 31 M

Waste 3

A. Description of hazardous waste - Instructions, Page 29

B. EPA hazardous waste code: Instructions, Page 29

C. New York State hazardous waste code: Instructions, Page 30

D. EPA ID Number of facility from which waste was shipped: Instr., Page 30

☐ Check if I.D. is the same as Waste 2

E. Quantity managed in 1993: Instructions, Page 30

F. UOM: Instr., Page 30

Density: ___ . ___ ☐ 1. lbs/gal. ☐ 2. sg.

G. Waste form code: Instructions, Page 30 B

H. RCRA Radioactive- mixed: Instructions, Page 31

I. System type: Instructions, Page 31 M

Comments:

NYG 3893067

Please type or print. Do not staple

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

4670
D3868930
PPW 09/22/2004
(Hazardous Waste Manifest 1/23/03)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD131318661
Manifest Doc. No.: 13067
2. Page 1 of: 1

Information within heavy bold line is not required by Federal Law.

3. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Telephone Number (516) 338-2337

A. NYG 3893067

B. Generator's ID: SAME

5. Transporter 1 (Company Name): Clean Harbors Env Services Inc
6. US EPA ID Number: MAD038322250

C. State Transporter's ID: NYMA006

D. Transporter's Telephone (781) 849-1800

7. Transporter 2 (Company Name): Mitrance Express Inc
8. US EPA ID Number: NJD986660713810

E. State Transporter's ID

F. Transporter's Telephone (800) 742-8042

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4979 Spring Grove Avenue
Cincinnati, OH 45232

10. US EPA ID Number: OHD000816629

G. State Facility ID

H. Facility Telephone (513) 681-5738

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE PETROLEUM DISTILLATES, N.O.S., (ALIPHATIC HYDROCARBONS), 3, UN1268, PG III	111	DM	1116	P	EPA D001 / STATE
b. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II	111	DF	1142	P	EPA D002 / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
a. ERG#128 (L),(E)
c.
b. ERG#154 (L),(C,E)
d.

K. Handling Codes for Wastes Listed Above
a. S
c.
b. T
d.

15. Special Handling Instructions and Additional Information
EMERGENCY PHONE #: (800) 483-3718
11a: CH114938 D039 11b: CH109142 D008 D007 D008 NJDEPW07250 UECAL#

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: [illegible] | Signature: [illegible] | Mo. 12 Day 22 Year 04

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] | Signature: [illegible] | Mo. 12 Day 22 Year 04

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] | Signature: [illegible] | Mo. 12 Day 22 Year 04

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: [illegible] | Signature: [illegible] | Mo. 12 Day 09 Year 04

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

COPY 6—TSD Facility—Retained by TSD Facility

NYG 3893067

Please type or print. Do not staple

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

(Hazardous Waste Manifest 1/23/03)

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NTD131318951
Manifest Doc. No.:
2. Page 1 of 1
Information within heavy bold line is not required by Federal Law.

A. NYG 3893067

3. Generator's Name and Mailing Address
Sales Micro Ub Inc
1101 Prospect Avenue
Westbury, NY 11590

B. Generator's ID: SAME

4. Generator's Telephone Number (516) 338-2337

5. Transporter 1 (Company Name): Clean Harbors Env Services Inc
6. US EPA ID Number: MAD032322250

C. State Transporter's ID: NYMA006
D. Transporter's Telephone (781) 848-1800

7. Transporter 2 (Company Name):
8. US EPA ID Number:

E. State Transporter's ID:
F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4579 Spring Grove Avenue
Cincinnati, OH, 45232

10. US EPA ID Number: OHD000818829

G. State Facility ID:
H. Facility Telephone (513) 681-5738

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE PETROLEUM DISTILLATES, N.O.S., (AROMATIC HYDROCARBONS), 3, UN1268, PG III					EPA D001 / STATE
b. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II					EPA D002 / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
a. D001 (L,H,I,C,E)
b. D002/D001 (L),(C,E)
c.
d.

K. Handling Codes for Wastes Listed Above
a. H
b. T
c.
d.

15. Special Handling Instructions and Additional Information
EMERGENCY PHONE #: (800) 483-3118
11b: CH114538 0039 11b: CH150142 0005 0007 0008 NJDEP80/209 DECAL#

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Mo. | Day | Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Mo. | Day | Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Mo. | Day | Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Mo. | Day | Year

COPY 8—Generator—Retained by Generator

INSTRUCTIONS FOR THE NEW YORK STATE UNIFORM HAZARDOUS WASTE MANIFEST

General Information

New York State regulation requires proper completion of all information on a manifest. Omissions, false coding or illegibility is considered a violation. All generators are responsible under New York State and Federal Law for the proper identification, labeling, manifesting and ultimate disposal of all hazardous waste they generate. The manifest system is designed to track hazardous waste from the point of generation until its final disposal (cradle to grave). In order to accomplish this goal, it is essential that all **items on a manifest be properly completed.**

Distribution

Distribution of each copy of the manifest is indicated on the bottom of the form. Copies of the manifest must be mailed promptly. New York State regulations provide five (5) working days for generator and two (2) for a TSDF. The disposer's state is the state in which the designated TSD facility is located. Generator's state is the state in which the installation generating the hazardous waste is located. TSD facility is a treatment, storage or disposal facility.

Generator Section

Item 1-Enter the US EPA ID number (twelve digit number issued by the federal government). The generator must assign a sequential unique, five digit number different for each manifest, as the manifest document number.

Item 2-If a continuation sheet is used, please enter the total number of sheets here. Any EPA approved continuation sheet may be used, but distribution and completion must meet New York manifest requirements. The document number in Item A must be placed in Item L of each continuation sheet.

Items 3-and **4**-Self explanatory. These must correspond to the generator's US EPA ID number.

Items 5, 6, 7 and **8**- These are self-explanatory. These numbers must be secured from the transporter. If more than one transporter is used, the generator must supply additional copies of this manifest for each transporter copy (#5).

Items 9 and **10**-The designated TSD facility, name, address and ID number should appear here.

NOTE: All US EPA ID numbers are a twelve digit code starting off with the letters corresponding to the state in which the facility or transporter is located.

NOTE: Only New York State authorized transporters and TSD facilities are allowed to transport or receive hazardous waste in New York State. The generator shall check for authorization.

Item 11-USDOT requires the word "waste" before or in the shipping name for all hazardous waste. See 49 CFR 171 thru 177. Contact USDOT office for description assistance. Any waste in this box is considered a hazardous waste.

Item 12-

Number-indicate number of containers (use whole numbers).

Containers/Type	
DM-Metal drums, barrels, kegs	DT-Dump trucks
DW-Wooden drums, barrels, kegs	CY-Cylinders
DF-Fiberboard or plastic drums, kegs	CM-Metal boxes, cartons, cases, roll-offs
TP-Tanks, portable	CW-Wooden boxes, cartons, cases
TT-Cargo tank, tank trucks	CF-Fiber or plastic boxes, cartons, cases
TC-Tank cars	BA-Burlap, cloth, paper or plastic bags

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to: Chief Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street S.W., Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503

Item 13-Actual number of units indicated in box 14. (Do not use fractions or decimals).

Item 14-Units (wt/vol)

G-Gallons (liquids only)	L-Liters (liquids only)
P-Pounds	K-Kilograms
T-Tons (2,000 pounds)	M-Metric Tons (1,000 kilograms)
Y-Cubic Yards	N-Cubic Meters

Item 15-Use this space to indicate special transportation, treatment, storage or disposal or Bill of Lading information. If an alternate facility is designated, note it here. For international shipments, enter point of departure. Emergency response telephone numbers, or similar information may be included here.

Item 16-The authorized agent of the generator must read and then sign (by hand) and date this certification. The date is the date of receipt by transporter.

NEW YORK STATE REQUIRES THIS ADDITIONAL INFORMATION

Item A-Number preprinted by New York State Department of Environmental Conservation (NYSDEC).

Item B-Generator site address if different from mailing address. If same, write in same.

Item C and **E**-State of registration and motor vehicle license plate number of waste carrying portion of vehicle used to transport.

Item D and **F**-Telephone number of authorized agent.

Item G-No entry required by NYSDEC

Item H-Telephone number at site of TSD facility.

Item I-Hazardous waste numbers (letter and three digits) as assigned by 6 NYCRR Part 371 or 40 CFR 261 must be used to identify hazardous waste. Enter in top box by EPA. If waste is not hazardous in New York but regulated by another state, enter that state's waste code in bottom box.

Item J-If description in Item 11 (a,b,c,d) contains NOS or other general term, the hazardous waste constituent must be provided here for each. The specific gravity assumed to be one (1.00) unless indicated in lower right of each box.

Item K-Each material **must** be assigned an ultimate disposal method code as follows: L=Landfill, B=Incineration, heat recovery, burning, T=Chemical, physical, or biological treatment, R=Material recovery of more than 75 percent of the total material. Both the generator and the TSDF should agree on codes assigned in this item.

Transporter Section

Items 17 and **18**-Print or type the full name of person accepting responsibility and acknowledging receipt of material as listed on manifest for transport. Enter date of receipt and signature.

TSDF Section

Item 19-The authorized representative of the TSDF must note in the space any discrepancy between waste described on manifest and waste actually received. Any rejected materials should be listed and destination of those materials provided.

Item 20-The signature (by hand) of the authorized TSDF agent indicates acceptance (except for Item 19) and agreement with statements on this manifest. The date is the date of signature and receipt of shipment. A TSDF not providing ultimate disposal agrees to transfer waste to a TSDF authorized to provide ultimate disposal as indicated in Item K.

Additional Information

1. If the disposer state supplies a manifest, that state's form must be used. In any case, New York requires that both the generator and TSDF mail copies to the generator's state and the disposer's state, with the ultimate disposal method indicated in Item K.
2. There may be variations in the requirements between various states regarding Items A thru K, therefore, the generator should contact the disposer's state for specific details.
3. If assistance is needed in completion of this manifest, please contact NYSDEC Data Management Section at 518/402-8738 weekdays from 9:00 a.m. to 4:00 p.m.

(Important: Type or print; read instructions before completing form.)

EPA

EPA FORM R
PART III. CHEMICAL-SPECIFIC INFORMATION

(This space for your optional use.)

1. CHEMICAL IDENTITY (Do not complete this section if you complete Section 2.)

1.1	[Reserved]
1.2	CAS Number (Enter only one number exactly as it appears on the 313 list. Enter NA if reporting a chemical category.)
1.3	Chemical or Chemical Category Name (Enter only one name exactly as it appears on the 313 list.)
1.4	Generic Chemical Name (Complete only if Part I, Section 1.1 is checked "Yes." Generic name must be structurally descriptive.)

2. MIXTURE COMPONENT IDENTITY (Do not complete this section if you complete Section 1.)

Generic Chemical Name Provided by Supplier (Limit the name to a maximum of 70 characters (e.g., numbers, letters, spaces, punctuation).)

3. ACTIVITIES AND USES OF THE CHEMICAL AT THE FACILITY (Check all that apply.)

3.1	Manufacture the chemical:	a. [ ] Produce b. [ ] Import	If produce or import: c. [ ] For on-site use/processing e. [ ] As a byproduct	d. [ ] For sale/distribution f. [ ] As an impurity
3.2	Process the chemical:	a. [ ] As a reactant d. [ ] Repackaging only	b. [ ] As a formulation component	c. [ ] As an article component
3.3	Otherwise use the chemical:	a. [ ] As a chemical processing aid	b. [ ] As a manufacturing aid	c. [ ] Ancillary or other use

4. MAXIMUM AMOUNT OF THE CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

[ ][ ] (enter code)

5. RELEASES OF THE CHEMICAL TO THE ENVIRONMENT ON-SITE

You may report releases of less than 1,000 pounds by checking ranges under A.1. (Do not use both A.1 and A.2)		A. Total Release (pounds/year) A.1 Reporting Ranges 1-10	11-499	500-999	A.2 Enter Estimate	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1 Fugitive or non-point air emissions	5.1a	[ ]	[ ]	[ ]		5.1b [ ]	
5.2 Stack or point air emissions	5.2a	[ ]	[ ]	[ ]		5.2b [ ]	
5.3 Discharges to receiving streams or water bodies (Enter letter code from Part I Section 3.10 for stream(s) in the box provided.) 5.3.1 [ ]	5.3.1a	[ ]	[ ]	[ ]		5.3.1b [ ]	5.3.1c %
5.3.2 [ ]	5.3.2a	[ ]	[ ]	[ ]		5.3.2b [ ]	5.3.2c %
5.3.3 [ ]	5.3.3a	[ ]	[ ]	[ ]		5.3.3b [ ]	5.3.3c %
5.4 Underground injection	5.4a	[ ]	[ ]	[ ]		5.4b [ ]	
5.5 Releases to land 5.5.1 On-site landfill	5.5.1a	[ ]	[ ]	[ ]		5.5.1b [ ]	
5.5.2 Land treatment/application farming	5.5.2a	[ ]	[ ]	[ ]		5.5.2b [ ]	
5.5.3 Surface impoundment	5.5.3a	[ ]	[ ]	[ ]		5.5.3b [ ]	
5.5.4 Other disposal	5.5.4a	[ ]	[ ]	[ ]		5.5.4b [ ]	

[ ] (Check if additional information is provided on Part IV-Supplemental Information.)

EPA
United States Environmental Protection Agency

FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER: 11801PRKNL220MI

Toxic Chemical, Category, or Generic Name: Chromium Powder

WHERE TO SEND COMPLETED FORMS:

1. EPCRA Reporting Center
   P.O. Box 3348
   Merrifield, VA 22116-3348
   ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 93

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?

[ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [X] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official: Joe Macri, Manager Facilities and Transportation

Signature: J. Macri

Date Signed: June 30, 1994

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: Metco Division Perkin-Elmer Corporation

TRI Facility ID Number: 11801PRKNL220MI

Street Address: 220 Miller Place

City: Hicksville

County: Nassau

State: New York

Zip Code: 11801

Mailing Address (if different from street address): 1101 Prospect Avenue

City: Westbury

State: New York

Zip Code: 11590

PUT LABEL HERE

EPA
United States Environmental Protection Agency

EPA FORM R

PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
Chromium Powder

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check only one)	a. [ ] An entire facility	b. [X] Part of a facility
4.3	Technical Contact	Name: Joe Macri	Telephone Number (include area code): (516) 334-1300
4.4	Public Contact	Name: Joe Macri	Telephone Number (include area code): (516) 334-1300

4.5	SIC Code (4-digit)	a. 3399	b.	c.	d.	e.	f.

		Latitude			Longitude		
4.6	Latitude and Longitude	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		086	13	00	003	47	00

4.7	Dun & Bradstreet Number(s) (9 digits)	a. 05-773-1663	b.
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. NYD981558570	b.
4.9	Facility NPDES Permit Number(s) (9 characters)	a. N/A	b.
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. N/A	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	[ ] NA Perkin-Elmer Corporation
5.2	Parent Company's Dun & Bradstreet Number	[ ] NA (9 digits) 00-118-4480

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
Chromium Powder

SECTION 1. TOXIC CHEMICAL IDENTITY

(Important: DO NOT complete this section if you complete Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	7440-47-3
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	Chromium
1.3	Generic Chemical Name (Important: Complete **only** if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)
	N/A

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
	N/A

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1	**Manufacture the toxic chemical:**	a. ☐ Produce b. ☐ Import	If produce or import: c. ☐ For on-site use/processing d. ☐ For sale/distribution e. ☐ As a byproduct f. ☐ As an impurity
3.2	**Process the toxic chemical:**	a. ☐ As a reactant b. ☐ As a formulation component	c. ☒ As an article component d. ☒ Repackaging
3.3	**Otherwise use the toxic chemical:**	a. ☐ As a chemical processing aid b. ☐ As a manufacturing aid	c. ☐ Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	03	(Enter two-digit code from instruction package.)

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
Chromium Powder

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X] NA			
5.2	Stack or point air emissions	[ ] NA	A	C	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name N/A				
5.3.2	Stream or Water Body Name N/A				
5.3.3	Stream or Water Body Name N/A				
5.4	Underground injections on-site	[X] NA			
5.5	Releases to land on-site				
5.5.1	Landfill	[X] NA			
5.5.2	Land treatment/ application farming	[X] NA			
5.5.3	Surface impoundment	[X] NA			
5.5.4	Other disposal	[X] NA			

[ ] Check here only if additional Section 5.3 information is provided on page 5 of this form.

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
Chromium Powder

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3	Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__	Stream or Water Body Name			
	N/A			
5.3.__	Stream or Water Body Name			
	N/A			
5.3.__	Stream or Water Body Name			
	N/A			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)
N/A	

6.1.B POTW Name and Location Information

6.1.B.__ POTW Name		6.1.B.__ POTW Name	
N/A			
Street Address		Street Address	
City	County	City	County
State	Zip Code	State	Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ]
(example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds
C = 500 - 999 pounds

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
Chromium Powder

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: N/A

Street Address: Loni-Jo Metal Corporation

City: 70 Kinkel Street

County: Nassau

State: New York

Zip Code: 11590

Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 8500	1. M	1. M 24
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: N/A

Street Address:

City:

County:

State:

Zip Code:

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Section 6.2 page this is, here. [ ] (example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
Chromium Powder

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b 1 2 3 4 5 6 7 8	7A.1c	7A.1d %	7A.1e Yes [ ] No [ ]
7A.2a	7A.2b 1 2 3 4 5 6 7 8	7A.2c	7A.2d %	7A.2e Yes [ ] No [ ]
7A.3a	7A.3b 1 2 3 4 5 6 7 8	7A.3c	7A.3d %	7A.3e Yes [ ] No [ ]
7A.4a	7A.4b 1 2 3 4 5 6 7 8	7A.4c	7A.4d %	7A.4e Yes [ ] No [ ]
7A.5a	7A.5b 1 2 3 4 5 6 7 8	7A.5c	7A.5d %	7A.5e Yes [ ] No [ ]

If additional copies of page 7 are attached, indicate the total number of pages in this box [ ] and indicate which page 7 this is, here. [ ] (example: 1, 2, 3, etc.)

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
Chromium Powder

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.**

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.**

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Chemical, Category, or Generic Name
Chromium Powder

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

All quantity estimates can be reported using up to two significant figures.		Column A 1992 (pounds/year)	Column B 1993 (pounds/year)	Column C 1994 (pounds/year)	Column D 1995 (pounds/year)
8.1	Quantity released *	0	0	0	0
8.2	Quantity used for energy recovery on-site	0	0	0	0
8.3	Quantity used for energy recovery off-site	0	0	0	0
8.4	Quantity recycled on-site	0	0	0	0
8.5	Quantity recycled off-site	2500	8500	8600	8600
8.6	Quantity treated on-site	0	0	0	0
8.7	Quantity treated off-site	0	0	0	0
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	N/A			
8.9	Production ratio or activity index	.89			

8.10	Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.			
	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	W19	a. T04	b. T06	c.
8.10.2	W39	a. T04	b. T10	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)	YES [ ]	NO [X]

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

48-14-1 (10/96) 7a

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. Do not Staple.

Form Approved. OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. NYD 0 5 7 1 3 1 6 0 5 2 4 6 4 6 — Manifest Document No.

2. Page 1 of 1 — Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
SOLDER SERVICE
325 BUFFY AVENUE, HICKSVILLE, NY 11801

4. Generator's Phone (516) 336-2570

A. State Manifest Document No. NY G 002404 8

B. Generator's ID SAME

5. Transporter 1 (Company Name) Chemical Pollution Control Inc — 6. US EPA ID Number NYD 9 8 7 1 3 9 5 4 4

C. State Transporter's ID XR4643

D. Transporter's Phone (516) 586-0333

7. Transporter 2 (Company Name) — 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone ( )

9. Designated Facility Name and Site Address
Chemical Pollution Control Inc
100 South Fourth Street
Bay Shore, NY 11706

10. US EPA ID Number NYD 9 8 0 9 4 1 4 9 4 4

G. State Facility's ID Same

H. Facility's Phone (516) 586-0333

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
WASTE PAINT RELATED MATERIAL 3 UN1263 PGII (F003)	001	DM	00255	G	EPA F003 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
a. D001, F005 086 — c. — b. — d.

K. Handling Codes for Wastes Listed Above
a. 5 — c. — b. — d.

15. Special Handling Instructions and Additional Information
A) 3376 F ERG 127 — Emergency Response #516 586-0333

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: BILL BOUCHARD — Signature: B. Bouchard — Mo. Day Year: 01 8 97

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: MICHAEL J SMITH — Signature: MJ Smith — Mo. Day Year: 01 8 97

18. Transporter 2 (Acknowledgement or Receipt of Materials)
Printed/Typed Name — Signature — Mo. Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: DAN CARR — Signature: Dan Carr — Mo. Day Year: 10 4 2 3 97

GENERATOR — TRANSPORTER — FACILITY

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Dept. of Environmental Conservation (518) 457-7362.

NY G 002404 8

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

COPY 5 - Generator mailed by TSD facility

48-14-1 (10/96) 7a

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

Please print or type. Do not Staple.

P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Document No.

2. Page 1 of 1 | Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
SUPER SEALS
305 DUFFY AVENUE, HICKSVILLE, NY 11801

4. Generator's Phone (516) 335-2575

A. State Manifest Document No. NY G 002404 8

B. Generator's ID

5. Transporter 1 (Company Name) Chemical Pollution Control Inc | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Phone (516) 335-2333

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone ( )

9. Designated Facility Name and Site Address
Chemical Pollution Control Inc
125 South Fourth Street
Bay Shore, NY 11706

10. US EPA ID Number

G. State Facility's ID

H. Facility's Phone (516) 336-0333

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)

	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. UNIFORM PART DEGREASER MATERIAL (NON-HAZARDOUS)					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
a. Profile 1086
b.
c.
d.

K. Handling Codes for Wastes Listed Above
a. D
b.
c.
d.

15. Special Handling Instructions and Additional Information
DESTROY EPA 167
Emergency Response 516-335-0332

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Bill Bouchard | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: William J. Smith | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement or Receipt of Materials)
Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Dept. of Environmental Conservation (518) 457-7362.

NY G 002404 8

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

P2SUL006988

COPY 8--Generator--retained by generator

HAZARDOUS WASTE MANIFEST

UNIFORM HAZARDOUS WASTE MANIFEST

NYD057731603240481

NYG 002404 8

SULZER METCO
325 DUFFY AVENUE, HICKSVILLE, NY 11801
516 338-2570

SAME

XR4643

Chemical Pollution Control Inc — NYD087785429 — 516 586-0333

Chemical Pollution Control Inc
120 South Fourth Street
Bay Shore, NY 11706 — NYD087785429 — 516 586-0333

WASTE PAINT RELATED MATERIAL
3 UN1263 PGII (F003) — 001 DM000356 — F003

D001 F005 086 — B

A) 3376 F ERG 127

Emergency Response #516-586-0333

Printed/Typed Name: BILL BOUCHARD — Signature: B. Bouchard — 042397

Printed/Typed Name: MICHAEL J SMITH — Signature: MJ Smith — 042397

NYG 002404 8

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

P2SUL006989

CHEMICAL POLLUTION CONTROL, INC. OF NEW YORK - A 21ST CENTURY ENVIRONMENTAL MANAGEMENT COMPANY

NOTIFICATION FOR WASTES RESTRICTED FROM LAND DISPOSAL

Generator Name: [illegible] Manifest # [illegible] Line Item # (s) [illegible]

1) **Identify** by placing the line item number(s) in the corresponding box(es) which wastes are wastewaters or non-wastewaters according to the definition in 6 NYCRR 376.1(b)(1)(vi) Wastewater_____ Non-wastewater [illegible]

2) **Identify** all of the NY State/USEPA waste codes* and subcategories that apply to this shipment, as defined by 6 NYCRR 371 / 6 NYCRR 376 / 40 CFR 261/40 CFR 268.

*For waste streams which carry the waste codes D001, D002 or D012 through D043, the Underlying Hazardous Constituents (UHC) found in 40 CFR 268.48 must be identified. Include a copy of the Underlying Hazardous Constituents (U.H.C.) Form or list the U.H.C. on this form for the waste stream. If the waste requires identification of the U.H.C. but none are present, place an 'X' in the space provided under 'No UHC'.
*For waste where the NY 376 regulations are more stringent include either a completed NY 376 attachment indentifying the constituents regulated under NY 376 or list the information in the section provided below.

Line Item	Waste Code	Description	No UHC	If NY 376 is more restrictive list the applicable treatment level or technology next to the applicable NY 376 section.		
[illegible]	D001	[illegible]		376.4(b)	376.4(c)	376.4(d)
	F003			376.4(b)	376.4(c)	376.4(d)
	F005			376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)

3) **List the line item number next to the applicable category.**

[illegible] **A. RESTRICTED WASTE REQUIRES TREATMENT**
This waste must be treated to the applicable standards set forth in 6 NYCRR 376, 40 CFR 268.32 or RCRA 3004(d).

____ **B. RESTRICTED WASTE IS SUBJECT TO A VARIANCE**
This waste is subject to exemption from a prohibition on the type of land disposal utilized for the waste, such as a case-by-case extension under 268.5, an exemption under 268.6, or a nationwide capacity variance [see 268.7(a)(3)]. All variances are regulated under 6 NYCRR 376.1(a)(5).
Please list the date the waste is subject to the prohibitions_____

____ **C. LAB PACK QUALIFYING FOR ALTERNATIVE TREATMENT UNDER 6 NYCRR 376.4(C)/40 CFR 268.42(C)**
This waste contains wastes listed in 6 NYCRR 376, Appendix 38 and 39, as applicable.
"I certify under penalty of law that I personally have examined and am familiar with the waste and that the lab pack contains only wastes which have not been excluded under appendix IV to 40 CFR 268 or solid wastes not subject to regulation under 40 CFR 261. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."

4) **Identify** the line item(s) in the corresponding space(s) below for which attachments are included in this notification by writing in the line item number next to the applicable attachment.

_____U.H.C._____NY376_____ANALYSIS_____OTHER (SPECIFY)_____

Waste analysis is attached where available, otherwise, the information contained herein is based upon my thorough knowledge of the waste(s).
I hereby certify that I believe that the information I submitted is true, accurate and complete.

Signature [illegible] Title [illegible] Date [illegible]

(Rev. 5/95)

Z 314 694 200

Receipt for Certified Mail

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Sent to NYS DEPT. OF ENV. CO
DIV. HAZARDOUS SUB. REG.
Street and No. HAZARDOUS WASTE
PO BOX 12820
P.O., State and ZIP Code ALBANY NY 12212

Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form 3800, March 1993

Fold at line over top of envelope to the right of the return address

CERTIFIED MAIL

Z 314 694 200

CHEMICAL POLLUTION CONTROL Inc.

For A Safer Environment

120 South Fourth Street • Bay Shore, NY 11706
(516) 586-0333

A 21st CENTURY Environmental Management Inc., Company

Customer # 3376

SULZER METCO

DRIVER'S REMOVAL LIST

A FINAL INVOICE WILL FOLLOW

Permit #_____
EPA-NYDO82785429
N.Y. D.E.C. 1A-042 • N.J. D.E.P. 5371AL
Conn. D.E.P. CTHW 163 • Mass. 159

Date: 4/23/97
Customer P.O. #: 203887
Manifest #: NON HAZ 00240148
Terms: Net 10 Days
Driver: MS

QUANTITY	STREAM CODE	PRICE	REMOVAL & DISPOSAL	AMOUNT
7	A	108		
2	B	120		
3	C	120		
1	F	250		
		NO	TRANSPORTATION	Tax
			EMPTY DRUMS DELIVERED	Total

D. Bouch

P2SUL006991

NYG 2323161

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple

(EPA ID Number Waste Manifest 1/5/99)

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.	Manifest Doc. No.	2. Page 1 of	Information within heavy bold line is not required by Federal Law.
	NYD131318851	23161	1	

3. Generator's Name and Mailing Address
Sidor Metro US Inc
1111 Prospect Avenue
Westbury NY 11590

4. Generator's Telephone Number (516) 738-2337

A. NYG 2323161

B. Generator's ID SAME

5. Transporter 1 (Company Name)	6. US EPA ID Number	C. State Transporter's ID
Clean Harbors Env Services Inc	MAD039322250	55827

D. Transporter's Telephone (781) 849-1800

7. Transporter 2 (Company Name)	8. US EPA ID Number	E. State Transporter's ID
		F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address	10. US EPA ID Number	G. State Facility ID
Spring Grove Resource Recovery 4879 Spring Grove Avenue Cincinnati OH 45232	OHD000316820	H. Facility Telephone (513) 681-6132

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II	001	DF	00442	P	EPA D002 STATE
b. NON DOT REGULATED MATERIAL (KITCHEN GREASE) NA NONE	001	DM	00471	P	EPA NONE STATE
c					EPA STATE
d.					EPA STATE

RECEIVED
NOV 21 2005
ACCOUNTING

J. Additional Descriptions for Materials listed Above
a
b
c
d

K. Handling Codes for Wastes Listed Above
a T
b
c
d

15. Special Handling Instructions and Additional Information
EMERGENCY PHONE # (800) 483-3718

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
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Printed/Typed Name	Signature	Mo.	Day	Year
[illegible]	[illegible]	11	04	05

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Mo.	Day	Year
Frank Ricciardelli	[illegible]	11	04	05

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Mo.	Day	Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Mo.	Day	Year

GENERATOR
TRANSPORTER
FACILITY

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

COPY 5—Generator—Mailed by TSD Facility

P2SUL007515

NYG 2323161

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple

(Hazardous Waste Manifest 1/5/99)

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest Doc. No. 73164

2. Page 1 of

Information within heavy bold line is not required by Federal Law.

A. NYG 2323161

B. Generator's ID

C. State Transporter's ID 55937 MA

D. Transporter's Telephone ( )

E. State Transporter's ID

F. Transporter's Telephone ( )

G. State Facility ID

H. Facility Telephone ( )

GENERATOR

3. Generator's Name and Mailing Address

4. Generator's Telephone Number ( )

5. Transporter 1 (Company Name)

6. US EPA ID Number

7. Transporter 2 (Company Name)

8. US EPA ID Number

9. Designated Facility Name and Site Address

10. US EPA ID Number

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above

a | c

b | d

K. Handling Codes for Wastes Listed Above

a | c

b | d

15. Special Handling Instructions and Additional Information

1X55 1X55 NY MA 006

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Mo. | Day | Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Mo. | Day | Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Mo. | Day | Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name | Signature | Mo. | Day | Year

COPY 8—Generator—Retained by Generator

CleanHarbors ENVIRONMENTAL SERVICES, INC.

Land Disposal Restriction Notification Form

Date: 11 / 03 / 2005

MANIFEST INFORMATION

Generator: Sulzer Metco US Inc
Address: 1101 Prospect Avenue
Westbury, NY 11590
EPA ID#: N Y D 1 3 1 3 1 8 6 5 1

Manifest No
NYG2323161
Sales Order No: D31059172
Manifest Document No:

LINE ITEM INFORMATION

Line Item:	Page No:	Profile No:	Treatability Group:	LDR Disposal Category:
11a	1	CH189142	NON- WASTEWATER	2 : This is subject to LDR.

EPA Waste Codes	EPA Waste Subcategory
D002	Corrosive Characteristic
D006	Toxicity characteristic for Cadmium
D007	Toxicity Characteristic for Chromium
D008	Toxicity Characteristic for Lead

LDR Chemical Data

Chemical	Underlying Hazardous Constituents	Constituents of Concern	Contaminants Subject to Treatment
CADMIUM	Y	N	N
Chromium	Y	N	N
LEAD	Y	N	N

Certification — **Applies to Manifest Line Items**

Pursuant to 40 CFR 268.7(a), I hereby notify that this shipment contains waste restricted under 40 CFR Part 268. **11a**

CleanHarbors
ENVIRONMENTAL SERVICES, INC.

Land Disposal Restriction Notification Form

Date: 11 / 03 / 2005

MANIFEST INFORMATION

Generator: Sulzer Metco US Inc
Address: 1101 Prospect Avenue
Westbury, NY 11590
EPA ID#: N Y D 1 3 1 3 1 8 6 5 1

Manifest No
NYG2323161
Sales Order No: D31059172
Manifest Document No:

Waste analysis data, where available, is attached

Signature: [illegible]
Title: EH&S Specialist

Print Name: P. D. PIETRANTONIO
Date: 11/4/05

CleanHarbors
ENVIRONMENTAL SERVICES, INC.

Land Disposal Restriction Notification Form

Date: 01 / 11 / 2007

MANIFEST INFORMATION

Generator: Sulzer Metco US Inc
Address: 1101 Prospect Avenue
Westbury, NY 11590
EPA ID#: N Y D 1 3 1 3 1 8 6 5 1

Manifest No
000600407FLE
Sales Order No: D31362538
Manifest Document No:

Waste analysis data, where available, is attached

Signature: David Watzak
Print Name: DAVID WATZAK
Title: Facilities tech
Date: 1/12/07

SULZER METCO

Sulzer Metco (US) Inc.
1101 Prospect Avenue
Westbury, NY 11590
Phone: (516) 334-1300
Fax: (516) 338-2296

February 25, 2000

EPA Region #2
Fred Rubel
Preparedness Coordinator
Woodridge Avenue
Edison, NJ 08837

Subject: SARA Title III – Tier II Report

Dear Sir / Madam:

Enclosed please find Sulzer Metco's 1999 SARA Title III, Tier II Reports for our Prospect Avenue and Miller Place facilities.

Thank you.

Michael S. Lydon
Environment, Health & Safety
Phone #: (516) 338-2337
FAX #: (516) 338-2336

FILE: 0225006.DOC

METCO AMDRY

SULZER METCO

Sulzer Metco (US) Inc.
1101 Prospect Avenue
Westbury, NY 11590
Phone: (516) 334-1300
Fax: (516) 338-2296

February 25, 2000

State Emergency Response Commission
C/O State Emergency Management Office
Albany, NY 12226-5000

Subject: SARA Title III – Tier II Report

Dear Sir / Madam:

Enclosed please find Sulzer Metco's 1999 SARA Title III, Tier II Reports for our Prospect Avenue and Miller Place facilities.

Thank you.

Michael S. Lydon
Environment, Health & Safety
Phone #: (516) 338-2337
FAX #: (516) 338-2336

FILE: 0225005.DOC

METCO AMDRY

SULZER METCO

Sulzer Metco (US) Inc.
1101 Prospect Avenue
Westbury, NY 11590
Phone: (516) 334-1300
Fax: (516) 338-2296

February 25, 2000

NYSDEC
Bureau of Spill Prevention and Response
Room 360
50 Wolf Road
Albany, NY 12233-3750

Subject: SARA Title III – Tier II Report

Dear Sir / Madam:

Enclosed please find Sulzer Metco's 1999 SARA Title III, Tier II Reports for our Prospect Avenue and Miller Place facilities.

Thank you.

Michael S. Lydon
Environment, Health & Safety
Phone #: (516) 338-2337
FAX #: (516) 338-2336

FILE: 0225004.DOC

METCO AMDRY

SULZER METCO

Sulzer Metco (US) Inc.
1101 Prospect Avenue
Westbury, NY 11590
Phone: (516) 334-1300
Fax: (516) 338-2296

February 25, 2000

Local Emergency Planning Committee
C/O Civil Preparedness Office
140 5th Street
Mineola, NY 11501

Subject: SARA Title III – Tier II Report

Dear Sir / Madam:

Enclosed please find Sulzer Metco's 1999 SARA Title III, Tier II Reports for our Prospect Avenue and Miller Place facilities.

Thank you.

Michael S. Lydon
Environment, Health & Safety
Phone #: (516) 338-2337
FAX #: (516) 338-2336

FILE: 0225003.DOC

SULZER METCO

Sulzer Metco (US) Inc.
1101 Prospect Avenue
Westbury, NY 11590
Phone: (516) 334-1300
Fax: (516) 338-2296

February 25, 2000

Fire Chief
Hicksville Fire Department
East Marie Street
Hicksville, NY 11801

Subject: SARA Title III – Tier II Report

Dear Sir / Madam:

Enclosed please find Sulzer Metco's 1999 SARA Title III, Tier II Reports for our Prospect Avenue and Miller Place facilities.

Thank you.

Michael S. Lydon
Environment, Health & Safety
Phone #: (516) 338-2337
FAX #: (516) 338-2336

FILE: 0225002.DOC

METCO AMDRY

SULZER METCO

Sulzer Metco (US) Inc.
1101 Prospect Avenue
Westbury, NY 11590
Phone: (516) 334-1300
Fax: (516) 338-2296

February 25, 2000

Fire Chief
Westbury Fire Department
Maple Avenue
Westbury, NY 11590

Subject: SARA Title III – Tier II Report

Dear Sir / Madam:

Enclosed please find Sulzer Metco's 1999 SARA Title III, Tier II Reports for our Prospect Avenue and Miller Place facilities.

Thank you.

Michael S. Lydon
Environment, Health & Safety
Phone #: (516) 338-2337
FAX #: (516) 338-2336

FILE: 0225001.DOC

METCO AMDRY

SULZER METCO

Sulzer Metco (US) Inc.
1101 Prospect Avenue
Westbury, NY 11590
Phone: (516) 334-1300
Fax: (516) 338-2296

February 25, 2000

Fire Chief
Syossett Fire Department
Cold Spring Road
Syossett, NY 11791

Subject: SARA Title III – Tier II Report

Dear Sir / Madam:

Enclosed please find Sulzer Metco's 1999 SARA Title III, Tier II Reports for our Prospect Avenue and Miller Place facilities.

Thank you.

Michael S. Lydon
Environment, Health & Safety
Phone #: (516) 338-2337
FAX #: (516) 338-2336

FILE: 0225007.DOC

METCO AMDRY

Form Approved OMB No. 2050-0072

Tier Two EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification
Name: Sulzer Metco (US) Inc
Street: 1101 Prospect Ave
City: Westbury County: Nassau State: NY Zip: 11590
SIC Code: 3542 Dun & Brad Number: 87-429-0349

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name
Name: Kevin D. Rodgers Phone: 516-338-2473
Mail Address: 1101 Prospect Ave, Westbury, NY 11590

Emergency Contact
Name: Michael S. Lydon Title: EH&S Specialist
Phone: 516-338-2337 24 Hr. Phone: 800-424-9300 Chemtrec
Name: Kevin D. Rodgers Title: Manager, Facilities
Phone: 516-338-2473 24 Hr. Phone: 800-424-9300 Chemtrec

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 99

[ ] Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Container Type	Pressure	Temperature	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7429905 Trade Secret [ ] Chem. Name Aluminum Powder Check all that apply: [x] Pure [x] Mix [x] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[x] Fire [ ] Sudden Release of Pressure [x] Reactivity [x] Immediate (acute) [x] Delayed (chronic)	Max. Daily Amount (code): 0 4 Avg. Daily Amount (code): 0 4 No. of Days On-site (days): 3 6 5	N D	1 1	4 4	Applications Laboratories Warehouse	[ ]
CAS 1344281 Trade Secret [ ] Chem. Name Aluminum Oxide Powder Check all that apply: [x] Pure [x] Mix [x] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [x] Immediate (acute) [x] Delayed (chronic)	Max. Daily Amount (code): 0 4 Avg. Daily Amount (code): 0 4 No. of Days On-site (days): 3 6 5	N D	1 1	4 4	Applications Laboratories Warehouse	[ ]
CAS 7439896 Trade Secret [ ] Chem. Name Iron Powder Check all that apply: [x] Pure [x] Mix [x] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[x] Fire [ ] Sudden Release of Pressure [x] Reactivity [x] Immediate (acute) [x] Delayed (chronic)	Max. Daily Amount (code): 0 4 Avg. Daily Amount (code): 0 4 No. of Days On-site (days): 3 6 5	N D	1 1	4 4	Applications Laboratories Warehouse Warehouse	[ ]

Certification *(Read and sign after completing all sections)*
I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 2, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Kevin D. Rodgers, Manager Facilities — Name and official title of owner/operator OR owner/operator's authorized representative
Signature
02-24-00 — Date signed

Optional Attachments
[ ] I have attached a site plan
[ ] I have attached a list of site coordinate abbreviations
[ ] I have attached a description of dikes and other safeguards measures

Form Approved OMB No. 2050-0072

Tier Two EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification
Name: Sulzer Metco (US) Inc
Street: 1101 Prospect Ave
City: Westbury County: Nassau State: NY Zip: 11590
SIC Code: 3542 Dun & Brad Number: 874290349

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name
Name: Kevin D. Rodgers Phone: 516-338-2473
Mail Address: 1101 Prospect Ave, Westbury, NY 11590

Emergency Contact
Name: Michael S. Lydon Title: EH&S Specialist
Phone: 516-338-2337 24 Hr. Phone: 800-424-9300 Chemtrec
Name: Kevin D. Rodgers Title: Manager, Facilities
Phone: 516-338-2473 24 Hr. Phone: 800-424-9300 Chemtrec

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19 99

[ ] Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Container Type	Pressure	Temperature	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7440020 Trade Secret [ ] Chem. Name Nickel Powder Check all that apply: [x] Pure [x] Mix [x] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [x] Immediate (acute) [x] Delayed (chronic)	Max. Daily Amount (code): 0 4 Avg. Daily Amount (code): 0 4 No. of Days On-site (days): 3 6 5	N D	1 1	4 4	Applications Laboratories Warehouse	[ ]
CAS 7440473 Trade Secret [ ] Chem. Name Chromium Powder Check all that apply: [x] Pure [x] Mix [x] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [x] Immediate (acute) [x] Delayed (chronic)	Max. Daily Amount (code): 0 4 Avg. Daily Amount (code): 0 4 No. of Days On-site (days): 3 6 5	N D	1 1	4 4	Applications Laboratories Warehouse	[ ]
CAS 1314234 Trade Secret [ ] Chem. Name Zirconium Powder Check all that apply: [x] Pure [x] Mix [x] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [ ] Immediate (acute) [x] Delayed (chronic)	Max. Daily Amount (code): 0 4 Avg. Daily Amount (code): 0 4 No. of Days On-site (days): 3 6 5	N D	1 1	4 4	Applications Laboratories Warehouse Warehouse	[ ]

Certification *(Read and sign after completing all sections)*

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Kevin D. Rodgers, Manager Facilities — Name and official title of owner/operator OR owner/operator's authorized representative
Signature
02-24-00 — Date signed

Optional Attachments
[ ] I have attached a site plan
[ ] I have attached a list of site coordinate abbreviations
[ ] I have attached a description of dikes and other safeguards measures

Form Approved OMB No. 2050-0072

Tier Two EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification
Name: Sulzer Metco (US) Inc
Street: 220 Miller Place
City: Hicksville County: Nassau State: NY Zip: 11801
SIC Code: 3399 Dun & Brad Number: 152084398

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name
Name: Kevin D. Rodgers Phone: 516-338-2473
Mail Address: 1101 Prospect Ave, Westbury, NY 11590

Emergency Contact
Name: Michael S. Lydon Title: EH&S Specialist
Phone: 516-338-2337 24 Hr. Phone: 800-424-9300 Chemtrec
Name: Kevin D. Rodgers Title: Manager, Facilities
Phone: 516-338-2437 24 Hr. Phone: 800-424-9300 Chemtrec

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 99

[ ] Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Container Type	Pressure	Temperature	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7429905 Trade Secret ___ Chem. Name Aluminum Powder Check all that apply: [x] Pure [x] Mix [x] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[x] Fire [ ] Sudden Release of Pressure [x] Reactivity [x] Immediate (acute) [x] Delayed (chronic)	Max. Daily Amount (code): 0 4 Avg. Daily Amount (code): 0 4 No. of Days On-site (days): 3 6 5	D N R E I	1 1 1 1 1	4 4 4 4 4	Warehouse, and Production Floor Production Floor Production Floor, Hardened Steel Hoppers Warehouse, and Production Floor Warehouse, and Production Floor	[ ]
CAS 1344281 Trade Secret ___ Chem. Name Aluminum Oxide Powder Check all that apply: [x] Pure [x] Mix [x] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [x] Immediate (acute) [x] Delayed (chronic)	Max. Daily Amount (code): 0 4 Avg. Daily Amount (code): 0 4 No. of Days On-site (days): 3 6 5	D N R E I	1 1 1 1 1	4 4 4 4 4	Warehouse, and Production Floor Production Floor Production Floor, Hardened Steel Hoppers Warehouse, and Production Floor Warehouse, and Production Floor	[ ]
CAS 7439896 Trade Secret ___ Chem. Name Iron Powder Check all that apply: [x] Pure [x] Mix [x] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[x] Fire [ ] Sudden Release of Pressure [x] Reactivity [x] Immediate (acute) [x] Delayed (chronic)	Max. Daily Amount (code): 0 4 Avg. Daily Amount (code): 0 4 No. of Days On-site (days): 3 6 5	D N R E I	1 1 1 1 1	4 4 4 4 4	Warehouse, and Production Floor Production Floor Production Floor, Hardened Steel Hoppers Warehouse, and Production Floor Warehouse, and Production Floor	[ ]

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Kevin D. Rodgers, Manager Facilities — Name and official title of owner/operator OR owner/operator's authorized representative
Signature
02-24-00 — Date signed

Optional Attachments
[ ] I have attached a site plan
[ ] I have attached a list of site coordinate abbreviations
[ ] I have attached a description of dikes and other safeguards measures

Tier Two EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification
Name: Sulzer Metco (US) Inc
Street: 1101 Prospect Ave
City: Westbury County: Nassau State: NY Zip: 11590
SIC Code: 3542 Dun & Brad Number: 874290349

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name
Name: Kevin D. Rodgers Phone: 516-338-2473
Mail Address: 1101 Prospect Ave, Westbury, NY 11590

Emergency Contact
Name: Michael S. Lydon Title: EH&S Specialist
Phone: 516-338-2337 24 Hr. Phone: 800-424-9300 Chemtrec
Name: Kevin D. Rodgers Title: Manager, Facilities
Phone: 516-338-2473 24 Hr. Phone: 800-424-9300 Chemtrec

***Important:** Read all instructions before completing form*

Reporting Period: From January 1 to December 31, 19 99

[ ] Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Container Type	Pressure	Temperature	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7440484 Trade Secret ___ Chem. Name Cobalt Powder Check all that apply: [x] Pure [x] Mix [x] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [x] Immediate (acute) [x] Delayed (chronic)	Max. Daily Amount (code): 0 4 Avg. Daily Amount (code): 0 4 No. of Days On-site (days): 3 6 5	D N R E I	1 1 1 1 1	4 4 4 4 4	Warehouse, and Production Floor Production Floor Production Floor, Hardened Steel Hoppers Warehouse, and Production Floor Warehouse, and Production Floor	[ ]
CAS ___ Trade Secret ___ Chem. Name Chromium Powder Check all that apply: [x] Pure [x] Mix [x] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [x] Immediate (acute) [x] Delayed (chronic)	Max. Daily Amount (code): 0 4 Avg. Daily Amount (code): 0 4 No. of Days On-site (days): 3 6 5	D N R E I	1 1 1 1 1	4 4 4 4 4	Warehouse, and Production Floor Production Floor Production Floor, Hardened Steel Hoppers Warehouse, and Production Floor Warehouse, and Production Floor	[ ]
CAS 1314234 Trade Secret ___ Chem. Name Zirconium Oxide Powder Check all that apply: [x] Pure [x] Mix [x] Solid [ ] Liquid [ ] Gas [ ] EHS EHS Name	[ ] Fire [ ] Sudden Release of Pressure [ ] Reactivity [ ] Immediate (acute) [x] Delayed (chronic)	Max. Daily Amount (code): 0 4 Avg. Daily Amount (code): 0 4 No. of Days On-site (days): 3 6 5	D N R E I	1 1 1 1 1	4 4 4 4 4	Warehouse, and Production Floor Production Floor Production Floor, Hardened Steel Hoppers Warehouse, and Production Floor Warehouse, and Production Floor	[ ]

Certification *(Read and sign after completing all sections)*
I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Kevin D. Rodgers, Manager Facilities — Name and official title of owner/operator OR owner/operator's authorized representative
Signature
02-24-00 — Date signed

Optional Attachments
[ ] I have attached a site plan
[ ] I have attached a list of site coordinate abbreviations
[ ] I have attached a description of dikes and other safeguards measures

US Code as of: 01/26/98

Sec. 11001. Establishment of State commissions, planning districts, and local committees

- (a) Establishment of State emergency response commissions
  Not later than six months after October 17, 1986, the Governor of each State shall appoint a State emergency response commission. The Governor may designate as the State emergency response commission one or more existing emergency response organizations that are State-sponsored or appointed. The Governor shall, to the extent practicable, appoint persons to the State emergency response commission who have technical expertise in the emergency response field. The State emergency response commission shall appoint local emergency planning committees under subsection (c) of this section and shall supervise and coordinate the activities of such committees. The State emergency response commission shall establish procedures for receiving and processing requests from the public for information under section 11044 of this title, including tier II information under section 11022 of this title. Such procedures shall include the designation of an official to serve as coordinator for information. If the Governor of any State does not designate a State emergency response commission within such period, the Governor shall operate as the State emergency response commission until the Governor makes such designation.

- (b) Establishment of emergency planning districts
  Not later than nine months after October 17, 1986, the State emergency response commission shall designate emergency planning districts in order to facilitate preparation and implementation of emergency plans. Where appropriate, the State emergency response commission may designate existing political subdivisions or multijurisdictional planning organizations as such districts. In emergency planning areas that involve more than one State, the State emergency response commissions of all potentially affected States may designate emergency planning districts and local emergency planning committees by agreement. In making such designation, the State emergency response commission shall indicate which facilities subject to the requirements of this subchapter are within such emergency planning district.

- (c) Establishment of local emergency planning committees
  Not later than 30 days after designation of emergency planning districts or 10 months after October 17, 1986, whichever is earlier, the State emergency response commission shall appoint members of a local emergency planning committee for each emergency planning district. Each committee shall include, at a minimum, representatives from each of the following groups or organizations: elected State and local officials; law enforcement, civil defense, firefighting, first aid, health, local environmental, hospital, and transportation personnel; broadcast and print media; community groups; and owners and operators of facilities subject to the requirements of this subchapter. Such committee shall appoint a chairperson and shall establish rules by which the committee shall function. Such rules shall include provisions for public notification of committee activities, public meetings to discuss the emergency plan, public comments, response to such comments by the committee, and distribution of the emergency plan. The local emergency planning committee shall establish procedures for receiving and processing requests from the public for information under section 11044 of this title, including tier II information under section 11022 of this title. Such procedures shall include the designation of an official to serve as coordinator for information.

- (d) Revisions
  A State emergency response commission may revise its designations and appointments under subsections (b) and (c) of this section as it deems appropriate. Interested persons may petition the State emergency response commission to modify the membership of a local emergency planning committee.

US Code as of: 01/26/98

Sec. 11002. Substances and facilities covered and notification

- (a) Substances covered
  - (1) In general
    A substance is subject to the requirements of this subchapter if the substance is on the list published under paragraph (2).
  - (2) List of extremely hazardous substances
    Within 30 days after October 17, 1986, the Administrator shall publish a list of extremely hazardous substances. The list shall be the same as the list of substances published in November 1985 by the Administrator in Appendix A of the "Chemical Emergency Preparedness Program Interim Guidance".
  - (3) Thresholds
    - (A) At the time the list referred to in paragraph (2) is published the Administrator shall -
      - (i) publish an interim final regulation establishing a threshold planning quantity for each substance on the list, taking into account the criteria described in paragraph (4), and
        (ii) initiate a rulemaking in order to publish final regulations establishing a threshold planning quantity for each substance on the list.
    - (B) The threshold planning quantities may, at the Administrator's discretion, be based on classes of chemicals or categories of facilities.
    - (C) If the Administrator fails to publish an interim final regulation establishing a threshold planning quantity for a substance within 30 days after October 17, 1986, the threshold planning quantity for the substance shall be 2 pounds until such time as the Administrator publishes regulations establishing a threshold for the substance.
  - (4) Revisions
    The Administrator may revise the list and thresholds under paragraphs (2) and (3) from time to time. Any revisions to the list shall take into account the toxicity, reactivity, volatility, dispersability, combustability, or flammability of a substance. For purposes of the preceding sentence, the term "toxicity" shall include any short- or long-term health effect which may result from a short-term exposure to the substance.

- (b) Facilities covered
  - (1) Except as provided in section 11004 of this title, a facility is subject to the requirements of this subchapter if a substance on the list referred to in subsection (a) of this section is present at the facility in an amount in excess of the threshold planning quantity established for such substance.
  - (2) For purposes of emergency planning, a Governor or a State emergency response commission may designate additional facilities which shall be subject to the requirements of this subchapter, if such designation is made after public notice and opportunity for comment. The Governor or State emergency response commission shall notify the facility concerned of any facility designation under this paragraph.

- (c) Emergency planning notification
  Not later than seven months after October 17, 1986, the owner or operator of each facility

subject to the requirements of this subchapter by reason of subsection (b)(1) of this section shall notify the State emergency response commission for the State in which such facility is located that such facility is subject to the requirements of this subchapter. Thereafter, if a substance on the list of extremely hazardous substances referred to in subsection (a) of this section first becomes present at such facility in excess of the threshold planning quantity established for such substance, or if there is a revision of such list and the facility has present a substance on the revised list in excess of the threshold planning quantity established for such substance, the owner or operator of the facility shall notify the State emergency response commission and the local emergency planning committee within 60 days after such acquisition or revision that such facility is subject to the requirements of this subchapter.

- (d) Notification of Administrator
  The State emergency response commission shall notify the Administrator of facilities subject to the requirements of this subchapter by notifying the Administrator of -
  - (1) each notification received from a facility under subsection (c) of this section, and
    (2) each facility designated by the Governor or State emergency response commission under subsection (b)(2) of this section.

US Code as of: 01/26/98

Sec. 11003. Comprehensive emergency response plans

- (a) Plan required
  Each local emergency planning committee shall complete preparation of an emergency plan in accordance with this section not later than two years after October 17, 1986. The committee shall review such plan once a year, or more frequently as changed circumstances in the community or at any facility may require.

- (b) Resources
  Each local emergency planning committee shall evaluate the need for resources necessary to develop, implement, and exercise the emergency plan, and shall make recommendations with respect to additional resources that may be required and the means for providing such additional resources.

- (c) Plan provisions
  Each emergency plan shall include (but is not limited to) each of the following:
  - (1) Identification of facilities subject to the requirements of this subchapter that are within the emergency planning district, identification of routes likely to be used for the transportation of substances on the list of extremely hazardous substances referred to in section 11002(a) of this title, and identification of additional facilities contributing or subjected to additional risk due to their proximity to facilities subject to the requirements of this subchapter, such as hospitals or natural gas facilities.
  - (2) Methods and procedures to be followed by facility owners and operators and local emergency and medical personnel to respond to any release of such substances.
  - (3) Designation of a community emergency coordinator and facility emergency coordinators, who shall make determinations necessary to implement the plan.
  - (4) Procedures providing reliable, effective, and timely notification by the facility emergency coordinators and the community emergency coordinator to persons designated in the emergency plan, and to the public, that a release has occurred (consistent with the emergency notification requirements of section 11004 of this title).
  - (5) Methods for determining the occurrence of a release, and the area or population likely to be affected by such release.
  - (6) A description of emergency equipment and facilities in the community and at each facility in the community subject to the requirements of this subchapter, and an identification of the persons responsible for such equipment and facilities.
  - (7) Evacuation plans, including provisions for a precautionary evacuation and alternative traffic routes.
  - (8) Training programs, including schedules for training of local emergency response and medical personnel.
  - (9) Methods and schedules for exercising the emergency plan.

- (d) Providing of information
  For each facility subject to the requirements of this subchapter:
  - (1) Within 30 days after establishment of a local emergency planning committee for the emergency planning district in which

such facility is located, or within 11 months after October 17, 1986, whichever is earlier, the owner or operator of the facility shall notify the emergency planning committee (or the Governor if there is no committee) of a facility representative who will participate in the emergency planning process as a facility emergency coordinator.
  - (2) The owner or operator of the facility shall promptly inform the emergency planning committee of any relevant changes occurring at such facility as such changes occur or are expected to occur.
  - (3) Upon request from the emergency planning committee, the owner or operator of the facility shall promptly provide information to such committee necessary for developing and implementing the emergency plan.

- (e) Review by State emergency response commission
  After completion of an emergency plan under subsection (a) of this section for an emergency planning district, the local emergency planning committee shall submit a copy of the plan to the State emergency response commission of each State in which such district is located. The commission shall review the plan and make recommendations to the committee on revisions of the plan that may be necessary to ensure coordination of such plan with emergency response plans of other emergency planning districts. To the maximum extent practicable, such review shall not delay implementation of such plan.

- (f) Guidance documents
  The national response team, as established pursuant to the National Contingency Plan as established under section 9605 of this title, shall publish guidance documents for preparation and implementation of emergency plans. Such documents shall be published not later than five months after October 17, 1986.

- (g) Review of plans by regional response teams
  The regional response teams, as established pursuant to the National Contingency Plan as established under section 9605 of this title, may review and comment upon an emergency plan or other issues related to preparation, implementation, or exercise of such a plan upon request of a local emergency planning committee. Such review shall not delay implementation of the plan.

US Code as of: 01/26/98

Sec. 11004. Emergency notification

- (a) Types of releases
  - (1) 11002(a) substance which requires CERCLA notice
    If a release of an extremely hazardous substance referred to in section 11002(a) of this title occurs from a facility at which a hazardous chemical is produced, used, or stored, and such release requires a notification under section 103(a) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 (42 U.S.C. 9603(a)) (hereafter in this section referred to as "CERCLA") (42 U.S.C. 9601 et seq.), the owner or operator of the facility shall immediately provide notice as described in subsection (b) of this section.
  - (2) Other 11002(a) substance
    If a release of an extremely hazardous substance referred to in section 11002(a) of this title occurs from a facility at which a hazardous chemical is produced, used, or stored, and such release is not subject to the notification requirements under section 103(a) of CERCLA (42 U.S.C. 9603(a)), the owner or operator of the facility shall immediately provide notice as described in subsection (b) of this section, but only if the release -
    - (A) is not a federally permitted release as defined in section 101(10) of CERCLA (42 U.S.C. 9601(10)),
    - (B) is in an amount in excess of a quantity which the Administrator has determined (by regulation) requires notice, and
      (C) occurs in a manner which would require notification under section 103(a) of CERCLA (42 U.S.C. 9603(a)).
      Unless and until superseded by regulations establishing a quantity for an extremely hazardous substance described in this paragraph, a quantity of 1 pound shall be deemed that quantity the release of which requires notice as described in subsection (b) of this section.
  - (3) Non-11002(a) substance which requires CERCLA notice
    If a release of a substance which is not on the list referred to in section 11002(a) of this title occurs at a facility at which a hazardous chemical is produced, used, or stored, and such release requires notification under section 103(a) of CERCLA (42 U.S.C. 9603(a)), the owner or operator shall provide notice as follows:
    - (A) If the substance is one for which a reportable quantity has been established under section 102(a) of CERCLA (42 U.S.C. 9602(a)), the owner or operator shall provide notice as described in subsection (b) of this section.
    - (B) If the substance is one for which a reportable quantity has not been established under section 102(a) of CERCLA (42 U.S.C. 9602(a)) -
      - (i) Until April 30, 1988, the owner or operator shall provide, for releases of one pound or more of the substance, the same notice to the community emergency coordinator for the local emergency planning committee, at the same time and in the same form, as notice is provided to the National Response Center under section 103(a) of CERCLA (42 U.S.C. 9603(a)).

        - (ii) On and after April 30, 1988, the owner or operator shall provide, for releases of one pound or more of the substance, the notice as described in subsection (b) of this section.
    - (4) Exempted releases
      This section does not apply to any release which results in exposure to persons solely within the site or sites on which a facility is located.

- (b) Notification
    - (1) Recipients of notice
      Notice required under subsection (a) of this section shall be given immediately after the release by the owner or operator of a facility (by such means as telephone, radio, or in person) to the community emergency coordinator for the local emergency planning committees, if established pursuant to section 11001(c) of this title, for any area likely to be affected by the release and to the State emergency planning commission of any State likely to be affected by the release. With respect to transportation of a substance subject to the requirements of this section, or storage incident to such transportation, the notice requirements of this section with respect to a release shall be satisfied by dialing 911 or, in the absence of a 911 emergency telephone number, calling the operator.
    - (2) Contents
      Notice required under subsection (a) of this section shall include each of the following (to the extent known at the time of the notice and so long as no delay in responding to the emergency results):
        - (A) The chemical name or identity of any substance involved in the release.
        - (B) An indication of whether the substance is on the list referred to in section 11002(a) of this title.
        - (C) An estimate of the quantity of any such substance that was released into the environment.
        - (D) The time and duration of the release.
        - (E) The medium or media into which the release occurred.
        - (F) Any known or anticipated acute or chronic health risks associated with the emergency and, where appropriate, advice regarding medical attention necessary for exposed individuals.
        - (G) Proper precautions to take as a result of the release, including evacuation (unless such information is readily available to the community emergency coordinator pursuant to the emergency plan).
        - (H) The name and telephone number of the person or persons to be contacted for further information.

- (c) Followup emergency notice
  As soon as practicable after a release which requires notice under subsection (a) of this section, such owner or operator shall provide a written followup emergency notice (or notices, as more information becomes available) setting forth and updating the information required under subsection (b) of this section, and including additional information with respect to -
    - (1) actions taken to respond to and contain the release,
    - (2) any known or anticipated acute or chronic health risks associated with the release, and
      (3) where appropriate, advice regarding medical attention

necessary for exposed individuals.

- (d) Transportation exemption not applicable
  The exemption provided in section 11047 of this title (relating to transportation) does not apply to this section.

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Sec. 11021. Material safety data sheets

- (a) Basic requirement
  - (1) Submission of MSDS or list
    The owner or operator of any facility which is required to prepare or have available a material safety data sheet for a hazardous chemical under the Occupational Safety and Health Act of 1970 (29 U.S.C. 651 et seq.) and regulations promulgated under that Act shall submit a material safety data sheet for each such chemical, or a list of such chemicals as described in paragraph (2), to each of the following:
    - (A) The appropriate local emergency planning committee.
    - (B) The State emergency response commission.
    - (C) The fire department with jurisdiction over the facility.
  - (2) Contents of list
    - (A) The list of chemicals referred to in paragraph (1) shall include each of the following:
      - (i) A list of the hazardous chemicals for which a material safety data sheet is required under the Occupational Safety and Health Act of 1970 (29 U.S.C. 651 et seq.) and regulations promulgated under that Act, grouped in categories of health and physical hazards as set forth under such Act and regulations promulgated under such Act, or in such other categories as the Administrator may prescribe under subparagraph (B).
      - (ii) The chemical name or the common name of each such chemical as provided on the material safety data sheet.
      - (iii) Any hazardous component of each such chemical as provided on the material safety data sheet.
    - (B) For purposes of the list under this paragraph, the Administrator may modify the categories of health and physical hazards as set forth under the Occupational Safety and Health Act of 1970 (29 U.S.C. 651 et seq.) and regulations promulgated under that Act by requiring information to be reported in terms of groups of hazardous chemicals which present similar hazards in an emergency.
  - (3) Treatment of mixtures
    An owner or operator may meet the requirements of this section with respect to a hazardous chemical which is a mixture by doing one of the following:
    - (A) Submitting a material safety data sheet for, or identifying on a list, each element or compound in the mixture which is a hazardous chemical. If more than one mixture has the same element or compound, only one material safety data sheet, or one listing, of the element or compound is necessary.
    - (B) Submitting a material safety data sheet for, or identifying on a list, the mixture itself.

- (b) Thresholds
  The Administrator may establish threshold quantities for hazardous chemicals below which no facility shall be subject to the provisions of this section. The threshold quantities may, in the Administrator's discretion, be based on classes of chemicals or categories of facilities.

- (c) Availability of MSDS on request

- (1) To local emergency planning committee
  If an owner or operator of a facility submits a list of chemicals under subsection (a)(1) of this section, the owner or operator, upon request by the local emergency planning committee, shall submit the material safety data sheet for any chemical on the list to such committee.
- (2) To public
  A local emergency planning committee, upon request by any person, shall make available a material safety data sheet to the person in accordance with section 11044 of this title. If the local emergency planning committee does not have the requested material safety data sheet, the committee shall request the sheet from the facility owner or operator and then make the sheet available to the person in accordance with section 11044 of this title.

- (d) Initial submission and updating
  - (1) The initial material safety data sheet or list required under this section with respect to a hazardous chemical shall be provided before the later of -
    - (A) 12 months after October 17, 1986, or
    - (B) 3 months after the owner or operator of a facility is required to prepare or have available a material safety data sheet for the chemical under the Occupational Safety and Health Act of 1970 (29 U.S.C. 651 et seq.) and regulations promulgated under that Act.
  - (2) Within 3 months following discovery by an owner or operator of significant new information concerning an aspect of a hazardous chemical for which a material safety data sheet was previously submitted to the local emergency planning committee under subsection (a) of this section, a revised sheet shall be provided to such person.

- (e) "Hazardous chemical" defined
  For purposes of this section, the term "hazardous chemical" has the meaning given such term by section 1910.1200(c) of title 29 of the Code of Federal Regulations, except that such term does not include the following:
  - (1) Any food, food additive, color additive, drug, or cosmetic regulated by the Food and Drug Administration.
  - (2) Any substance present as a solid in any manufactured item to the extent exposure to the substance does not occur under normal conditions of use.
  - (3) Any substance to the extent it is used for personal, family, or household purposes, or is present in the same form and concentration as a product packaged for distribution and use by the general public.
  - (4) Any substance to the extent it is used in a research laboratory or a hospital or other medical facility under the direct supervision of a technically qualified individual.
  - (5) Any substance to the extent it is used in routine agricultural operations or is a fertilizer held for sale by a retailer to the ultimate customer.

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Sec. 11022. Emergency and hazardous chemical inventory forms

- (a) Basic requirement
  - (1) The owner or operator of any facility which is required to prepare or have available a material safety data sheet for a hazardous chemical under the Occupational Safety and Health Act of 1970 (29 U.S.C. 651 et seq.) and regulations promulgated under that Act shall prepare and submit an emergency and hazardous chemical inventory form (hereafter in this chapter referred to as an "inventory form") to each of the following:
    - (A) The appropriate local emergency planning committee.
    - (B) The State emergency response commission.
    - (C) The fire department with jurisdiction over the facility.
  - (2) The inventory form containing tier I information (as described in subsection (d)(1) of this section) shall be submitted on or before March 1, 1988, and annually thereafter on March 1, and shall contain data with respect to the preceding calendar year. The preceding sentence does not apply if an owner or operator provides, by the same deadline and with respect to the same calendar year, tier II information (as described in subsection (d)(2) of this section) to the recipients described in paragraph (1).
  - (3) An owner or operator may meet the requirements of this section with respect to a hazardous chemical which is a mixture by doing one of the following:
    - (A) Providing information on the inventory form on each element or compound in the mixture which is a hazardous chemical. If more than one mixture has the same element or compound, only one listing on the inventory form for the element or compound at the facility is necessary.
    - (B) Providing information on the inventory form on the mixture itself.

- (b) Thresholds
  The Administrator may establish threshold quantities for hazardous chemicals covered by this section below which no facility shall be subject to the provisions of this section. The threshold quantities may, in the Administrator's discretion, be based on classes of chemicals or categories of facilities.

- (c) Hazardous chemicals covered
  A hazardous chemical subject to the requirements of this section is any hazardous chemical for which a material safety data sheet or a listing is required under section 11021 of this title.

- (d) Contents of form
  - (1) Tier I information
    - (A) Aggregate information by category
      An inventory form shall provide the information described in subparagraph (B) in aggregate terms for hazardous chemicals in categories of health and physical hazards as set forth under the Occupational Safety and Health Act of 1970 (29 U.S.C. 651 et seq.) and regulations promulgated under that Act.
    - (B) Required information
      The information referred to in subparagraph (A) is the following:
      - (i) An estimate (in ranges) of the maximum amount of hazardous chemicals in each category present at the facility at any time during the preceding calendar year.
      - (ii) An estimate (in ranges) of the average daily amount of hazardous chemicals in each category present at the facility

during the preceding calendar year.
- (iii) The general location of hazardous chemicals in each category.
- (C) Modifications
  For purposes of reporting information under this paragraph, the Administrator may -
  - (i) modify the categories of health and physical hazards as set forth under the Occupational Safety and Health Act of 1970 (29 U.S.C. 651 et seq.) and regulations promulgated under that Act by requiring information to be reported in terms of groups of hazardous chemicals which present similar hazards in an emergency, or
  - (ii) require reporting on individual hazardous chemicals of special concern to emergency response personnel.

- (2) Tier II information
  An inventory form shall provide the following additional information for each hazardous chemical present at the facility, but only upon request and in accordance with subsection (e) of this section:
  - (A) The chemical name or the common name of the chemical as provided on the material safety data sheet.
  - (B) An estimate (in ranges) of the maximum amount of the hazardous chemical present at the facility at any time during the preceding calendar year.
  - (C) An estimate (in ranges) of the average daily amount of the hazardous chemical present at the facility during the preceding calendar year.
  - (D) A brief description of the manner of storage of the hazardous chemical.
  - (E) The location at the facility of the hazardous chemical.
  - (F) An indication of whether the owner elects to withhold location information of a specific hazardous chemical from disclosure to the public under section 11044 of this title.

- (e) Availability of tier II information
  - (1) Availability to State commissions, local committees, and fire departments
    Upon request by a State emergency planning commission, a local emergency planning committee, or a fire department with jurisdiction over the facility, the owner or operator of a facility shall provide tier II information, as described in subsection (d) of this section, to the person making the request. Any such request shall be with respect to a specific facility.
  - (2) Availability to other State and local officials
    A State or local official acting in his or her official capacity may have access to tier II information by submitting a request to the State emergency response commission or the local emergency planning committee. Upon receipt of a request for tier II information, the State commission or local committee shall, pursuant to paragraph (1), request the facility owner or operator for the tier II information and make available such information to the official.
  - (3) Availability to public
    - (A) In general
      Any person may request a State emergency response commission

or local emergency planning committee for tier II information relating to the preceding calendar year with respect to a facility. Any such request shall be in writing and shall be with respect to a specific facility.

- (B) Automatic provision of information to public
  Any tier II information which a State emergency response commission or local emergency planning committee has in its possession shall be made available to a person making a request under this paragraph in accordance with section 11044 of this title. If the State emergency response commission or local emergency planning committee does not have the tier II information in its possession, upon a request for tier II information the State emergency response commission or local emergency planning committee shall, pursuant to paragraph (1), request the facility owner or operator for tier II information with respect to a hazardous chemical which a facility has stored in an amount in excess of 10,000 pounds present at the facility at any time during the preceding calendar year and make such information available in accordance with section 11044 of this title to the person making the request.
- (C) Discretionary provision of information to public
  In the case of tier II information which is not in the possession of a State emergency response commission or local emergency planning committee and which is with respect to a hazardous chemical which a facility has stored in an amount less than 10,000 pounds present at the facility at any time during the preceding calendar year, a request from a person must include the general need for the information. The State emergency response commission or local emergency planning committee may, pursuant to paragraph (1), request the facility owner or operator for the tier II information on behalf of the person making the request. Upon receipt of any information requested on behalf of such person, the State emergency response commission or local emergency planning committee shall make the information available in accordance with section 11044 of this title to the person.
- (D) Response in 45 days
  A State emergency response commission or local emergency planning committee shall respond to a request for tier II information under this paragraph no later than 45 days after the date of receipt of the request.

- (f) Fire department access
  Upon request to an owner or operator of a facility which files an inventory form under this section by the fire department with jurisdiction over the facility, the owner or operator of the facility shall allow the fire department to conduct an on-site inspection of the facility and shall provide to the fire department specific location information on hazardous chemicals at the facility.

- (g) Format of forms
  The Administrator shall publish a uniform format for inventory forms within three months after October 17, 1986. If the Administrator does not publish such forms, owners and operators of facilities subject to the requirements of this section shall provide the information required under this section by letter.

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Sec. 11023. Toxic chemical release forms

- (a) Basic requirement
  The owner or operator of a facility subject to the requirements of this section shall complete a toxic chemical release form as published under subsection (g) of this section for each toxic chemical listed under subsection (c) of this section that was manufactured, processed, or otherwise used in quantities exceeding the toxic chemical threshold quantity established by subsection (f) of this section during the preceding calendar year at such facility. Such form shall be submitted to the Administrator and to an official or officials of the State designated by the Governor on or before July 1, 1988, and annually thereafter on July 1 and shall contain data reflecting releases during the preceding calendar year.

- (b) Covered owners and operators of facilities
  - (1) In general
    - (A) The requirements of this section shall apply to owners and operators of facilities that have 10 or more full-time employees and that are in Standard Industrial Classification Codes 20 through 39 (as in effect on July 1, 1985) and that manufactured, processed, or otherwise used a toxic chemical listed under subsection (c) of this section in excess of the quantity of that toxic chemical established under subsection (f) of this section during the calendar year for which a release form is required under this section.
    - (B) The Administrator may add or delete Standard Industrial Classification Codes for purposes of subparagraph (A), but only to the extent necessary to provide that each Standard Industrial Code to which this section applies is relevant to the purposes of this section.
    - (C) For purposes of this section -
      - (i) The term "manufacture" means to produce, prepare, import, or compound a toxic chemical.
      - (ii) The term "process" means the preparation of a toxic chemical, after its manufacture, for distribution in commerce -
    - (I) in the same form or physical state as, or in a different form or physical state from, that in which it was received by the person so preparing such chemical, or
    - (II) as part of an article containing the toxic chemical.
  - (2) Discretionary application to additional facilities
    The Administrator, on his own motion or at the request of a Governor of a State (with regard to facilities located in that State), may apply the requirements of this section to the owners and operators of any particular facility that manufactures, processes, or otherwise uses a toxic chemical listed under subsection (c) of this section if the Administrator determines that such action is warranted on the basis of toxicity of the toxic chemical, proximity to other facilities that release the toxic chemical or to population centers, the history of releases of such chemical at such facility, or such other factors as the Administrator deems appropriate.

- (c) Toxic chemicals covered
  The toxic chemicals subject to the requirements of this section are those chemicals on the list in Committee Print Number 99-169 of the Senate Committee on Environment and Public Works,

titled "Toxic Chemicals Subject to Section 313 of the Emergency Planning and Community Right-To-Know Act of 1986" (42 U.S.C. 11023) (including any revised version of the list as may be made pursuant to subsection (d) or (e) of this section).

- (d) Revisions by Administrator
  - (1) In general
    The Administrator may by rule add or delete a chemical from the list described in subsection (c) of this section at any time.
  - (2) Additions
    A chemical may be added if the Administrator determines, in his judgment, that there is sufficient evidence to establish any one of the following:
    - (A) The chemical is known to cause or can reasonably be anticipated to cause significant adverse acute human health effects at concentration levels that are reasonably likely to exist beyond facility site boundaries as a result of continuous, or frequently recurring, releases.
    - (B) The chemical is known to cause or can reasonably be anticipated to cause in humans -
      - (i) cancer or teratogenic effects, or
      - (ii) serious or irreversible -
    - (I) reproductive dysfunctions,
    - (II) neurological disorders,
    - (III) heritable genetic mutations, or
    - (IV) other chronic health effects.
    - (C) The chemical is known to cause or can reasonably be anticipated to cause, because of -
      - (i) its toxicity,
      - (ii) its toxicity and persistence in the environment, or
      - (iii) its toxicity and tendency to bioaccumulate in the environment,
        a significant adverse effect on the environment of sufficient seriousness, in the judgment of the Administrator, to warrant reporting under this section. The number of chemicals included on the list described in subsection (c) of this section on the basis of the preceding sentence may constitute in the aggregate no more than 25 percent of the total number of chemicals on the list.
        A determination under this paragraph shall be based on generally accepted scientific principles or laboratory tests, or appropriately designed and conducted epidemiological or other population studies, available to the Administrator.
  - (3) Deletions
    A chemical may be deleted if the Administrator determines there is not sufficient evidence to establish any of the criteria described in paragraph (2).
  - (4) Effective date
    Any revision made on or after January 1 and before December 1 of any calendar year shall take effect beginning with the next calendar year. Any revision made on or after December 1 of any calendar year and before January 1 of the next calender year shall take effect beginning with the calendar year following such next calendar year.

- (e) Petitions
  - (1) In general

Any person may petition the Administrator to add or delete a chemical from the list described in subsection (c) of this section on the basis of the criteria in subparagraph (A) or (B) of subsection (d)(2) of this section. Within 180 days after receipt of a petition, the Administrator shall take one of the following actions:

- (A) Initiate a rulemaking to add or delete the chemical to the list, in accordance with subsection (d)(2) or (d)(3) of this section.
- (B) Publish an explanation of why the petition is denied.

- (2) Governor petitions
  A State Governor may petition the Administrator to add or delete a chemical from the list described in subsection (c) of this section on the basis of the criteria in subparagraph (A), such a petition from a State Governor to delete a chemical, the petition shall be treated in the same manner as a petition received under paragraph (1) to delete a chemical. In the case of such a petition from a State Governor to add a chemical, the chemical will be added to the list within 180 days after receipt of the petition, unless the Administrator -
  - (A) initiates a rulemaking to add the chemical to the list, in accordance with subsection (d)(2) of this section, or
  - (B) publishes an explanation of why the Administrator believes the petition does not meet the requirements of subsection (d)(2) of this section for adding a chemical to the list.

- (f) Threshold for reporting
  - (1) Toxic chemical threshold amount
    The threshold amounts for purposes of reporting toxic chemicals under this section are as follows:
    - (A) With respect to a toxic chemical used at a facility, 10,000 pounds of the toxic chemical per year.
    - (B) With respect to a toxic chemical manufactured or processed at a facility -
      - (i) For the toxic chemical release form required to be submitted under this section on or before July 1, 1988, 75,000 pounds of the toxic chemical per year.
      - (ii) For the form required to be submitted on or before July 1, 1989, 50,000 pounds of the toxic chemical per year.
      - (iii) For the form required to be submitted on or before July 1, 1990, and for each form thereafter, 25,000 pounds of the toxic chemical per year.
  - (2) Revisions
    The Administrator may establish a threshold amount for a toxic chemical different from the amount established by paragraph (1). Such revised threshold shall obtain reporting on a substantial majority of total releases of the chemical at all facilities subject to the requirements of this section. The amounts established under this paragraph may, at the Administrator's discretion, be based on classes of chemicals or categories of facilities.

- (g) Form
  - (1) Information required
    Not later than June 1, 1987, the Administrator shall publish a

uniform toxic chemical release form for facilities covered by this section. If the Administrator does not publish such a form, owners and operators of facilities subject to the requirements of this section shall provide the information required under this subsection by letter postmarked on or before the date on which the form is due. Such form shall -

- (A) provide for the name and location of, and principal business activities at, the facility;
- (B) include an appropriate certification, signed by a senior official with management responsibility for the person or persons completing the report, regarding the accuracy and completeness of the report; and
  (C) provide for submission of each of the following items of information for each listed toxic chemical known to be present at the facility:
  - (i) Whether the toxic chemical at the facility is manufactured, processed, or otherwise used, and the general category or categories of use of the chemical.
  - (ii) An estimate of the maximum amounts (in ranges) of the toxic chemical present at the facility at any time during the preceding calendar year.
  - (iii) For each wastestream, the waste treatment or disposal methods employed, and an estimate of the treatment efficiency typically achieved by such methods for that wastestream.
  - (iv) The annual quantity of the toxic chemical entering each environmental medium.

- (2) Use of available data
  In order to provide the information required under this section, the owner or operator of a facility may use readily available data (including monitoring data) collected pursuant to other provisions of law, or, where such data are not readily available, reasonable estimates of the amounts involved. Nothing in this section requires the monitoring or measurement of the quantities, concentration, or frequency of any toxic chemical released into the environment beyond that monitoring and measurement required under other provisions of law or regulation. In order to assure consistency, the Administrator shall require that data be expressed in common units.

- (h) Use of release form
  The release forms required under this section are intended to provide information to the Federal, State, and local governments and the public, including citizens of communities surrounding covered facilities. The release form shall be available, consistent with section 11044(a) of this title, to inform persons about releases of toxic chemicals to the environment; to assist governmental agencies, researchers, and other persons in the conduct of research and data gathering; to aid in the development of appropriate regulations, guidelines, and standards; and for other similar purposes.

- (i) Modifications in reporting frequency
  - (1) In general
    The Administrator may modify the frequency of submitting a report under this section, but the Administrator may not modify the frequency to be any more often than annually. A modification may apply, either nationally or in a specific geographic area, to the following:
    - (A) All toxic chemical release forms required under this

section.
- (B) A class of toxic chemicals or a category of facilities.
- (C) A specific toxic chemical.
- (D) A specific facility.

- (2) Requirements
  A modification may be made under paragraph (1) only if the Administrator -
  - (A) makes a finding that the modification is consistent with the provisions of subsection (h) of this section, based on -

- (i) experience from previously submitted toxic chemical release forms, and
  (ii) determinations made under paragraph (3), and
  (B) the finding is made by a rulemaking in accordance with section 553 of title 5.
  - (3) Determinations
    The Administrator shall make the following determinations with respect to a proposed modification before making a modification under paragraph (1):
    - (A) The extent to which information relating to the proposed modification provided on the toxic chemical release forms has been used by the Administrator or other agencies of the Federal Government, States, local governments, health professionals, and the public.
    - (B) The extent to which the information is (i) readily available to potential users from other sources, such as State reporting programs, and (ii) provided to the Administrator under another Federal law or through a State program.
    - (C) The extent to which the modification would impose additional and unreasonable burdens on facilities subject to the reporting requirements under this section.
  - (4) 5-year review
    Any modification made under this subsection shall be reviewed at least once every 5 years. Such review shall examine the modification and ensure that the requirements of paragraphs (2) and (3) still justify continuation of the modification. Any change to a modification reviewed under this paragraph shall be made in accordance with this subsection.
  - (5) Notification to Congress
    The Administrator shall notify Congress of an intention to initiate a rulemaking for a modification under this subsection. After such notification, the Administrator shall delay initiation of the rulemaking for at least 12 months, but no more than 24 months, after the date of such notification.
  - (6) Judicial review
    In any judicial review of a rulemaking which establishes a modification under this subsection, a court may hold unlawful and set aside agency action, findings, and conclusions found to be unsupported by substantial evidence.
  - (7) Applicability
    A modification under this subsection may apply to a calendar year or other reporting period beginning no earlier than January 1, 1993.
  - (8) Effective date
    Any modification made on or after January 1 and before December 1 of any calendar year shall take effect beginning with the next

calendar year. Any modification made on or after December 1 of any calendar year and before January 1 of the next calendar year shall take effect beginning with the calendar year following such next calendar year.

- (j) EPA management of data
  The Administrator shall establish and maintain in a computer data base a national toxic chemical inventory based on data submitted to the Administrator under this section. The Administrator shall make these data accessible by computer telecommunication and other means to any person on a cost reimbursable basis.
- (k) Report
  Not later than June 30, 1991, the Comptroller General, in consultation with the Administrator and appropriate officials in the States, shall submit to the Congress a report including each of the following:

- (1) A description of the steps taken by the Administrator and the States to implement the requirements of this section, including steps taken to make information collected under this section available to and accessible by the public.
- (2) A description of the extent to which the information collected under this section has been used by the Environmental Protection Agency, other Federal agencies, the States, and the public, and the purposes for which the information has been used.
- (3) An identification and evaluation of options for modifications to the requirements of this section for the purpose of making information collected under this section more useful.
  - (l) Mass balance study
- (1) In general
  The Administrator shall arrange for a mass balance study to be carried out by the National Academy of Sciences using mass balance information collected by the Administrator under paragraph (3). The Administrator shall submit to Congress a report on such study no later than 5 years after October 17, 1986.
- (2) Purposes
  The purposes of the study are as follows:
  - (A) To assess the value of mass balance analysis in determining the accuracy of information on toxic chemical releases.
  - (B) To assess the value of obtaining mass balance information, or portions thereof, to determine the waste reduction efficiency of different facilities, or categories of facilities, including the effectiveness of toxic chemical regulations promulgated under laws other than this chapter.
  - (C) To assess the utility of such information for evaluating toxic chemical management practices at facilities, or categories of facilities, covered by this section.
  - (D) To determine the implications of mass balance information collection on a national scale similar to the mass balance information collection carried out by the Administrator under paragraph (3), including implications of the use of such collection as part of a national annual quantity toxic chemical release program.
- (3) Information collection
  - (A) The Administrator shall acquire available mass balance information from States which currently conduct (or during the 5 years after October 17, 1986 initiate) a mass balance-oriented annual quantity toxic chemical release program. If information from such States provides an inadequate representation of

1101 Prospect Avenue
Westbury, NY 11590

METCO
a division of
PERKIN ELMER

Emergency Telephone Number
(516) 334-1300

MATERIAL SAFETY DATA SHEET

Product Name: METCO 610NS, 605NS, 604NS MSDS# 50-190

SECTION I

Trade Name: ALUMINUM BRONZE POLYESTER COMPOSITE POWDER

Date of Issue: September 7, 1987
Revision Date: January 18, 1988

SECTION II — COMPOSITION AND TOXICITY DATA

Composition	CAS#	OSHA PEL	ACGIH TLV	OTHER LIMITS RECOMMENDED
Copper (Fume)	7440-50-8	0.1 mg/m^3	0.2 mg/m^3	
(Dust and Mist)		1 mg/m^3	1 mg/m^3	
Aluminum (Metal & Oxide)	7429-90-5	N/A	10 mg/m^3	
Poly-P-Oxybenzate Polymer		N/A	N/A	
Organic Binder		10 mg/m^3	10 mg/m^3	

* * * ATTENTION * * *

THIS DATA SHEET IS IN THE PROCESS OF BEING REVISED TO MEET CURRENT REGULATIONS.

SECTION III — PHYSICAL DATA

Boiling Point:	N/A	Specific Gravity (H_2O=1):	N/A
Vapor Pressure (mmHg):	N/A	Melting Point:	1100-2000
Solubility in Water:	Neg.	Evaporation Rate:	N/A
Appearance and Odor:	Powder; no odor.	Vapor Density (AIR = 1):	N/A

SECTION IV — FIRE AND EXPLOSION HAZARD DATA

Flash Point (Method Used):	Flammable Limits	LEL	UEL
None	N/A	N/A	N/A

Extinguishing Media: Dry sand.

Special Fire Fighting Procedures: N/A

Unusual Fire and Explosion Hazards: Will react violently with C_2H_2, NH_4NO_3, Bromates, Chlorates, Iodates, Cl_2, ClF_3, (Cl_2+OF_2), Ethylene Oxide, F_2, H_2 Hydrazine Mononitrate.

SECTION V			REACTIVITY DATA	50-190
Stability	Unstable		Chlorinated hydrocarbon vapors present near plasma flame may be decomposed to phosgene. An adequate exhaust system is required to avoid the effect of dust, fumes and mist which may be generated by thermal spraying. Do not permit spray dust to enter eyes, mouth, cuts, scratches or open wounds.	
	Stable	X		

Incompatibility (Materials to Avoid): N/A

Hazardous Decomposition Products: Ozone and nitric oxide are formed by plasma flame (independent of powder; similar to welding fumes).

Hazardous Polymerization	May Occur	X	Avoid exceeding the TLV Limit of 30 mg/m^3 and .2 mg/m^3 for nitric oxide and ozone respectively.
	Will Not Occur		

SECTION VI HEALTH HAZARD DATA

Summary of Risks:

COPPER: As a sublimed oxide, copper may cause a form of metal fume fever. Irritates mucous membranes, pharynx; nasal perforation; eye irritant; metal taste; dermatitis.

ALUMINUM: There has been some record of lung damage due to the inhalation of finely divided aluminum oxide particles. However, this effect (known as Shavers disease) is complicated by the presence in the inhaled air of silica and oxides of iron; a nuisance particulate. Aluminum alone is not generally regarded as an industrial poison. Inhalation of finely divided aluminum powder has been reported as a cause of preliminary fibrosis. May be implicated by Alzheimers disease.

POLY-P-OXYBENZATE

POLYMER: Not available.

ORGANIC BINDER: Not available.

Medical Conditions Which May be Aggravated by Contact: N/A

Primary Entry Route(s): Respiratory System, Skin, Liver, increased risk with Wilson's disease, Kidneys.

Signs and Symptoms of Overexposure:

Eye Contact: Possible irritation.

Skin Contact: Possible dermatitis.

Inhalation: Respiratory irritation. As a sublimed oxide, copper may cause a form of metal fume fever.

Ingestion: N/A

First Aid:

Eye Contact: Flood eye with water. If irritation persists, consult a physician.

Skin Contact: If skin irritation occurs, wash with soap and water to remove powder.

Inhalation: Expose to fresh air.

Ingestion: Consult a physician.

SECTION VII SPILL, LEAK AND DISPOSAL PROCEDURES

Spill/Leak Procedures: Material that is spilled onto the floor may become airborne by normal plant activity. Good housekeeping, by sweeping the area clean, is necessary to remove these materials from becoming a source of air contamination.

Waste Management/Disposal: Consult local and federal regulations.

Personal Protective Equipment:

Goggles: The following lens shades are recommended for the process indicated. Combustion spraying shade #5, plasma spraying up to 40 kW shade #9, 40 to 60 kW shade #10 and greater than 60 kW shade #11.

Gloves: Aluminized gloves are to be worn during plasma spray process.

Respirator: A respirator approved by NIOSH for dust/fumes/mists should be worn at all times during the thermal spray process to protect operator from dust and fumes.

Other Protective Clothing or Equipment: Ear protection must be worn when the operator is subjected to excessive noise levels. (See OSHA Requirements). Aluminized apron is to be worn during plasma spray process.

Workplace Considerations:

Ventilation: Ventilation equipment designed to create an air velocity of 200 FPM.

Safety Stations: Eye Wash Station is recommended.

Other: N/A

SECTION IX HANDLING AND STORAGE PRECAUTIONS

Precautions to be Taken in Handling and Storage: Avoid excessive skin contact and oral ingestion.

Other Precautions: N/A

The information contained herein is based on available data and tests and is believed to be accurate. It is presented solely for your consideration and verification since conditions of use, storage and handling may vary.

FORM IC

Retail Trade . . . . . page 66
Finance, Insurance and Real Estate . . . . . page 67
Services. . . . . page 67-68
Public Administration . . . . . page 68-69
Nonclassifiable Establishments . . . . . page 69

Section V: Certification
Do not complete Section V until all forms required for submission are present, complete, and accurate. After all required forms have been completed, enter your full name and title, and the date. Read the certification statement, and sign the form.

Section VI: Generator Status
Enter the site's EPA ID number. Complete Box A and follow the instructions to complete Box B or skip to Section VII.

Box A: 1993 RCRA Generator Status
Check one box to indicate the site's RCRA hazardous waste generation status in 1993. Review the definitions of LQG, SQG, and CESQG on the next page to determine your generator status, then check the appropriate box. If your site did not generate RCRA hazardous waste during 1993, check "4-Non generator" and proceed to Box B.

A site that generates solid waste must determine if that waste is a RCRA hazardous waste, or if it is excluded from regulation under 6 NYCRR Part 371.1. RCRA hazardous waste managed in units that are exempt from RCRA permitting requirements are not to be counted in determining if a site is a large quantity generator. However, RCRA hazardous waste treated in exempt units are to be reported. If a waste is excluded its quantity should not be counted in determining RCRA generator status. Excluded wastes are listed on page 70.

Code	1993 RCRA generator status

1 LQG: Large Quantity Generator
This is a Large Quantity Generator if, in 1993, it met **any** of the following criteria:

a) The site generated in one or more months during 1993, 1,000 kg (2,200 lbs) or more of RCRA non-acute or New York State hazardous waste; **or**

b) The site generated in one or more months during 1993, or accumulated at any time, 1 kg(2.2lbs) or more of RCRA acute hazardous waste; **or**

c) The site generated or accumulated at any time more than 100 kg (220 lbs) of spill cleanup material contaminated with RCRA acute hazardous waste.

2 SQG: Small Quantity Generator
This site is a Small Quantity Generator if, in 1993, it met **all** the following criteria:

a) In one or more months the site generated more than 100 kg (220 lbs) of hazardous waste, **but in no month did the site:** (1) generate a 1,000 kg (2,200 lbs) or more of RCRA non-acute or New York State hazardous waste; or (2) more than 1 kg (2.2 lbs) or more of RCRA acute hazardous waste; or (3) generate 100 kg (220 lbs) or more of material from the cleanup of a spillage of RCRA acute hazardous waste; **and**

Hazardous Waste No. 3	Hazardous Waste No. 4	Hazardous Waste No. 5
NA	NA	NA
01	01	01
02	02	02
03	03	03
04	04	04
05	05	05
06	06	06
07	07	07
08	08	08
09 *(Skip to Q.45)*	09 *(Skip to Q.45)*	09 *(Skip to Q.45)*
10	10	10
(specify)	*(specify)*	*(specify)*
01	01	01
02	02	02
03	03	03

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0373
RUN DATE: 08/05/91

C 282200 1828 00034 W I
LOCATION FAC EP

T O X I C I T Y A N A L Y S I S

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/02/90
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/90
		PRIOR CO EXPIRATION DATE 11/15/91

EMISSION POINT 00034						
(41)UTM-E: 622.2 KM.	(42)STACK HEIGHT: 30 FT.	(43)EXIT VELOCITY: 50.00 FT/SEC	RATIO STK HT / BLDG HT: 2.00
(46)UTM-N: 513.4 KM.	(47)HT ABV STRUC: 15 FT.	(48)EXIT FLOW: 1975.00 ACFM	PLUME RISE: NA FT.
(51)GRND ELEV: 139 FT.	(52)STK DIAM: 11 IN.	(53)EXIT TEMP: 72 DEGR F	EFFECTIVE STACK HEIGHT: 30.00 FT.

N O T E - S O U R C E C O D E I N D I C A T E S C A S E S P E C I F I C E X A M I N A T I O N N E C E S S A R Y

AIR CONTAMINANTS	CAS NUMBER	EMISSIONS ACTUAL	UNIT	PERMISSIBLE	% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR	AAL DATA (UG/M3) AAL	TOXIC LVL	SOURCE	MAX CALC AMB LEVEL	REMARKS
TUNGSTEN W	(085) 07440-33-7	(087) .001	(088) 15	(090) .001	(091)	(092) .001					
MOLYBDENUM (8CI9CI)	(096) 07439-98-7	(098) .001	(099) 01	(101) .001	(102) 90.0	(103) .001					
ALUMINUM	(107) 07429-90-5	(109) .001	(110) 01	(112) .001	(113) 90.0	(114) .001					
ALUMINUM OXIDE	(118) 01344-28-1	(120) .001	(121) 01	(123) .001	(124) 90.0	(125) .001					
TITANIUM OXIDE	(129) 13463-67-7	(131) .001	(132) 01	(134) .001	(135) 90.0	(136) .001					
NICKEL AS METAL	(140) 07440-02-0	(142) .001	(143) 01	(145) .001	(146) 90.0	(147) .001	.0042	HIGH		.00271	SEE NOTE ABV

E N D O F T O X I C I T Y A N A L Y S I S

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0372
RUN DATE: 08/05/91

C 282200 1828 00034 W I
LOCATION FAC EP

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/02/90
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/90
		PRIOR CO EXPIRATION DATE 11/15/91

PAGE 2
CONTINUED FROM PREVIOUS PAGE

(15)PRIOR COMMENTS (16)BY 816CAP (17)DATE 10/02/84
1. 2:20PM SATIS OPER
2.
3.
4.
5.

(18)CURRENT COMMENTS (19)BY 428 VSI (20)DATE 10/04/91
1. 2:00 PM SATIS OPER.
2.
3.
4.
5.

(27)LAST INSPECTION DATE 10/04/91
(21)INSPECTION STATUS 5
(22)DATE OF NEXT ACTION / /
(23)ISSUE DATE 11/16/91
(24)EXPIRATION DATE 11/15/92
(25)CO FEE $50

FIRM REP'S SIGNATURE: P. [signature] DATE: 10/4/91
ISSUING OFFICER'S SIGNATURE: Bruce B. Smith, P.E. [signature] DATE:

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0371
RUN DATE: 08/05/91

C 282200 1828 00034 W I
LOCATION FAC EP

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/02/90
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/90
		PRIOR CO EXPIRATION DATE 11/15/91

FACILITY EMIS-CLASS / PGM-CODE: A2 POINT EMIS-CLASS / PGM-CODE:

EMISSION POINT 00034
(41)UTM-E: 622.2 KM. (42)STACK HEIGHT: 30 FT. (43)EXIT VELOCITY: 50.00 FT/SEC (44)SIC: 3569 (45)AGENCY-CODE-1: C (COUNTY)
(46)UTM-N: 513.4 KM. (47)HT ABV STRUC: 15 FT. (48)EXIT FLOW: 1975.00 ACFM (49)CO FEE: $50.00 (50)AGENCY-CODE-2: C (COUNTY)
(51)GRND ELEV: 139 FT. (52)STK DIAM: 11 IN. (53)EXIT TEMP: 72 DEGR F (54)CO CONDITIONS:

UNIT I
(55)HOURS/DAY: 1.0 (56)DAYS/YEAR: 200 (57)% OP BY SEASON: 25 25 25 25 (58)SOURCE CODE: 1303 SPRAYING (OTHER THAN
(59)BLDG: 1101 (60)FLOOR NAME: (61)RULE 1: 212.00 (62)RULE 2:

PROCESS/UNIT DESCRIPTION (72)DESCRIPTION 1. SPRAYING OF METAL WIRES OR POWDERS FOR TESTING
2. PURPOSES OF EQUIPMENT AND/OR WIRES OR POWDERS

CONTROL EQUIPMENT (73)TYPE: 012 IMPINGEMENT PLATE (74)MFG: UNITED SWIRL ORIFICE SCRUBBERS STM 25 (75)ID: 01 (76)DATE INSTALLED: 01/65
(77)DISPOSAL METHOD: 09 OTHER (78)USEFUL LIFE: 20 YEARS

AIR CONTAMINANTS	CAS NUMBER	ENV RATING	EMISSIONS ACTUAL		UNIT	HOW DET	PERMISSIBLE		% CONTROL EFFICIENCY		HRLY ACTUAL LBS/HOUR		ANNUAL EMISSIONS (LBS/YEAR) ACTUAL		10×	PERMISSIBLE	
TUNGSTEN W	(085) 07440-33-7	(086) C	(087)	.001	(088) 15	(089) 06	(090)	.001	(091)		(092)	.001	(093)	.200	(094) 0	(095)	.200
MOLYBDENUM (8CI9CI)	(096) 07439-98-7	(097) C	(098)	.001	(099) 01	(100) 06	(101)	.001	(102)	90.0	(103)	.001	(104)	.200	(105) 0	(106)	.200
ALUMINUM	(107) 07429-90-5	(108) C	(109)	.001	(110) 01	(111) 06	(112)	.001	(113)	90.0	(114)	.001	(115)	.200	(116) 0	(117)	.200
ALUMINUM OXIDE	(118) 01344-28-1	(119) C	(120)	.001	(121) 01	(122) 06	(123)	.001	(124)	90.0	(125)	.001	(126)	.200	(127) 0	(128)	.200
TITANIUM OXIDE	(129) 13463-67-7	(130) C	(131)	.001	(132) 01	(133) 06	(134)	.001	(135)	90.0	(136)	.001	(137)	.200	(138) 0	(139)	.200
NICKEL AS METAL	(140) 07440-02-0	(141) C	(142)	.001	(143) 01	(144) 06	(145)	.001	(146)	90.0	(147)	.001	(148)	.200	(149) 0	(150)	.200

NOTE - SHOULD NEW EVIDENCE REQUIRE LOWER AMBIENT LEVELS BE MET FOR THE ABOVE UNDERSCORED CAS NUMBER(S),

THE SOURCE OWNER MAY BE REQUIRED TO REDUCE EMISSIONS.

SPECIAL CONDITIONS (151)CONDITION 1. AG1 COMPLIANCE

CONTINUED ON NEXT PAGE

FORM IC

Section VI (Continued)

b) The site generated or stored in one or more months during 1992, or accumulated at any time, 1 kg(2.2lbs) or more of RCRA acute hazardous waste; **or**

c) The site generated or accumulated at any time more than 100 kg (220 lbs) of spill cleanup material contaminated with RCRA acute hazardous waste.

2. SQG: Small Quantity Generator

This site is a Small Quantity Generator if, in 1992, it met **all** the following criteria:

a) In one or more months the site did not generate more than 1,000 kg (2,200 lbs) of non-acute hazardous waste, or more than 1 kg (2.2 lbs) or more of acute hazardous waste; or (3) generate 100 kg (220 lbs) or more of material from the cleanup of a spillage of acute hazardous waste; **and**

b) The site did not store more than more than 1,000 kg (2,200 lbs) of non-acute hazardous waste or more than 1 kg (2.2 lbs) of acute hazardous waste **and** no more than 100 kg (220 lbs) of material from the cleanup of a spillage of acute hazardous waste.

3. CESQG: Conditionally Exempt Small Quantity Generator

This site's hazardous waste activities met the definition of a RCRA CESQG every month during 1992. A RCRA CESQG is defined by the following criteria:

a) The site generated no more than 100 kg (220 lbs) of hazardous waste, **and** no more than 1 kg (2.2 lbs) of acute hazardous waste, **and** no more than 100 kg (220 lbs) of material from the cleanup of a spillage of acute hazardous waste; **and**

b) The site did not storeo more than 100 kg (220 lbs) of non-acute hazardous waste, **and** no more than 1 kg (2.2 lbs) of acute hazardous waste, **and** no more than 100 kg (220 lbs) of material from the cleanup of a spillage of acute hazardous waste.

4. Non-generator

This site did not generate RCRA hazardous waste during 1992.

Continue to Box B, if you checked 4.
Skip to Section VII, if you checked 1, 2, or 3.

Box B: Reason for not generating

If the site did not generate RCRA hazardous waste during 1992, check as many boxes as necessary to explain the reason. The alternatives are:

Code	Reason for not generating
1	Never generated: The site has never generated RCRA hazardous waste and did not do so during 1992.

SULZER METCO

Sulzer Metco (US) Inc.
1101 Prospect Avenue
PO Box 1006
Westbury, NY 11590-0201
Phone: (516) 334-1300
Fax: (516) 338-2488

July 28, 1997

Mr. Sitansu Ghosh
New York Emergency Response Commission
New York State Department of Environmental
Conservation
Bureau of Spill Prevention and Response
50 Wolf Road / Room 340
Albany, NY 12233-3510

Subject: 1996 Toxic Chemical Release Inventory Reporting, Form R

Dear Sir / Madam:

Enclosed please find one (1) microcomputer diskette containing the toxic chemical release reporting information for:

Sulzer Metco (US), Inc.
220 Miller Place
Hicksville, NY 11801
TRI Fac. I.D. # 11801PRKNL220MI

Sulzer Metco (US), Inc.
1101 Prospect Avenue
Westbury, NY 11590
TRI Fac. I.D. # 11590PRKNL1101P

This information is submitted as required under section 313, Title III of the Superfund Amendments and Reauthorization Act of 1986, and the Pollution Prevention Act of 1990.

Sulzer Metco is submitting a total of ten (10) reports from our facilities. The breakdown of each facility is as follows:

Sulzer Metco (US), Inc.
220 Miller Place
Hicksville, NY 11801
TRI Fac. I.D. # 11801PRKNL220MI

Chemical Name	Report Year	CAS#	Report Status
Nickel Compounds	1996	N495	9 Page Form R
Chromium Compounds	1996	N090	9 Page Form R
Aluminum (Fume or Dust)	1996	007429905	9 Page Form R
Copper Compounds	1996	N100	2 Page Form A
Cobalt Compounds	1996	N096	2 Page Form A

Sulzer Metco, (US) Inc.
1101 Prospect Ave.
Westbury, NY 11590-0020
TRI Fac. I.D. # 11590PRKNL1101P

Chemical Name	Report Year	CAS#	Report Status
Nickel Compounds	1996	N495	2 Page Form A
Chromium Compounds	1996	N090	2 Page Form A
Aluminum (Fume or Dust)	1996	007429905	2 Page Form A
Copper Compounds	1996	N100	2 Page Form A
Cobalt Compounds	1996	N096	2 Page Form A

Our technical point of contact is Michael S. Lydon, phone number (516) 338-2337, and is available should any questions or problems arise in your processing of these diskettes.

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using date available to the preparers of this report.

Thank you.

Laurence F. Miles
Manager Facilities
Phone #: (516) 338-2374
FAX #: (516) 338-2336

FILE:0728971.DOC

SULZER METCO

Sulzer Metco (US) Inc.
1101 Prospect Avenue
PO Box 1006
Westbury, NY 11590-0201
Phone: (516) 334-1300
Fax: (516) 338-2488

July 28, 1997

EPCRA Reporting Center
P.O. Box 3348
Merrifield, VA 22116-3342
ATTN: Toxic Chemical Release Inventory
Magnetic Media Submission

Subject: 1996 Toxic Chemical Release Inventory Reporting, Form R

Dear Sir / Madam:

Enclosed please find one (1) microcomputer diskette containing the toxic chemical release reporting information for:

Sulzer Metco (US), Inc.
220 Miller Place
Hicksville, NY 11801
TRI Fac. I.D. # 11801PRKNL220MI

Sulzer Metco (US), Inc.
1101 Prospect Avenue
Westbury, NY 11590
TRI Fac. I.D. # 11590PRKNL1101P

This information is submitted as required under section 313, Title III of the Superfund Amendments and Reauthorization Act of 1986, and the Pollution Prevention Act of 1990.

Sulzer Metco is submitting a total of ten (10) reports from our facilities. The breakdown of each facility is as follows:

Sulzer Metco (US), Inc.
220 Miller Place
Hicksville, NY 11801
TRI Fac. I.D. # 11801PRKNL220MI

Chemical Name	Report Year	CAS#	Report Status
Nickel Compounds	1996	N495	9 Page Form R
Chromium Compounds	1996	N090	9 Page Form R
Aluminum (Fume or Dust)	1996	007429905	9 Page Form R
Copper Compounds	1996	N100	2 Page Form A
Cobalt Compounds	1996	N096	2 Page Form A

Sulzer Metco, (US) Inc.
1101 Prospect Ave.
Westbury, NY 11590-0020
TRI Fac. I.D. # 11590PRKNL1101P

Chemical Name	Report Year	CAS#	Report Status
Nickel Compounds	1996	N495	2 Page Form A
Chromium Compounds	1996	N090	2 Page Form A
Aluminum (Fume or Dust)	1996	007429905	2 Page Form A
Copper Compounds	1996	N100	2 Page Form A
Cobalt Compounds	1996	N096	2 Page Form A

Our technical point of contact is Michael S. Lydon, phone number (516) 338-2337, and is available should any questions or problems arise in your processing of these diskettes.

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using date available to the preparers of this report.

Thank you.

Laurence F. Miles
Manager Facilities
Phone #: (516) 338-2374
FAX #: (516) 338-2336

FILE:0725971.DOC

EPA United States Environmental Protection Agency

TOXIC CHEMICAL RELEASE INVENTORY FORM A

WHERE TO SEND COMPLETED FORMS:
1. EPCRA Reporting Center, P.O. Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision [ ]

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR: 1996

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes. (Answer question 2.2; Attach substantiation forms) [X] No: Do not answer 2.2; continue with Section 3.

2.2 If yes in 2.1, is this copy: [ ] Sanitized [ ] Unsanitized

SECTION 3. CERTIFICATION (Important: Please read and sign after completing the statement.)

I hereby certify that to the best of my knowledge and belief, for the toxic chemical listed in this statement, the annual reportable amount, as defined in 40 CFR 372.27(a), did not exceed 500 pounds for this reporting year and that the chemical was manufactured, processed, or otherwise used in an amount not exceeding 1 million pounds during this reporting year.

Name and official title of owner/operator or senior management official: LAURENCE F. MILES, MANAGER, FACILITIES

Signature: [signature] Date Signed: 07-15-97

SECTION 4. FACILITY IDENTIFICATION

4.1
- Facility or Establishment Name: SULZER METCO, (US) INC.
- TRI Facility ID Number: 11590PRKNL1101P
- Street Address: 1101 PROSPECT AVENUE
- City: WESTBURY
- County: USA
- State: NY
- Zip Code: 11590-0020
- Mailing Address (if different from street address):
- City:
- State:
- Zip Code:

PUT LABEL HERE

4.2 **This report contains information for:**
(Important: check c if applicable; a and b have been intentionally left blank)
c. [ ] A Federal facility

4.3 **Technical Contact**
- Name: MICHAEL S. LYDON
- Telephone Number (include area code): (516)338-2337

EPA United States Environmental Protection Agency

TOXIC CHEMICAL RELEASE INVENTORY FORM A

SECTION 4. FACILITY IDENTIFICATION (CONTINUED)

4.4	Intentionally left blank						
4.5	SIC Code (4-digit)	a. 3542	b. NA	c.	d.	e.	f.

4.6	Latitude and Longitude	Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		040	45	50	073	33	10

4.7	Dun and Bradstreet Number(s) (9 digits)	a. 874290349
		b.
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. NYD131318651
		b.
4.9	Facility NPDES Permit Number(s) (9 characters)	a. NA
		b.
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. NA
		b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	
	☐ NA	SULZER INC.
5.2	Parent Company's Dun & Bradstreet Number	
	☐ NA	001826957

PART II. CHEMICAL IDENTIFICATION

SECTION 1. TOXIC CHEMICAL IDENTITY

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	N090
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	CHROMIUM COMPOUNDS
1.3	Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes". Generic Name must be structurally descriptive).
	NA

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

EPA United States Environmental Protection Agency

TOXIC CHEMICAL RELEASE INVENTORY FORM A

WHERE TO SEND COMPLETED FORMS:
1. EPCRA Reporting Center, P.O. Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision [ ]

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR: 1996

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes. (Answer question 2.2; Attach substantiation forms) [X] No: Do not answer 2.2; continue with Section 3.

2.2 If yes in 2.1, is this copy: [ ] Sanitized [ ] Unsanitized

SECTION 3. CERTIFICATION (Important: Please read and sign after completing the statement.)

I hereby certify that to the best of my knowledge and belief, for the toxic chemical listed in this statement, the annual reportable amount, as defined in 40 CFR 372.27(a), did not exceed 500 pounds for this reporting year and that the chemical was manufactured, processed, or otherwise used in an amount not exceeding 1 million pounds during this reporting year.

Name and official title of owner/operator or senior management official: LAURENCE F. MILES, MANAGER, FACILITIES

Signature: [signature] Date Signed: 07-15-97

SECTION 4. FACILITY IDENTIFICATION

4.1
- Facility or Establishment Name: SULZER METCO, (US) INC.
- TRI Facility ID Number: 11590PRKNL1101P
- Street Address: 1101 PROSPECT AVENUE
- City: WESTBURY
- County: USA
- State: NY
- Zip Code: 11590-0020
- Mailing Address (if different from street address):
- City:
- State:
- Zip Code:

PUT LABEL HERE

4.2 **This report contains information for:**
(Important: check c if applicable; a and b have been intentionally left blank)
c. [ ] A Federal facility

4.3 **Technical Contact**
- Name: MICHAEL S. LYDON
- Telephone Number (include area code): (516)338-2337

EPA United States Environmental Protection Agency

TOXIC CHEMICAL RELEASE INVENTORY FORM A

SECTION 4. FACILITY IDENTIFICATION (CONTINUED)

4.4	Intentionally left blank						
4.5	SIC Code (4-digit)	a. 3542	b. NA	c.	d.	e.	f.

4.6	Latitude and Longitude	Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		040	45	50	073	33	10

4.7	Dun and Bradstreet Number(s) (9 digits)	a. 874290349
		b.
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. NYD131318651
		b.
4.9	Facility NPDES Permit Number(s) (9 characters)	a. NA
		b.
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. NA
		b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	
	☐ NA	SULZER INC.
5.2	Parent Company's Dun & Bradstreet Number	
	☐ NA	001826957

PART II. CHEMICAL IDENTIFICATION

SECTION 1. TOXIC CHEMICAL IDENTITY

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	N495
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	NICKEL COMPOUNDS
1.3	Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes". Generic Name must be structurally descriptive).
	NA

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

EPA United States Environmental Protection Agency

TOXIC CHEMICAL RELEASE INVENTORY FORM A

WHERE TO SEND COMPLETED FORMS:
1. EPCRA Reporting Center, P.O. Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR: 1996

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes. (Answer question 2.2; Attach substantiation forms)
[X] No: Do not answer 2.2; continue with Section 3.

2.2 If yes in 2.1, is this copy: [ ] Sanitized [ ] Unsanitized

SECTION 3. CERTIFICATION (Important: Please read and sign after completing the statement.)

I hereby certify that to the best of my knowledge and belief, for the toxic chemical listed in this statement, the annual reportable amount, as defined in 40 CFR 372.27(a), did not exceed 500 pounds for this reporting year and that the chemical was manufactured, processed, or otherwise used in an amount not exceeding 1 million pounds during this reporting year.

Name and official title of owner/operator or senior management official: LAURENCE F. MILES, MANAGER, FACILITIES

Signature: [signature] Date Signed: 07-15-97

SECTION 4. FACILITY IDENTIFICATION

4.1
- Facility or Establishment Name: SULZER METCO, (US) INC.
- TRI Facility ID Number: 11590PRKNL1101P
- Street Address: 1101 PROSPECT AVENUE
- City: WESTBURY
- County: USA
- State: NY
- Zip Code: 11590-0020
- Mailing Address (if different from street address):
- City:
- State:
- Zip Code:

PUT LABEL HERE

4.2 **This report contains information for:**
(Important: check c if applicable; a and b have been intentionally left blank)
c. [ ] A Federal facility

4.3 **Technical Contact**
- Name: MICHAEL S. LYDON
- Telephone Number (include area code): (516)338-2337

EPA United States Environmental Protection Agency

TOXIC CHEMICAL RELEASE INVENTORY FORM A

SECTION 4. FACILITY IDENTIFICATION (CONTINUED)

4.4	Intentionally left blank						
4.5	SIC Code (4-digit)	a. 3542	b. NA	c.	d.	e.	f.

		Latitude			Longitude		
4.6	Latitude and Longitude	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		040	45	50	073	33	10

4.7	Dun and Bradstreet Number(s) (9 digits)	a. 874290349
		b.
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. NYD131318651
		b.
4.9	Facility NPDES Permit Number(s) (9 characters)	a. NA
		b.
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. NA
		b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	
	☐ NA	SULZER INC.
5.2	Parent Company's Dun & Bradstreet Number	
	☐ NA	001826957

PART II. CHEMICAL IDENTIFICATION

SECTION 1. TOXIC CHEMICAL IDENTITY

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	007429905
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	ALUMINUM (FUME OR DUST)
1.3	Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes". Generic Name must be structurally descriptive).
	NA

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

EPA United States Environmental Protection Agency

TOXIC CHEMICAL RELEASE INVENTORY FORM A

WHERE TO SEND COMPLETED FORMS:
1. EPCRA Reporting Center, P.O. Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR: 1996

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes. (Answer question 2.2; Attach substantiation forms) [X] No: Do not answer 2.2; continue with Section 3.

2.2 If yes in 2.1, is this copy: [ ] Sanitized [ ] Unsanitized

SECTION 3. CERTIFICATION (Important: Please read and sign after completing the statement.)

I hereby certify that to the best of my knowledge and belief, for the toxic chemical listed in this statement, the annual reportable amount, as defined in 40 CFR 372.27(a), did not exceed 500 pounds for this reporting year and that the chemical was manufactured, processed, or otherwise used in an amount not exceeding 1 million pounds during this reporting year.

Name and official title of owner/operator or senior management official: LAURENCE F. MILES, MANAGER, FACILITIES

Signature: [signature] Date Signed: 07-15-97

SECTION 4. FACILITY IDENTIFICATION

4.1
- Facility or Establishment Name: SULZER METCO, (US) INC.
- TRI Facility ID Number: 11590PRKNL1101P
- Street Address: 1101 PROSPECT AVENUE
- City: WESTBURY
- County: USA
- State: NY
- Zip Code: 11590-0020
- Mailing Address (if different from street address):
- City:
- State:
- Zip Code:

PUT LABEL HERE

4.2 **This report contains information for:**
(Important: check c if applicable; a and b have been intentionally left blank)
c. [ ] A Federal facility

4.3 **Technical Contact**
- Name: MICHAEL S. LYDON
- Telephone Number (include area code): (516)338-2337

EPA United States Environmental Protection Agency

TOXIC CHEMICAL RELEASE INVENTORY FORM A

SECTION 4. FACILITY IDENTIFICATION (CONTINUED)

4.4	Intentionally left blank						
4.5	SIC Code (4-digit)	a. 3542	b. NA	c.	d.	e.	f.

4.6	Latitude and Longitude	Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		040	45	50	073	33	10

4.7	Dun and Bradstreet Number(s) (9 digits)	a. 874290349
		b.
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. NYD131318651
		b.
4.9	Facility NPDES Permit Number(s) (9 characters)	a. NA
		b.
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. NA
		b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	
	☐ NA	SULZER INC.
5.2	Parent Company's Dun & Bradstreet Number	
	☐ NA	001826957

PART II. CHEMICAL IDENTIFICATION

SECTION 1. TOXIC CHEMICAL IDENTITY

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	N100
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	COPPER COMPOUNDS
1.3	Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes". Generic Name must be structurally descriptive).
	NA

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

EPA United States Environmental Protection Agency

TOXIC CHEMICAL RELEASE INVENTORY FORM A

WHERE TO SEND COMPLETED FORMS:
1. EPCRA Reporting Center, P.O. Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR: 1996

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes. (Answer question 2.2; Attach substantiation forms) [X] No: Do not answer 2.2; continue with Section 3.

2.2 If yes in 2.1, is this copy: [ ] Sanitized [ ] Unsanitized

SECTION 3. CERTIFICATION (Important: Please read and sign after completing the statement.)

I hereby certify that to the best of my knowledge and belief, for the toxic chemical listed in this statement, the annual reportable amount, as defined in 40 CFR 372.27(a), did not exceed 500 pounds for this reporting year and that the chemical was manufactured, processed, or otherwise used in an amount not exceeding 1 million pounds during this reporting year.

Name and official title of owner/operator or senior management official: LAURENCE F. MILES, MANAGER, FACILITIES

Signature: [signature] Date Signed: 07-15-97

SECTION 4. FACILITY IDENTIFICATION

4.1
- Facility or Establishment Name: SULZER METCO, (US) INC.
- TRI Facility ID Number: 11590PRKNL1101P
- Street Address: 1101 PROSPECT AVENUE
- City: WESTBURY
- County: USA
- State: NY
- Zip Code: 11590-0020
- Mailing Address (if different from street address):
- City:
- State:
- Zip Code:

PUT LABEL HERE

4.2 **This report contains information for:**
(Important: check c if applicable; a and b have been intentionally left blank)
c. [ ] A Federal facility

4.3 **Technical Contact**
- Name: MICHAEL S. LYDON
- Telephone Number (include area code): (516)338-2337

EPA United States Environmental Protection Agency

TOXIC CHEMICAL RELEASE INVENTORY FORM A

SECTION 4. FACILITY IDENTIFICATION (CONTINUED)

4.4	Intentionally left blank						
4.5	SIC Code (4-digit)	a. 3542	b. NA	c.	d.	e.	f.

4.6	Latitude and Longitude	Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		040	45	50	073	33	10

4.7	Dun and Bradstreet Number(s) (9 digits)	a. 874290349
		b.
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. NYD131318651
		b.
4.9	Facility NPDES Permit Number(s) (9 characters)	a. NA
		b.
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. NA
		b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	
	☐ NA	SULZER INC.
5.2	Parent Company's Dun & Bradstreet Number	
	☐ NA	001826957

PART II. CHEMICAL IDENTIFICATION

SECTION 1. TOXIC CHEMICAL IDENTITY

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	N096
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	COBALT COMPOUNDS
1.3	Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes". Generic Name must be structurally descriptive).
	NA

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

EPA
United States Environmental Protection Agency

FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
NICKEL COMPOUNDS

WHERE TO SEND COMPLETED FORMS:

1. EPCRA Reporting Center
   P.O Box 3348
   Merrifield, VA 22116-3348
   ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE
   (See instructions in Appendix F)

Enter "X" here if this is a revision [ ]

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

For EPA use only

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

1996

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?
[ ] Yes. (Answer question 2.2; Attach substantiation forms)
[X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [ ] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official
LAURENCE F. MILES MANAGER, FACILITIES

Signature: L. F. Miles

Date Signed: 07-15-97

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: SULZER METCO (US), INC.	TRI Facility ID Number: 11801PRKNL220MI
Street Address: 220 MILLER PLACE	
City: HICKSVILLE	County: NASSAU
State: NY	Zip Code: 11801-
Mailing Address (if different from street address): 1101 PROSPECT AVENUE	PUT LABEL HERE
City: WESTBURY	
State: NY	Zip Code: 11590-0201

EPA
United States Environmental Protection Agency

EPA FORM R
PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
NICKEL COMPOUNDS

SECTION 4. FACILITY IDENTIFICATION (continued)

4.2	**This report contains information for:** (Important check a or b; check c if applicable	a. [X] An entire facility	b. [ ] Part of a facility	c. [ ] A Federal facility				
4.3	**Technical Contact**	Name: MICHAEL S. LYDON	Telephone number (include area code): (516) 338-2337					
4.4	**Public Contact**	Name: MICHAEL S. LYDON	Telephone number (include area code): (516) 338-2337					
4.5	**SIC Code (4-digit)**	a. 3399	b. NA	c.	d.	e.	f.	
4.6	**Latitude and Longitude**	Latitude: Degrees 040, Minutes 47, Seconds 10	Longitude: Degrees 073, Minutes 31, Seconds 00					
4.7	**Dun & Bradstreet Number(s) (9 digits)**	a. 938686300	b.					
4.8	**EPA Identification Number(s) (RCRA I.D. No.) (12 characters)**	a. NYD981558570	b. NA					
4.9	**Facility NPDES Permit Number(s) (9 characters)**	a. NA	b.					
4.10	**Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)**	a. NA	b.					

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	[ ] NA SULZER INC.
5.2	Parent Company's Dun & Bradstreet Number	[ ] NA 001826957

EPA
United States Environmental Protection Agency

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
NICKEL COMPOUNDS

SECTION 1. TOXIC CHEMICAL IDENTITY

(Important: DO NOT complete this section if you complete Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	N495
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	NICKEL COMPOUNDS
1.3	Generic Chemical Name (Important: Comp**only** if Part 1, Section 2.1 is checked "yes". Generic Name must be structurally descriptive)
	NA

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
	NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

			If produce or import:
3.1	**Manufacture the toxic chemical:**	a. [ ] Produce b. [X] Import	c. [X] For on-site use/processing d. [X] For sale/distribution e. [ ] As a byproduct f. [ ] As an impurity
3.2	**Process the toxic chemical:**	a. [ ] As a reactant b. [ ] As a formulation component	c. [X] As an article component d. [ ] Repackaging
3.3	**Otherwise use the toxic chemical:**	a. [ ] As a chemical processing aid b. [ ] As a manufacturing aid	c. [ ] Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	04	(Enter two-digit code from instruction package.)

EPA
United States Environmental Protection Agency

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
NICKEL COMPOUNDS

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X] NA			
5.2	Stack or point air emissions	[ ] NA	A	C	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name				
NA					
5.3.2	Stream or Water Body Name				
5.3.3	Stream or Water Body Name				
5.4.1	Underground injections on-site to Class I Wells	[X] NA			
5.4.2	Underground injections on-site to Class II-V Wells	[X] NA			
5.5	Disposal to land on-site				
5.5.1A	RCRA Subtitle C landfills	[X] NA			
5.5.1B	Other landfills	[X] NA			
5.5.2	Land treatment/ application farming	[X] NA			
5.5.3	Surface impoundment	[X] NA			
5.5.4	Other disposal	[X] NA			

[ ] **Check here only if additional Section 5.3 information is provided on page 5 of this form.**

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EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
NICKEL COMPOUNDS

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.4 Stream or Water Body Name			
5.3.5 Stream or Water Body Name			
5.3.6 Stream or Water Body Name			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	2 Basis of Estimate (enter code)
NA	

6.1.B POTW Name and Location Information

6.1.B.1 POTW Name		6.1.B. 2 POTW Name	
NA			
Street Address		Street Address	
City	County	City	County
State	Zip Code -	State	Zip Code -

If additional pages of Part II, Section 5.3 and/or 6.1 are attached, indicate the total number of pages in this box 1 **and indicate which Part II, Section 5.3/6.1 page this is, here.** 1 **(example: 1, 2, 3, etc.)**

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EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
NICKEL COMPOUNDS

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.1 Off-site EPA Identification Number (RCRA ID No.): NA

Off-Site Location Name: I. GANZ SCRAP METAL, INC.

Street Address: 96 WYTHE AVE.

City: BROOKLYN County: KINGS

State: NY Zip Code: 11211- Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery(enter code)
1. B	1. M	1. M24
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.2 Off-site EPA Identification Number (RCRA ID No.):

Off-Site Location Name:

Street Address:

City: County:

State: Zip Code: - Is location under control of reporting facility or parent company? [ ] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery(enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [1] and indicate which Part II, Section 6.2 page this is, here. [1] (example: 1, 2, 3, etc.)

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
NICKEL COMPOUNDS

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ **Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.**

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b 1 2	7A.1c	7A.1d	7A.1e
NA	3 4 5 6 7 8		%	Yes ☐ No ☐
7A.2a	7A.2b 1 2	7A.2c	7A.2d	7A.2e
	3 4 5 6 7 8		%	Yes ☐ No ☐
7A.3a	7A.3b 1 2	7A.3c	7A.3d	7A.3e
	3 4 5 6 7 8		%	Yes ☐ No ☐
7A.4a	7A.4b 1 2	7A.4c	7A.4d	7A.4e
	3 4 5 6 7 8		%	Yes ☐ No ☐
7A.5a	7A.5b 1 2	7A.5c	7A.5d	7A.5e
	3 4 5 6 7 8		%	Yes ☐ No ☐

If additional copies of page 7 are attached, indicate the total number of pages in this box [1] and indicate which page 7 this is, here. [1] (example: 1, 2, 3, etc.)

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EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
NICKEL COMPOUNDS

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

☐ **Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.**

Energy Recovery Methods [enter 3-character code(s)]

1	2	3	4
NA			

SECTION 7C. ON-SITE RECYCLING PROCESSES

☐ **Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.**

Recycling Methods [enter 3-character code(s)]

1.	2.	3.	4.	5.
NA				
6.	**7.**	**8.**	**9.**	**10.**

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EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
NICKEL COMPOUNDS

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

All quantity estimates can be reported using up to two significant figures.		Column A Prior Year (pounds/year)	Column B Current Reporting Year (pounds/year)	Column C Following Year (pounds/year)	Column D Second Following Year (pounds/year)
8.1	Quantity released*	0	0	5	0
8.2	Quantity used for energy recovery on-site	0	0	0	0
8.3	Quantity used for energy recovery off-site	0	0	0	0
8.4	Quantity recycled on-site	0	0	0	0
8.5	Quantity recycled off-site	7000	7100	0	0
8.6	Quantity treated on-site	0	0	0	0
8.7	Quantity treated off-site	0	0	0	0
8.8	Quantity released to the environment as a result of remedial actions, catastropic events, or one-time events not associated with production processes (pounds/year)	0			
8.9	Production ratio or activity index	0001.00			

8.10	Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.			
	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)	YES [ ]	NO [X]

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

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FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
CHROMIUM COMPOUNDS

WHERE TO SEND COMPLETED FORMS:

1. EPCRA Reporting Center
   P.O Box 3348
   Merrifield, VA 22116-3348
   ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE
   (See instructions in Appendix F)

Enter "X" here if this is a revision [ ]

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

For EPA use only

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

1996

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?
[ ] Yes. (Answer question 2.2; Attach substantiation forms)
[X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [ ] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official
LAURENCE F. MILES MANAGER, FACILITIES

Signature: L. F. Miles

Date Signed: 07-15-97

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: SULZER METCO (US), INC.	TRI Facility ID Number: 11801PRKNL220MI
Street Address: 220 MILLER PLACE	
City: HICKSVILLE	County: NASSAU
State: NY	Zip Code: 11801-
Mailing Address (if different from street address): 1101 PROSPECT AVENUE	PUT LABEL HERE
City: WESTBURY	
State: NY	Zip Code: 11590-0201

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EPA FORM R
PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
CHROMIUM COMPOUNDS

SECTION 4. FACILITY IDENTIFICATION (continued)

4.2	**This report contains information for:** (Important check a or b; check c if applicable	a. [X] An entire facility	b. [ ] Part of a facility	c. [ ] A Federal facility							
4.3	**Technical Contact**	Name: MICHAEL S. LYDON	Telephone number (include area code): (516) 338-2337								
4.4	**Public Contact**	Name: MICHAEL S. LYDON	Telephone number (include area code): (516) 338-2337								
4.5	**SIC Code (4-digit)**	a. 3399	b. NA	c.	d.	e.	f.				
4.6	**Latitude and Longitude**	Latitude			Longitude						
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds				
		040	47	10	073	31	00				
4.7	**Dun & Bradstreet Number(s) (9 digits)**	a. 938686300	b.								
4.8	**EPA Identification Number(s) (RCRA I.D. No.) (12 characters)**	a. NYD981558570	b. NA								
4.9	**Facility NPDES Permit Number(s) (9 characters)**	a. NA	b.								
4.10	**Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)**	a. NA	b.								

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	[ ] NA: SULZER INC.
5.2	Parent Company's Dun & Bradstreet Number	[ ] NA: 001826957

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EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
CHROMIUM COMPOUNDS

SECTION 1. TOXIC CHEMICAL IDENTITY

(Important: DO NOT complete this section if you complete Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	N090
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	CHROMIUM COMPOUNDS
1.3	Generic Chemical Name (Important: Compony If Part 1, Section 2.1 is checked "yes". Generic Name must be structurally descriptive)
	NA

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
	NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

			If produce or import:
3.1	**Manufacture the toxic chemical:**	a. [ ] Produce b. [X] Import	c. [X] For on-site use/processing d. [X] For sale/distribution e. [ ] As a byproduct f. [ ] As an impurity
3.2	**Process the toxic chemical:**	a. [ ] As a reactant b. [ ] As a formulation component	c. [X] As an article component d. [X] Repackaging
3.3	**Otherwise use the toxic chemical:**	a. [ ] As a chemical processing aid b. [ ] As a manufacturing aid	c. [ ] Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	04 (Enter two-digit code from instruction package.)	

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EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
CHROMIUM COMPOUNDS

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X] NA			
5.2	Stack or point air emissions	[ ] NA	A	C	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name: NA				
5.3.2	Stream or Water Body Name:				
5.3.3	Stream or Water Body Name:				
5.4.1	Underground injections on-site to Class I Wells	[X] NA			
5.4.2	Underground injections on-site to Class II-V Wells	[X] NA			
5.5	Disposal to land on-site				
5.5.1A	RCRA Subtitle C landfills	[X] NA			
5.5.1B	Other landfills	[X] NA			
5.5.2	Land treatment/ application farming	[X] NA			
5.5.3	Surface impoundment	[X] NA			
5.5.4	Other disposal	[X] NA			

[ ] **Check here only if additional Section 5.3 information is provided on page 5 of this form.**

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EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 11801PRKNL220MI

Toxic Chemical, Category or Generic Name: CHROMIUM COMPOUNDS

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.4 Stream or Water Body Name			
5.3.5 Stream or Water Body Name			
5.3.6 Stream or Water Body Name			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	2 Basis of Estimate (enter code)
NA	

6.1.B POTW Name and Location Information

6.1.B.1 POTW Name		6.1.B. 2 POTW Name	
NA			
Street Address		Street Address	
City	County	City	County
State	Zip Code -	State	Zip Code -

If additional pages of Part II, Section 5.3 and/or 6.1 are attached, indicate the total number of pages in this box 1 **and indicate which Part II, Section 5.3/6.1 page this is, here.** 1 **(example: 1, 2, 3, etc.)**

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EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
CHROMIUM COMPOUNDS

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.1	Off-site EPA Identification Number (RCRA ID No.) NYD082785429			
Off-Site Location Name	CHEMICAL POLLUTION CONTROL			
Street Address	120 SOUTH FOURTH STREET			
City	BAY SHORE	County	USA	
State	NY	Zip Code	11706-	Is location under control of reporting facility or parent company? ☐ Yes ☒ No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery(enter code)
1. 4300	1. M	1. M10
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.2	Off-site EPA Identification Number (RCRA ID No.) NA			
Off-Site Location Name	I. GANZ SCRAP METAL INC.			
Street Address	96 WYTHE AVE.			
City	BROOKLYN	County	KINGS	
State	NY	Zip Code	11211-	Is location under control of reporting facility or parent company? ☐ Yes ☒ No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery(enter code)
1. B	1. M	1. M24
2.	2.	2.
3.	3.	3.
4.	4.	4.

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [1] and indicate which Part II, Section 6.2 page this is, here. [1] (example: 1, 2, 3, etc.)

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
CHROMIUM COMPOUNDS

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ **Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.**

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b 1 2	7A.1c	7A.1d	7A.1e
NA	3 4 5 6 7 8		%	Yes No
7A.2a	7A.2b 1 2	7A.2c	7A.2d	7A.2e
	3 4 5 6 7 8		%	Yes No
7A.3a	7A.3b 1 2	7A.3c	7A.3d	7A.3e
	3 4 5 6 7 8		%	Yes No
7A.4a	7A.4b 1 2	7A.4c	7A.4d	7A.4e
	3 4 5 6 7 8		%	Yes No
7A.5a	7A.5b 1 2	7A.5c	7A.5d	7A.5e
	3 4 5 6 7 8		%	Yes No

If additional copies of page 7 are attached, indicate the total number of pages in this box [1] and indicate which page 7 this is, here. [1] (example: 1, 2, 3, etc.)

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EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
CHROMIUM COMPOUNDS

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

☐ **Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.**

Energy Recovery Methods [enter 3-character code(s)]

1	2	3	4
NA			

SECTION 7C. ON-SITE RECYCLING PROCESSES

☐ **Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.**

Recycling Methods [enter 3-character code(s)]

1.	2.	3.	4.	5.
NA				
6.	**7.**	**8.**	**9.**	**10.**

EPA
United States Environmental Protection Agency

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
CHROMIUM COMPOUNDS

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

All quantity estimates can be reported using up to two significant figures.		Column A Prior Year (pounds/year)	Column B Current Reporting Year (pounds/year)	Column C Following Year (pounds/year)	Column D Second Following Year (pounds/year)
8.1	Quantity released*	28474	4300	800	400
8.2	Quantity used for energy recovery on-site	0	0	0	0
8.3	Quantity used for energy recovery off-site	0	0	0	0
8.4	Quantity recycled on-site	0	0	0	0
8.5	Quantity recycled off-site	3900	29	0	0
8.6	Quantity treated on-site	0	0	0	0
8.7	Quantity treated off-site	0	0	0	0
8.8	Quantity released to the environment as a result of remedial actions, catastropic events, or one-time events not associated with production processes (pounds/year)	NA			
8.9	Production ratio or activity index	0001.00			

8.10	Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.			
	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)	YES [ ]	NO [X]

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

NASSAU COUNTY
DEPARTMENT of HEALTH

TOXIC OR HAZARDOUS MATERIALS STORAGE FACILITY PERMIT

Facility Number	054042	Type of Permit	[X] Operation [ ] Construction	Date Issued:	03/01/87	Date Modified:	08/01/88	Expiration Date:	03/01/92
Name of Permittee:	PERKINS-ELMER CORP.METCO			Address of Permittee:	1101 PROSPECT AVENUE WESTBURY NY				

GENERAL CONDITIONS

1. By acceptance of this permit, the permittee agrees that the permit is contingent upon strict compliance with Article XI, Nassau County Public Health Ordinance.
2. All work carried out under this permit shall conform to the approved plans and specifications. Any amendments must be approved by the Nassau County Department of Health prior to their implementation. The permittee shall notify the Health Department 48 hours in advance of the start of construction.
3. As a condition of the issuance of this permit, the applicant has accepted expressly, by the execution of the application, the full legal responsibility for all damages direct or indirect, of whatever nature, and by whomever suffered, arising out of the project described herein and has agreed to defend, indemnify and save harmless the County from suits, actions, damages and costs of every name and description resulting from the said project.

Name of Facility:	METCO	FACILITY ADDRESS:
Mailing Address:	1101 PROSPECT AVENUE WESTBURY NY 11590-	1101 PROSPECT WESTBURY NY 11590

THIS FACILITY CONSISTS OF STORAGE AREAS AS LISTED ON PLANS AND APPLICATIONS FILED WITH THIS DEPARTMENT

Tank/Storage Area Number	Capacity	Type of Toxic or Hazardous Material Stored
BULK 0001	1000 GALLONS	MULTIPLE CHEMICALS STORED

Authorizing Officer Stanley Jacob | John J. Dowling, M.D., M.P.H. Commissioner of Health

EH 768 9/86

THIS PERMIT MUST BE POSTED IN A CONSPICUOUS PLACE AT THE FACILITY

P2SUL0002860.001

NASSAU COUNTY DEPARTMENT OF HEALTH — NASSAU COUNTY PUBLIC HEALTH ORDINANCE - ARTICLE XI

APPLICATION FOR A TOXIC OR HAZARDOUS MATERIALS STORAGE FACILITY PERMIT

FORM 1 - GENERAL INFORMATION

SEE INSTRUCTION SHEET

For Office Use Only

Facility I.D.

☐ Municipal
☐ Non-Municipal

Check all that apply to your facility: ☒ Tank Storage ☒ Container Storage ☐ Bulk Storage ☐ Storage of Road De-icing Material

Reason for submitting application: ☒ New ☐ Renewal ☐ Change ☐ Construction

Facility Name	Street Address	Village	State	Zip	Phone
Metco	1101 Prospect Avenue	Westbury	NY	11590	334-1300

Facility Mailing Address (If different from above)	Facility Contact Person (Name & Title)	Phone
	Abraham Teicher Supervisor, Plant Engineering	334-1300

Facility Owner	Street Address	Village	State	Zip	Phone
Perkin-Elmer Corporation Metco Division	1101 Prospect Avenue	Westbury	NY	11590	334-1300

Property Owner (If not Facility Owner)	Street Address	Village	State	Zip	Phone
Same					

Tank Owner (If not Facility Owner)	Street Address	Village	State	Zip	Phone
Same					

Name that should appear on Permit (Permittee)
(If different from Facility Owner)

Permittee's Street Address	Village	State	Zip	Phone

Permittee's Relationship to Facility Owner: ☒ Same ☐ Operator of Facility ☐ Other (Specify):

Principal Property Tax Code:	School District No.	Section	Block	Lot
	1	11	329	369

Forms Attached (Check all that apply) ☒ Form 2 - Tank Registration ☒ Form 3 - Bulk & Container Storage Registration ☐ Form 4 - Storage of Road De-icing Materials

I hereby affirm under penalty of perjury that the information provided on this form and on any attached forms, statements and exhibits is true to the best of my knowledge and belief.

Print Name	Signature	Title	Date
Abraham Teicher		Supervisor, Plant Engineering	Feb. 24, 1987

EH 857 4/86

P2SUL0002860.002

NASSAU COUNTY DEPARTMENT OF HEALTH
APPLICATION FOR A TOXIC OR HAZARDOUS MATERIALS STORAGE FACILITY PERMIT
FORM 2 - TANK REGISTRATION
SEE INSTRUCTION SHEETS

For Office Use Only	
Date Application Received	Facility
Reviewed By	Date Revi
Action: ☐ Not Req'd. ☐ Approved ☐ Disapproved	No.of Mon

Facility Name
Metco

Facility Address
1101 Prospect Avenue, Westbury, NY 11590

Action	Tank Number	Location	Design Capacity (Gallons)	Material of Construction	Internal Protection	External Protection	Piping	Type	Material Currently or Last Stored: NCDH Number	Material Currently or Last Stored: Name	Status	Tank Installation Date (Month/yr)	Leak Detection	Secondary Containment	Product Gauge	Dispenser Method	Fill	Addition Informati for Abando Tanks: Date Last Used (Month/yr)	Co
1	1	4	20,000	1	2	2	1	1		#2 Fuel Oil	1	1970	5	5	1	2	2		
1	2	4	20,000	1	2	1	1	1		#2 Fuel Oil	1	1982	5	5	1	2	2		

FU 858 4/86 Date Submitted Feb. 24, 1987 Page 2 of 3 ☐ D.P.

P2SUL0002860.003

NASSAU COUNTY DEPARTMENT OF HEALTH
APPLICATION FOR A TOXIC OR HAZARDOUS MATERIALS STORAGE FACILITY PERMIT
FORM 3 - BULK AND CONTAINER STORAGE REGISTRATION
SEE INSTRUCTION SHEETS

For Office Use Only	
Date Application Received	Facility
Reviewed By	Date Revi
Action: ☐ Not Req'd. ☐ Approved ☐ Disapproved	No.of Mon

Facility Name
Metco

Facility Address
1101 Prospect Avenue, Westbury, NY 11590

Action: ☒ Register Existing Area ☐ Add Area ☐ Remove Area ☐ Modify Area | Area No.

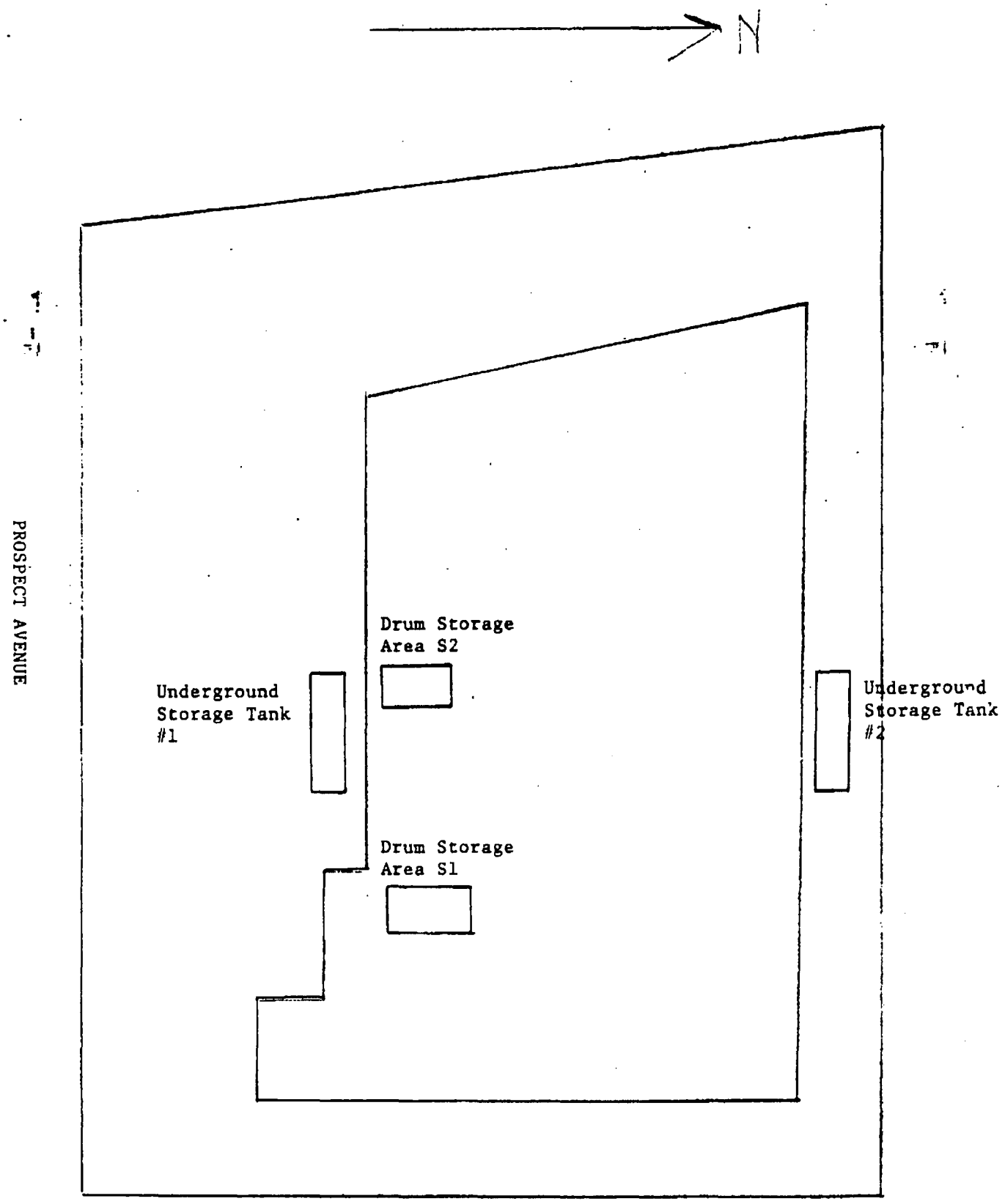
Location: ☒ Indoors ☐ Outdoors | Bulk Storage Max.Quantity Stored: | Container Storage Max.No. 15 Max.Vol. 750 gal.

Secondary Containment: ☐ Impervious Berm/Dike ☒ Impervious Floor/Pad ☐ Roof ☐ Walls ☐ Floor Drain & Storage Tank ☐ None ☐ Other (Specify):

Construction Material of Dike & Pad (Check all that Apply) ☒ Concrete ☐ Steel ☐ Other (Specify): | Security ☒ Yes ☐ No

Type	NCDH Number	Material Name	Physical State	Amount Stored		Storage Method	
				Average Quantity	Units	Average Number	T
1		1,1,1-Trichloroethane	1	100	1	2	
2		1,1,1-Trichloroethane	1	55	1	1	
2		Waste Solvent	1	100	1	2	
2		Waste Sludge (from spray guns)	4	1,000	3	4	
2		Waste over spray powder	2	500	3	4	

P2SUL0002860.004



Metco
1101 Prospect Avenue
Westbury, NY 11590

BÖWE SYSTEC INC
99 SEAVIEW BOULEVARD
PORT WASHINGTON, NY 11050-4610
Sales: (516) 621-3300
Parts & Service: (516) 621-3374
Accounting: (516) 621-3453
Fax: (516) 621-3569

SECOND REQUEST

May 14, 1993

Mr. Jim Zanetti
METCO
325 Duffy Avenue
Hicksville, N.Y.

Dear Jim Zanetti,

As you may know, Bowe Systec, Inc. is the owner of the property located immediately adjacent to the east of the Metco facility (at Section 11, Block H, Lot 484). Both of our properties are shown on the enclosed tax map for reference and accuracy.

Recently, we have been directed by the New York State Department of Environmental Conservation (NYSDEC) to conduct a groundwater investigation in the area surrounding our facility. Based on the groundwater flow direction map (constructed by our hydrogeologist) in this area of Hicksville and the location of Metco's recharge basin, a temporary well must be drilled and installed on your property. The purpose of the temporary well is to conduct a subsurface sampling program to determine background conditions for our property. We therefore seek your written authorization to access the recharge basin on your property so that we may conduct the work as required by NYSDEC.

We will provide all necessary efforts in order to access the drilling location and will not obstruct your normal daily business operations while we are working. In addition, your site will also be restored to the pre-existing conditions (after our work) at no cost to you.

Since the importance of time has been stressed by NYSDEC, we ask that you provide us with your written authorization within the next week. Should you require any additional information from Bowe regarding this matter, please feel free to call me at any time.

Very truly yours,

Richard Reilly
National Service Director

Enclosure
cc: John Lombard
Harold Shaw, Esq.
Jamie Ascher, NYSDEC
Martin O. Klein, C.P.G.

Forms Completed by Platers, Inc.

Form GM

A site required to submit the 1992 Hazardous Waste Report must complete Form GM if the site generated or shipped any quantity of RCRA hazardous waste during 1992. Platers, Inc. completed four Forms GM since a complete, separate, and independent Form GM must be submitted for **each** RCRA hazardous waste stream. Two waste streams, the spent solvents (Form GM, page 3 of 8) and the characteristically hazardous rinse water treated in the wastewater treatment system (Form GM, page 4 of 8), were generated from production processes or service activities. The third waste stream, still bottoms (Form GM, page 5 of 8), was generated from the on-site recycling of hazardous waste (i.e., the spent solvent). The fourth waste stream, wastewater treatment sludge (Form GM, page 6 of 8), was generated as a residual from the on-site treatment of hazardous wastewaters.

PRESS HARD—You Are Writing Through Eight Copies (See Reverse Side)

NYG2760048 5118

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

#5118

HAZARDOUS WASTE MANIFEST

D3781101

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple

(Hazardous Waste Manifest 1/5/99)

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD131318651
Manifest Doc. No.: 60048
2. Page 1 of 1

Information within heavy bold line is not required by Federal Law.

3. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Telephone Number (516) 338-2337

A. NYG2760048

B. Generator's ID: SAME

5. Transporter 1 (Company Name): Clean Harbors Env Services Inc
6. US EPA ID Number: MAD039322250

C. State Transporter's ID: NYMA006

D. Transporter's Telephone (781) 849-1800

7. Transporter 2 (Company Name): MAUMEE EXPRESS INC.
8. US EPA ID Number: NJD986607380

E. State Transporter's ID

F. Transporter's Telephone (732) 424-844

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4879 Spring Grove Avenue
Cincinnati, OH, 45232

10. US EPA ID Number: OHD000816629

G. State Facility ID

H. Facility Telephone (513) 681-5738

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. HAZARDOUS WASTE, SOLID, N.O.S., (CERAMIC OXIDE, ALUMINUM OXIDE), 9, NA3077, PG III	001	DM	00346	P	EPA D007 / STATE
b.					EPA / STATE
c					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
11a.ERG#171 (S),(E)
a RCRA METAL & CERAMIC POWDER
c
b
d

K. Handling Codes for Wastes Listed Above
a L
c
b
d

15. Special Handling Instructions and Additional Information
11a: CH189108 NJDEP#07259 DECAL# 02649
1X55DM

24 HOUR EMERGENCY # (800) 483-3718

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: DAVID WALZAK
Signature:
Mo. 05 Day 07 Year 04

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JOSE M. CANTILLO
Signature:
Mo. 05 Day 07 Year 04

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: CHUCK SPENCER
Signature:
Mo. 05 Day 07 Year 04

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: Mike Fultz
Signature:
Mo. 5 Day 19 Year 04

COPY 1—Disposer State—Mailed by TSD Facility

Company Name Sulzer Metco Westbury

EPA ID# No. NYD 1 3 1 3 1 8 6 5 1

Region/Inspector 1/T. Colabella

Inspection Date June 12, 2003

Indicate:

X Violations

Indicate:

X Satisfactory
NA Not Applicable

APPENDIX X

AIR EMISSIONS-SUBPART AA, BB and CC CHECKLIST
(Only for Permitted TSDs, Interim status TSDs, and LQGs)

Subpart AA

Background: If a facility (TSD or LQG) manages hazardous wastes greater than 10 ppmw of organics in a process vent used in distillation, fractionation, solvent extraction, thin-film evaporation, air or steam stripping, Subpart AA may apply. Subpart AA would not apply in a bona fide closed loop scenario at LQGs and TSDs. To comply, the facility would need to determine if the process vent(s) releases greater than 3.0 lbs/hr or 3.1 tons/year of organic air emissions to the atmosphere. If it does not release that much then the facility is in compliance with Subpart AA. If its emissions are greater, then a control device is necessary to bring the facility into compliance. The control device may be a condenser, flare, carbon absorber, etc., that brings the equipment's emissions rate below 3.0 lbs/hr and 3.1 tons/year, or reduces the organic emissions by 95%.

Objective: The Inspector should try to determine if Subpart AA applies at a particular facility and, if applicable, evaluate the facility's efforts to achieve compliance. Has the facility calculated or measured the organic emissions from all vents and compared that with the emissions limit?

1. IDENTIFICATION OF AFFECTED PROCESS VENTS - 373-3.27(a)

(a) Does the facility have any hazardous waste management unit using the following process? ___ Yes X No

___ Distillation
___ Fractionation
___ Thin-film evaporation
___ Solvent extraction
___ Air stripping
___ Steam Stripping

Indicate:

X Violations

Indicate:

X Satisfactory
NA Not Applicable

(b) Are any of these units/processes exempt under the closed-loop recycle exemption? ___ Yes ___ No

Please Explain: _____

_____

(c) Does the facility manage hazardous wastes greater than 10 ppmw of organics in a process vent used in above processes?

___ Yes. (Complete Subpart AA)
___ No. (Describe the information/documentation used to make the determination and collect the supporting documentation. Proceed to the Subpart BB checklist.)

_____

_____

2. STANDARDS FOR PROCESS VENTS - 373-3.27(c)

(a) Total organic emissions from all affected process vents at the facility are below 3 lb/hr and 3.1 tons/yr. - 373-3.27(c)(1)(i):

___ If Yes, the calculations/analysis or performance tests are done according to 373-3.27(e). (Provide copies of the calculation and associated information - 373-3.27(c)(3).) ___

___ If No, did the facility reduce the total organic emissions, by using a control device, from all affected vents at the facility by 95 weight percent: 373-3.27(c)(1)(ii). (All TSDs must have the control device in place and for LQGs by June 1999.) ___

3. STANDARDS FOR CLOSED-VENT SYSTEMS AND CONTROL DEVICES - 373-3.27(d)

(a) Please explain/describe the type of control device used at the facility:

_____

(b) ___ The closed-vent system and control device must meet the requirements of subdivision 373-3.27(d); 373-3.27(c)(2). ___

(c) ___ The owner or operator shall monitor and inspect all control devices at least each operating day to ensure proper operation - 373-3.27(d)(6). ___

Indicate:	Indicate:
X Violations	X Satisfactory NA Not Applicable

(d) ___ The owner or operator shall repair all detected defects as soon as practicable, but not later than 15 calendar days after the defect is detected - 373-3.27(d)(11)(iii)(a). ___

(e) ___ A first attempt at repair shall be made no later than five calendar days after the defect is detected - 373-3.27(d)(11)(iii)(b). ___

4. RECORDKEEPING REQUIREMENTS - 373-3.27(f)

(a) ___ Owners and operators must record the following information in the facility operating record - 373-3.27(f)(2). ___

1. ___ Information and data identifying all affected process vents, annual throughput and operating hours of each affected unit, estimated emission rates for each vent and for the overall facility - 373-3.27(f)(2)(ii)('a'). ___

2. ___ Information and data supporting determinations of vent emissions and emission reductions achieved by control devices based on calculations or performance tests - 373-3.27(f)(2)(ii)('b'). ___

3. ___ Design documentation and monitoring, operating and inspection information for each closed-vent system and/or control device shall be recorded and kept up to date in the facility operating record - 373-3.27(f)(3). ___

4. ___ Date of each control device startup and shutdown - 373-3.27(f)(3)(viii). ___

5. ___ The date that any leak was detected and the date of repairs - 373-3.27(f)(3)(x). ___

6. ___ Records of the monitoring, operating and inspection shall be maintained at least three years following the date of each occurrence, measurement, maintenance, corrective action, or record - 373-3.27(f)(4). ___

Indicate:

X Violations

Indicate:

X Satisfactory
NA Not Applicable

Subpart BB

Background: If a facility (TSD or LQG) has equipment (any valve, pump, compressor, pressure relief device, sampling connection system, flange, open-ended valve or line) that contacts hazardous wastes greater than 10% organics, that facility is subject to the inspection and monitoring requirements of Subpart BB. If the equipment used to transport hazardous waste with greater than 10% organics is used for less than 300 hours per year, then it is excluded from the requirements of 373-3.28(c) through 373-3.28(k) of this subpart if the equipment is identified as required in 373-3.28(0)(7)(vi).

Objective: The Inspector should determine if Subpart BB applies at a particular facility and, if applicable, evaluate the facility's leak detection and repair (LDAR) program. Does it cover all the affected equipment, what is its frequency (monthly, quarterly) and are there records of timely (<15 days) equipment repair when leaks are detected?

1. IDENTIFICATION OF AFFECTED EQUIPMENT - 373-3.28(a)

(a) Does the facility have any of the following equipment that contain or contact hazardous wastes greater than 10% organics by weights - 373-3.28(a)(2)? ___ Yes X No

___ Pumps
___ Compressors
___ Pressure relief devices
___ Sampling connections
___ Open-ended valves or lines
___ Valves

(b) Is any of this equipment in vacuum service, which will be excluded from this requirement - 373-3.28(a)(4)? ___ Yes ___ No

Please Explain: _____

(c) Is any of this equipment that contains or contacts hazardous waste with an organic concentration of at least 10% by weight for a period of less than 300 hours per calendar year, which will be excluded from this requirement - 373-3.28(a)(5)? ___ Yes ___ No

Please Explain: _____

(d) ___ Each piece of equipment covered under these requirements shall be marked in such a manner that it can be distinguished readily from other pieces of equipment - 373-3.28(a)(3). ___

(e) ___ Any equipment or device that is equipped with a closed vent system capable of capturing and transporting leakage to a control device is exempt from these requirements provided that the closed-vent systems and control devices shall comply with the provisions of subdivision 373-3.27(d); 373-3.28(k). ___

Indicate:

X Violations

Indicate:

X Satisfactory
NA Not Applicable

2. OPERATING STANDARDS:

LIGHT LIQUID SERVICE: For a hazardous waste to be in light liquid service, the vapor pressure of one or more of the organic constituents in the material must be greater than 0.3 Kilopascals at 20 degrees C and the total concentration of pure organic constituents having a vapor pressure greater than 0.3 kilopascals at 20 degrees Centigrade is equal to or greater than 20% by weight.

A. Pumps in Light Liquid Service - 373-3.28(c)

(i) ___ Each pump shall be monitored monthly to detect leaks - 373-3.28(c)(1)(i). ___

(ii) ___ Each pump shall be checked by visual inspection each calendar week for indications of liquids dripping from the pump seal - 373-3.28(c)(1)(ii). ___

(iii) ___ When a leak is detected, it shall be repaired as soon as practicable, but not later than 15 calendar days after it is detected - 373-3.28(c)(3)(i). ___

(iv) ___ A first attempt at repair shall be made no later than five calendar days after each leak is detected - 373-3.28(c)(3)(ii). ___

(v) ___ Each pump equipped with a dual mechanical seal system should meet the requirements of subdivision - 373-3.28(c)(4). ___

B. Compressors - 373-3.28(d)

___ Each compressor shall be equipped with a seal system and should meet the requirements of subdivision 373-3.28(d)(1) thru (9) - {i.e. daily inspection and implementation of leak detection and repair (LDAR) program}. ___

C. Pressure Relief Devices in Gas/Vapor Service - 373-3.28(e)

(i) ___ Except during pressure releases, each pressure relief device shall be operated with no detectable emissions - 373-3.28(e)(1). ___

(ii) ___ No later than five calendar days after each pressure release, the device shall be monitored to confirm the condition of no detectable emissions, as indicated by an instrument reading of less than 500 ppm above background - 337-3.28(e)(2). ___

Indicate:

X Violations

Indicate:

X Satisfactory
NA Not Applicable

D. Sampling Connections - 373-3.28(f)

___ Each sampling connection shall be equipped with a closed-purge, closed-loop, or closed-vent system and shall meet the requirements of subdivision - 373-3.28(f)(1) thru (3). ___

E. Open-ended Valves or Lines - 373-3.28(g)

___ Each open-ended valve or line shall be equipped with a cap, blind flange, plug or a second valve and shall meet the requirements of subdivision - 373-3.28(g)(1), (2) & (3). ___

F. Valves in Gas/Vapor Service or in Light Liquid Service - 373-3.28(h)

(i) ___ Each valve shall be monitored monthly to detect leaks by specified methods - 373-3.28(h)(1). ___

(ii) ___ When a leak is detected, it shall be repaired as soon as practicable, but no later than 15 calendar days after it is detected - 373-3.28(h)(4)(i). ___

(iii) ___ A first attempt at repair shall be made no later than five calendar days after each leak is detected - 373-3.28(h)(4)(ii). ___

G. Pump and Valves in Heavy Liquid Service, Pressure Relief Device in Light or Heavy Liquid Service, and Flanges and Other Connectors - 373-3.28(i)

(i) ___ Pumps and valves in heavy liquid service, pressure relief devices in light or heavy liquid service, and flanges and other connectors shall be monitored within five days by specified methods, if evidence of a potential leak is found by visual, audible, olfactory, or any other detection method - 373-3.28(i)(1). ___

(ii) ___ When a leak is detected, it shall be repaired as specified in this subdivision - 373-3.28(i)(3) (i.e., 15 days to repair and five days for first attempt). ___

3. RECORDKEEPING REQUIREMENTS - 373-3.28('o')

A. ___ The following information must be recorded in the facility operating record - 373-3.28('o')(2). ___

(i) ___ List all equipment to which this section applies. ___

(ii) ___ Equipment ID number and hazardous waste management unit identification. ___

Indicate:

X Violations

Indicate:

X Satisfactory
NA Not Applicable

(iii) ___ Approximate locations of units within the facility. ___

(iv) ___ Type of equipment (e.g., plum or valve). ___

(v) ___ Percent-by-weight total organics in the hazardous waste stream at the equipment. ___

(vi) ___ Physical state of hazardous waste at the equipment (e.g., gas/vapor or liquid). ___

(vii) ___ Method of compliance with the standard (e.g., "monthly leak detection and repair" or "equipped with dual mechanical seals"). ___

(viii) ___ The date the leak was detected and the date of repairs - 373-3.28('o')(4). ___

Subpart CC

Overview: The Subpart CC regulations apply to large quantity generators and treatment, storage and/disposal facilities that manage hazardous waste of volatile organic concentration of 500 ppmw or more on an average annual basis in tanks and containers.

For tank storage, there are two levels that a facility may use to manage their waste. Tank Level 1 requires a fixed roof tank which uses a maximum organic vapor pressure to comply with Subpart CC. Tank Level 2 designs can be one of five options. These are: (1) an Internal Floating Roof (2) an External Floating Roof (3) a tank with a Fixed Roof vented through a closed-vent system to a control device (4) a Pressure Tank (5) a tank located inside an enclosure that is vented through a closed-vent system to an enclosed combustion device.

Most of the facilities will comply with Tank Level 1 which is the easiest to follow. The other option that will be seen a lot would be Tank Level 2 Option 3. The other options will be limited to a small number of facilities.

For container storage, most of the facilities will store their waste in DOT approved containers. RCRA regulations already cover such storage and, as a result, most facilities will be in compliance with the container storage regulations of the Subpart CC regulations.

1. IDENTIFICATION AND APPLICABILITY:

A. Does the facility have any of the following units that treat, store or dispose of hazardous waste with volatile organic (VO) concentrations of 500 ppmw or more on an average annual basis?
X Yes ___ No

___ Tanks
X Containers
___ Surface Impoundments

Indicate:

X Violations

Indicate:

X Satisfactory
NA Not Applicable

B. 373-3.29(a)(2) Exemptions:

(i) ___ Unit did not receive hazardous waste after 12/6/96.
(ii) ___ Container that has less than 26 gallons capacity.
(iii) ___ Unit undergoing closure.
(iv) ___ Units used in on-site RCRA or CERCLA cleanup.
(v) ___ Unit solely used for radioactive mixed hazardous waste.
(vi) ___ Units with Clean Air Act (CAA) air emission controls.
(vii) ___ Tanks with process vents (Subject to Subpart AA).

C. 373-3.29(d)(3) Exemptions:

(i) ___ Units for which all hazardous waste entering the unit has an average VO concentration at the point of waste origination of less than 500 ppmw.
(ii) ___ Units for which the organic content of all hazardous waste entering the unit has been reduced by an organic destruction or removal process in accordance with 373-3.29(d)(3)(ii).
(iii) ___ Tanks used for biological treatment of hazardous waste in accordance with 373-3.29(d)(3)(ii)('d').
(iv) ___ All waste placed in the unit meets 376.4 (LDR) requirements.
(v) ___ Tank used for bulk feed of hazardous waste to a waste incinerator in accordance with 373-3.29(d)(3)(v).

D. Other 373-1.1(d) general exclusions/exemptions:

(i) ___ Hazardous waste recycling unit exemption.
(ii) ___ Totally enclosed treatment unit exemption.
(iii) ___ Elementary neutralization unit exemption.
(iv) ___ Wastewater treatment unit exemption.
(v) ___ Emergency or spill management unit exemption.
(vi) ___ Satellite accumulation containers.

E. Waste determinations:

(i) ___ An owner or operator shall determine the average VO concentration at the point of waste origination for each hazardous waste management unit exempted under (VO <500 ppmw) the provisions of 373-3.29(d)(3)(i) from using air emission controls - 373-3.29(e)(1)(i). ___

(ii) ___ The average VO concentration of hazardous waste at the point of waste origination shall be determined - 373-3.29(e)(1)(ii). X

(a) ___ by using direct measurement as specified in 373-3.29(e)(1)(iii) OR ___

Indicate:

X Violations

Indicate:

X Satisfactory
NA Not Applicable

(b) ___ by using knowledge as specified in 373-3.29(e)(1)(iv). X

2. STANDARDS FOR TANKS - 373-3.29(f)

A. ___ The owner or operator shall control air pollutant emissions from the tank in accordance with the Tank Level 1 controls as specified in 373-3.29(f)(3) OR Tank Level 2 controls as specified in 373-3.29(f)(4). ___

B. Tank Level 1 Controls:

1. ___ Tank must meet the following three conditions to qualify to use Level 1 controls - 373-3.29(f)(2)(i). ___

(i) ___ Waste maximum organic vapor pressure should be less than the cutoff for tank design capacity - 373-3.29(f)(2)(i)('a'). ___

(ii) ___ No heating of hazardous waste in tank to or above the temperature at which maximum organic vapor pressure is determined - 373-3.29(f)(2)(i)('b'). ___

(iii) ___ No waste stabilization in the tank - 373-3.29(f)(2)(i)('c'). ___

2. ___ Maximum organic vapor pressure for hazardous waste to be managed in the tank, using Level 1 control, should be determined according to 373-3.29(e)(3); 373-3.2(f)(3)(i). ___

3. ___ The tank shall be equipped with a fixed roof meeting the following requirements - 373-3.29(f)(3)(ii). ___

(i) ___ Fixed roof designed with no visible cracks, holes, gaps or other open spaces in roof seams and mountings. ___

(ii) ___ Fixed roof openings can be: ___

___ Equipped with closure device designed with no visible cracks, holes, gaps, or other open spaces when secured in closed position. ___

___ Equipped with permanent opening vented to organic emission control device. ___

___ Equipped with pressure relief device vented to atmosphere. ___

(iii) ___ Closure device to be maintained in a closed position except when necessary to access the waste or equipment under the cover. ___

Indicate:

X Violations

Indicate:

X Satisfactory
NA Not Applicable

C. Tank Level 2 Controls:

Tank using Tank Level 2 controls shall use one of the following. Five control alternatives:

1. ___ Fixed roof tank with internal floating roof.
2. ___ External floating roof.
3. ___ Tank vented through a closed-vent system to a control device.
4. ___ Pressure Tank
5. ___ Tank inside enclosure vented to combustion control device.

1. ___ Tank using Level 2 control with a fixed roof with an internal floating roof shall meet the requirements specified in 373-3.29(f)(5). ___

2. ___ Tank using Level 2 control with external floating roof shall meet the requirements specified in 373-3.29(f)(6). ___

3. ___ Tank using Level 2 control by venting the fixed roof tank to a control device shall meet the following requirements as specified in 373-3.29(f)(7). ___

(i) ___ The fixed roof and its closure devices shall form a continuous barrier over the entire surface area of the liquid in the tank. ___

(ii) ___ Each opening in the fixed roof not vented to the control device shall be equipped with a closure device. ___

(iii) ___ Closure device to be maintained in a closed position and the vapor headspace underneath the fixed roof vented to the control device. ___

4. ___ Tank using Level 2 control by a pressure tank shall meet the requirements as specified in 373-3.29(f)(8). ___

5. ___ Tank using Level 2 control with tank inside the enclosure vented to combustion control device shall meet the requirements as specified in 373-3.29(f)(9). ___

D. Waste Transfer Requirements:

___ Transfer of hazardous waste to the tank from another tank subject to using air emission controls under Subpart CC must be conducted according to 373-3.29(f)(10) requirements by using continuous hard-piping or another ___

closed system that does not allow exposure of the waste to the atmosphere.

E. Inspections and Monitoring:

1. ___ The owner or operator shall perform an initial inspection of the tank cover and its closure device and, thereafter, the subsequent inspection and monitoring should be performed at least once a year as specified in 373-3.29(f) & (i); 373-3.29(j)(1). ___

2. ___ The owner or operator shall develop and implement a written plan and schedule to perform the inspections and monitoring - 373-3.29(j)(2). ___

3. ___ Each defect detected during the inspection shall be repaired as soon as practicable but no later than 45 calendar days after the detection. A first effort at repair shall be made no later than five calendar days after the detection - 373-3.29(f)(11). ___

F. Recordkeeping Requirements:

1. ___ For fixed roof tank with Level 1 control, the records for each determination of maximum organic vapor pressure of the hazardous waste in tank - 373-3.29(k)(2)(ii)('a'). ___

2. ___ Records of inspection dates and defect repairs - 373-3.29(k)(2)(i)('b'). ___

3. ___ Design documentation for floating roof covers and enclosures - 373-3.29(k)(ii)('b'). ___

3. STANDARDS FOR CONTAINERS - 373-3.29(h)

A. General Requirements.

1. ___ For a container with design capacity greater than $0.1m^3$ (26 Gal) and less than $0.46m^3$ (119 Gal), and no waste stabilization in container shall use container Level 1 control - 373-3.29(h)(2)(i)('a'). X

2. ___ For a container with design capacity greater than $0.46m^3$ (119 Gal) that is not in light material service, and no waste stabilization in container shall use container Level 1 control - 373-3.29(h)(2)(i)('b'). ___

Indicate:

X Violations

Indicate:

X Satisfactory
NA Not Applicable

3. ___ For a container with design capacity greater than $0.46m^3$ (119 Gal) that is in light material service, and no waste stabilization in container shall use container Level 2 control - 373-3.29(h)(2)(i)('c'). ___

4. ___ For a container with design capacity greater than $0.1m^3$ (26 Gal) and is used for waste stabilization shall use container Level 3 control - 373-3.29(h)(2)(ii). ___

B. Container Level 1 Standards:

Container using container Level 1 control shall use one of the following three control alternatives:

1. ___ Use a container that meets the USDOT regulations as specified in 373-3.29(h)(6); 373-3.29(h)(3)('a'). X

2. ___ Use a container which is equipped with a cover and closure devices that form a continuous barrier over the container openings to minimize exposure of hazardous waste to the atmosphere - 373-3.29(h)(3)('b'). ___

3. ___ Use a container in which an organic-vapor suppressing barrier is placed on or over the hazardous waste in the container such that no hazardous waste is exposed to the atmosphere - 373-3.29(h)(3)('c'). ___

C. Container Level 2 Standards:

1. ___ Container using Level 2 control shall use one of the following three control alternatives: ___

(i) ___ Use a container that meets the USDOT regulations as specified in 373-3.29(h)(6); 373-3.29(h)(4)(i)('a'). ___

(ii) ___ Use a container that operates with no detectable organic emissions as defined in 373-3.29(b) and determined in accordance with the procedure specified in 373-3.29(h)(7); 373-3.29(h)(4)(i)('b'). ___

(iii) ___ Use a container that has been demonstrated within the preceding 12 months to be vapor-tight by using 40 CFR Part 60 Appendix A, Method 27, in accordance with the procedure specified in 373-3.29(h)(8); 373-3.29(h)(4)(i)('c'). ___

2. ___ Transfer of hazardous waste in or out of a container using Level 2 controls shall be conducted in such a manner as to minimize exposure of hazardous waste to the atmosphere. Waste transfer should be done using any one of the following - 373-3.29(h)(4)(ii). ___

(i) ___ A submerged-fill pipe or other submerged-fill method or ___

(ii) ___ A vapor-balancing system or a vapor-recovery system to collect and control the vapors displaced from the container during filling operation or ___

(iii) ___ A fitted opening in the top of a container through which the hazardous waste is filled. ___

D. Container Level 3 Standards:

1. ___ Containers using Level 3 control shall use one of following two control alternatives: ___

(i) ___ Use a container that is vented directly through a closed vent system to a control device - 373-3.29(h)(5)(i)('a'). ___

(ii) ___ Use a container that is vented inside an enclosure which is exhausted through a closed vent system or a control device - 373-3.29(h)(i)('b'). ___

2. ___ The container enclosure shall be designed and operated in accordance with the criteria for a permanent total enclosure as specified in "Procedure T..Criteria for and Verification of a Permanent or Temporary Total Enclosure" under 40 CFR 52.741, Appendix B - 373-3.29(h)(5)(ii)('a'). ___

3. ___ The closed-vent system and control device shall be designed and operated in accordance with the requirements of 373-3.29(i); 373-3.29(h)(5)(ii)('b'). ___

E. Inspections and Monitoring:

1. ___ The containers should be inspected visually within 24 hours after the container is accepted at the facility, when a hazardous waste already is in the container - 373-3.29(h)(3)(iv)('a') & 373-.29(h)(4)(iv)('a'). ___

Indicate:

X Violations

Indicate:

X Satisfactory
NA Not Applicable

2. ___ Containers that remain at the facility shall visually be inspected initially and, thereafter, at least once every 12 months to check for cracks, holes, gaps or other openings - 373-3.29(h)(3)(iv)('b') & 373-3.29(h)(4)(iv)('b'). ___

3. ___ Each defect detected during the inspection shall be repaired as soon as practicable but no later than five calendar days after the detection. A first effort at repair shall be made within 24 hours after the detection - 373-3.29(h)(3)(iv)('c') & 373-3.29(h)(4)(iv)('c'). ___

4. ___ For container Level 3 controls, the inspection and monitoring of closed-vent system and control device shall be done as specified in 373-3.29(i); 373-3.29(h)(5)(iv). ___

F. Record Keeping Requirements:

1. ___ Containers using Level 3 controls shall prepare and maintain design documentation and calculations for enclosures - 373-3.29(k)(4)(i). ___

2. ___ Records required for the closed-vent system and control device in accordance with 373-3.29(k)(5); 373-3.29(k)(4)(ii). ___

4. STANDARDS FOR SURFACE IMPOUNDMENTS:

___ The owner or operator shall control air emissions from the surface impoundment according to the requirements of 373-3.29(g); 373-3.29(d)(2). ___

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

NYG 0731907

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple. (Rev. 3/97)

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. [illegible] Manifest Doc. No. 3 2 0 9 7

2. Page 1 of 1

Information within heavy bold line is not required by Federal Law.

3. Generator's Name and Mailing Address
Sulzer Metco
1101 Prospect Ave., Westbury, NY 11590

4. Generator's Telephone Number (516) 338-2337

A. NYG 0731907

B. Generator's ID
Same

5. Transporter 1 (Company Name)
Chemical Pollution Control Inc

6. US EPA ID Number
N Y D 0 3 2 7 8 5 4 2 9

C. State Transporter's ID
PW-917

D. Transporter's Telephone (516) 368-0332

7. Transporter 2 (Company Name)

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
Chemical Pollution Control Inc
110 South Fourth Street
Bay Shore, NY 11706

10. US EPA ID Number
N Y D 0 3 2 7 8 5 4 2 9

G. State Facility ID
Same

H. Facility Telephone (516) 968-0330

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CORROSIVE LIQUID NOS 8 UN 1760 PG II (Wastewater with acid)	001	DF	00020	G	EPA D002 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
a 100 c
b d

K. Handling Codes for Wastes Listed Above
a ☒ c ☐
b ☐ d ☐

15. Special Handling Instructions and Additional Information
1) 3275 0 ERG 154
Emergency Response 516-368-0332

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: [illegible] Signature: [illegible] Mo. 05 Day 06 Year 98

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MICHAEL J. GANGI Signature: [illegible] Mo. 05 Day 06 Year 98

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Signature: Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FRANK FAZIO Signature: [illegible] Mo. 05 Day 06 Year 98

COPY 5 — Retained by TSD Facility

FZGL006960

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

NYG0731907

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple. (Rev. 3/97)

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. NYD131365129 Manifest Doc. No. 0907

2. Page 1 of 1

Information within heavy bold line is not required by Federal Law.

A. NYG0731907

B. Generator's ID: Same

C. State Transporter's ID: PW8417

D. Transporter's Telephone: (516) 586-0333

E. State Transporter's ID:

F. Transporter's Telephone ( )

G. State Facility ID: same

H. Facility Telephone (516) 586-0333

3. Generator's Name and Mailing Address
Sulzer Metco
1101 Prospect Ave., Westbury, NY 11590

4. Generator's Telephone Number (516) 338-2337

5. Transporter 1 (Company Name): Chemical Pollution Control Inc

6. US EPA ID Number: NYD082785429

7. Transporter 2 (Company Name)

8. US EPA ID Number

9. Designated Facility Name and Site Address
Chemical Pollution Control Inc
120 South Fourth Street
Bay Shore, NY 11706

10. US EPA ID Number: NYD082785429

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CORROSIVE LIQUID NOS & UN1760 PG II (HYDROFLUORIC NITRIC ACID)	001	DF	00020	G	EPA D002 STATE
b.					EPA STATE
c.					EPA STATE
d.					EPA STATE

J. Additional Descriptions for Materials listed Above
a 1.00 c
b d

K. Handling Codes for Wastes Listed Above
a ☒ c ☐
b ☐ d ☐

15. Special Handling Instructions and Additional Information
1) 3275 0 ERG 157
Emergency Response 516-586-0333

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Michael E. Lydon Signature: [signature] Mo. 05 Day 06 Year 98

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MICHAEL J SMITH Signature: [signature] Mo. 05 Day 06 Year 98

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name Signature Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name Signature Mo. Day Year

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

NYG0731907

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple. (Rev. 3/97)

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. [illegible] Manifest Doc. No. [illegible]
2. Page 1 of 1

Information within heavy bold line is not required by Federal Law.

A. NYG0731907

B. Generator's ID [illegible]

C. State Transporter's ID [illegible]

D. Transporter's Telephone (516) [illegible]

E. State Transporter's ID

F. Transporter's Telephone ( )

G. State Facility ID [illegible]

H. Facility Telephone (518) [illegible]

3. Generator's Name and Mailing Address
Sulzer Metco
1101 Prospect Ave., Westbury, NY 11590

4. Generator's Telephone Number (516) 338-3337

5. Transporter 1 (Company Name) Chemical Pollution Control Inc.
6. US EPA ID Number [illegible]

7. Transporter 2 (Company Name)
8. US EPA ID Number

9. Designated Facility Name and Site Address
Chemical Pollution Control Inc.
110 Beach Beach Street
Ave Beach, NY 11590

10. US EPA ID Number [illegible]

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Corrosive solid, n.o.s. (Powder Metal Alloy)	001	DT	00020	G	EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
a 1000
b
c
d

K. Handling Codes for Wastes Listed Above
a [illegible]
b
c
d

15. Special Handling Instructions and Additional Information
Emergency Response 516-338-3337
D002 D001

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
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Printed/Typed Name | Signature | Mo. | Day | Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Mo. | Day | Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Mo. | Day | Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name | Signature | Mo. | Day | Year

COPY 8 — Generator — Retained by Generator

P2SUL006967

CHEMICAL POLLUTION CONTROL, INC. OF NEW YORK - A PHILIP SERVICES CORPORATION COMPANY

NOTIFICATION FOR WASTES RESTRICTED FROM LAND DISPOSAL

Generator Name: SULZER METCO Manifest # K60731807 Line Item # (s) 1/A

1) **Identify** by placing the line item number(s) in the corresponding box(es) which wastes are wastewaters or non-wastewaters according to the definition in 6 NYCRR 376.1(b)(1)(vi) Wastewater____ Non-wastewater X

2) **Identify** all of the NY State/USEPA waste codes* and subcategories that apply to this shipment, as defined by 6 NYCRR 371 / 6 NYCRR 376 / 40 CFR 261/40 CFR 268.

*For waste streams which carry the waste codes D001, D002 or D012 through D043, the Underlying Hazardous Constituents (UHC) found in 40 CFR 268.48 must be identified. Include a copy of the Underlying Hazardous Constituents (U.H.C.) Form or list the U.H.C. on this form for the waste stream. If the waste requires identification of the U.H.C. but none are present, place an 'X' in the space provided under 'No UHC'.
*For waste where the NY 376 regulations are more stringent include either a completed NY 376 attachment indentifying the constituents regulated under NY 376 or list the information in the section provided below.

Line Item	Waste Code	Description	No UHC	If NY 376 is more restrictive list the applicable treatment level or technology next to the applicable NY 376 section.		
A	D002		X	376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)

3) **List the line item number next to the applicable category.**

A **A. RESTRICTED WASTE REQUIRES TREATMENT**
This waste must be treated to the applicable standards set forth in 6 NYCRR 376, 40 CFR 268.32 or RCRA 3004(d).

___ **B. RESTRICTED WASTE IS SUBJECT TO A VARIANCE**
This waste is subject to exemption from a prohibition on the type of land disposal utilized for the waste, such as a case-by-case extension under 268.5, an exemption under 268.6, or a nationwide capacity variance [see 268.7(a)(3)]. All variances are regulated under 6 NYCRR 376.1(a)(5).
Please list the date the waste is subject to the prohibitions____

___ **C. LAB PACK QUALIFYING FOR ALTERNATIVE TREATMENT UNDER 6 NYCRR 376.4(C)/40 CFR 268.42(C)**
This waste contains wastes listed in 6 NYCRR 376, Appendix 38 and 39, as applicable.
"I certify under penalty of law that I personally have examined and am familiar with the waste and that the lab pack contains only wastes which have not been excluded under appendix IV to 40 CFR 268 or solid wastes not subject to regulation under 40 CFR 261. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."

4) **Identify** the line item(s) in the corresponding space(s) below for which attachments are included in this notification by writing in the line item number next to the applicable attachment.

____ U.H.C. ____ NY376 ____ ANALYSIS ____ OTHER (SPECIFY) ____

Waste analysis is attached where available, otherwise, the information contained herein is based upon my thorough knowledge of the waste(s).
I hereby certify that I believe that the information I submitted is true, accurate and complete.

Signature Michael L. Tech Title EHS Date 5 6 98

(Rev. 5/95)

CHEMICAL POLLUTION CONTROL Inc.

For A Safer Environment

120 South Fourth Street • Bay Shore, NY 11706

(516) 586-0333

A 21st CENTURY Environmental Management Inc., Company

DRIVER'S REMOVAL LIST

A FINAL INVOICE WILL FOLLOW

Permit #_____

EPA-NYDO82785429

N.Y. D.E.C. 1A-042 • N.J. D.E.P. 5371AL

Conn. D.E.P. CTHW 163 • Mass. 159

Customer # 3325

SULZER METCO

Date: 5 6 90

Customer P.O. #:

Manifest #: 0731907 [illegible]

Terms: Net 10 Days

Driver: MS

QUANTITY	STREAM CODE	PRICE	REMOVAL & DISPOSAL	AMOUNT
3	B			
1	K			
1	O			
1	M			
			Tax	
			TRANSPORTATION	
			EMPTY DRUMS DELIVERED	
			Total	

2SUL006909

P 341 831 094

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail *(See reverse)*

Sent to STATE OF NEW YORK DEPT ENV. CONSERVATION	
Street & Number HAZ WASTE MANIFEST PO BOX 12820	
Post Office, State, & ZIP Code ALBANY, NY 12212	
Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form **3800**, April 1995

Fold at line over top of envelope to the right of the return address

CERTIFIED

P 341 831 094

MAIL

Is your RETURN ADDRESS completed on the reverse side?

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
STATE OF NEW YORK
DEPT OF ENVIRONMENTAL CONSERVATION
DIV OF SOLID & HAZARDOUS MATERIALS
MANIFEST SECTION
PO BOX 12820
ALBANY NY 12212

4a. Article Number
P 341 831 094

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

5. Received By: *(Print Name)*

6. Signature: *(Addressee or Agent)*
X

7. Date of Delivery

8. Addressee's Address *(Only if requested and fee is paid)*

PS Form **3811**, December 1994 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
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2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
STATE OF NEW YORK
DEPT OF ENVIRONMENTAL CONSERVATION
DIV OF SOLID & HAZARDOUS MATERIALS
MANIFEST SECTION
PO BOX 12820
ALBANY NY 12212

4a. Article Number
P 341 831 094

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

5. Received By: *(Print Name)* Peter Hatem

6. Signature: *(Addressee or Agent)*
X

7. Date of Delivery
MAY 18 1998

8. Addressee's Address *(Only if requested and fee is paid)*

PS Form **3811**, December 1994 Domestic Return Receipt

Thank you for using Return Receipt Service.

P2SUL006970

NYC 568281-3

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4/87)

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Document No.

2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number NYC 568281-3

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. | c.

b. | d.

K. Handling Codes for Wastes Listed Above

a. | c.

b. | d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

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Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

COPY 5-Generator-Mailed by TSD facility

NYC 568281-3
2-118-08

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4/97)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No.: NYD 057731663
Manifest Document No.: 45724
2. Page 1 of 1
Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address
SULZER METCO (US), INC
325 DUFFY AVE
HICKSVILLE NY 11808
4. Generator's Phone (516 338-2517)

A. State Manifest Document Number: NYC 568281-3
B. Generator's ID: SAME
C. State Transporter's ID: 44/3272
D. Transporter's Telephone: 516 842-6311
E. State Transporter's ID
F. Transporter's Telephone ( )
G. State Facility ID
H. Facility's Telephone: 516 842-6311

5. Transporter 1 (Company Name): SAFETY-KLEEN SYSTEMS, INC
6. US EPA ID Number: ILD 984908202
7. Transporter 2 (Company Name)
8. US EPA ID Number
9. Designated Facility Name and Site Address: 211808
SAFETY-KLEEN SYSTEMS, INC
80 SEABRO
NO AMITYVILLE, NY 11701
10. US EPA ID Number: NYD 000708198

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a. HAZARDOUS WASTE, LIQUID, N.O.S. 9 NA3082 PG III (D039)(ERG#171) AQUEOUS PARTS WASHER SOLUTION	1	DM	20	G	EPA D039 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
a. | c.
b. | d.

K. Handling Codes for Wastes Listed Above
a. T | c.
b. | d.

15. Special Handling Instructions and Additional Information
*
EMERGENCY RESP#1-800-468-1760 24HR
9927 97354696 P45724 2118081500 01

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Bill Bouchard
Signature: B. Bouchard
Mo. Day Year: 07 06 95

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: Eugene Chapel
Signature
Mo. Day Year: 07 06 95

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name
Signature
Mo. Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name
Signature
Mo. Day Year

A: 10070 B: C: D:

COPY 3-Disposer State-mailed by generator

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

NYC 568281 3

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4/97)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Document No.

2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number: NYC 568281 3

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. | c.

b. | d.

K. Handling Codes for Wastes Listed Above

a. | c.

b. | d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR,** if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford

Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

COPY 8-Generator-retained by generator

P2SUL008497

K54474-R5732 SAFETY-KLEEN 06/14/99 PAGE: 1
LOCATION: 211808 LDR NOTIFICATION FORM 19:58:56

GENERATOR NAME: SULZER METCO (US), INC MANIFEST NO.: NJC5682813
OR SALES SERVICE NO.: 45724

CUST#: 2-118-08-1500

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01A SK PROFILE NO.: 0000
SKDOT#: 0010070

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D039

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSITITUENT NOTIFICATION - LEGEND CONSITITUENT#NONE

N. a.

N O T E S

EXP NOTICE: THIS LDR EXPIRES ON 12/31/1999.

B. Bouchard — Bill Bouchard MGR — 07 / 08 / 99

GENERATOR'S AUTHORIZED SIGNATURE — NAME & TITLE (PRINTED OR TYPED) — DATE

SEQ#: 2012 LOC: 211808 TERR: 01 REF#: 45724 SW: 9927

TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFE

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
NYSDEC
P.O.BOX 12820
ALBANY,N.Y. 12212

4a. Article Number
Z 593 810 820

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: *(Print Name)*

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature: *(Addressee or Agent)*
X

PS Form **3811**, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 593 810 820

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail *(See reverse)*

Sent to NYSDEC	
Street & Number P.O. BOX 12820	
Post Office, State, & ZIP Code ALBANY, N.Y.12212	
Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form 3800, April 1995

Fold at line over top of envelope to the right of the return address

CERTIFIED

Z 593 810 820

MAIL

P2SUL008499

CleanVenture/CycleChem

CVCC 122772

The Environmental Services Source

NON-HAZARDOUS SOLID WASTE

BILL OF LADING

24 Hour Emergency Number (908) 354-0210

Generator's Name and Mailing Address: SULZER METCO US INC
1101 PROSPECT AVE
WESTBURY, NY 11590
Generator's Phone ((516) 338-2417

BOL

SAME

Transporter 1 Company Name: CLEAN VENTURE INC.

State Trans. ID-NJDEPE 16755

Decal No.-

Transporter 2 Company Name:

Transporter's Phone ((908) 355-5800

Designated Facility Name and Site Address: Cycle Chem Inc.
217 South First Street
Elizabeth, NJ 07206

10. US EPA ID Number: NJD002200046

State Trans. ID-NJDEPE

Decal No.-

Transporter's Phone ( )

Facility's Phone ((908) 355-5800

GENERATOR

	US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group)	Containers No.	Containers Type	Total Quantity	Unit Wt/Vol	Waste No.
a.	NON REGULATED MATERIAL, (MAGNESIUM OXIDE, TITANIUM OXIDE) Non-RCRA Non-DOT	1	D M	329	~~G~~ P	ID27
b.	NON REGULATED MATERIAL Non-RCRA Non-DOT	2	D M	651	~~G~~ P	ID27
c.	UNIVERSAL WASTE LAMPS Non-RCRA Non-DOT	1	C F	30	P	
d.	NON REGULATED MATERIAL (WATER, OIL) Non-RCRA Non-DOT	1	D M	442	~~G~~ P	ID72

J. Additional Descriptions for Materials Listed Above

a.

b.

c.

d.

CCI Generator # and Product Codes: 945948/-1/89646/235503 (1)PC02-5 METAL OXIDES & CERAMIC POWDERS-SOLID (2)PC02-13 LUCITE-POLY METHYL METHACRYLATE (3)SR2-39 STRAIGHT FLUORESCENT TUBES FOR RECLAIM (4)REM002-43 WATER/ OIL

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and are non-hazardous by USEPA & applicable state regulations.

PLACARDS REQUIRED

PLACARDS SUPPLIED ☐ YES ☐ NO- FURNISHED BY CARRIER

Printed/Typed Name: Jim Kouvaelis | Signature: x | Month Day Year: 08/19/08

TRANSPORTER

Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Eula Howard | Signature | Month Day Year: 08/19/08

Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest.

Printed/Typed Name | Signature | Month Day Year

SIGNATURE AND INFORMATION *MUST* BE LEGIBLE ON ALL COPIES

COPY 1 - WHITE - GENERATOR COPY 2 - PINK - TRANSPORTER COPY 3 - BLUE - CycleChem COPY 4 - CANARY - FACILITY

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21. Generator ID Number

22. Page 2 of 2

23. Manifest Tracking Number CVC122772

24. Generator's Name SULZER METCO US INC
1101 PROSPECT AVE
WESTBURY, NY 11590

25. Transporter _____ Company Name — U.S. EPA ID Number

26. Transporter _____ Company Name — U.S. EPA ID Number

27a. HM	27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	28. Containers No.	28. Containers Type	29. Total Quantity	30. Unit Wt./Vol.	31. Waste Codes
	(1) NON REGULATED MATERIAL (OILY SOAP) Non-RCRA Non-DOT	1	D M	516	~~G~~ P	D072
	(2) Chemical Process Solid Non-RCRA Non-DOT	8	D M	5413	~~G~~ P	D027
	(3) Chemical Process Solid NON DOT NON RCRA	9	D M	6165	~~G~~ P	D027

32. Special Handling Instructions and Additional Information: SOAP (2)PC06-48 DUST COLLECTOR WASTE (3)PC01-32 WET METAL/CERAMIC POWDER

GENERATOR

TRANSPORTER

33. Transporter _____ Acknowledgment of Receipt of Materials
Printed/Typed Name: Kevin Howard — Signature: Kevin Howard — Month 08 Day 19 Year 08

34. Transporter _____ Acknowledgment of Receipt of Materials
Printed/Typed Name — Signature — Month — Day — Year

DESIGNATED FACILITY

35. Discrepancy

36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

EPA Form 8700-22A (Rev. 3-05) Previous editions are obsolete

GENERATOR'S INITIAL COPY

Instructions—Continuation Sheet
U.S. EPA Form 8700-22A

Read all instructions before completing this form. This form has been designed for use on a 12-pitch (elite) typewriter; a firm point pen may also be used—press down hard.

This form must be used as a continuation sheet to U.S. EPA Form 8700-22 if:

- More than two transporters are to be used to transport the waste; or
- More space is required for the U.S. DOT descriptions and related information in Item 9 of U.S. EPA Form 8700-22.

Federal regulations require generators and transporters of hazardous waste and owners or operators of hazardous waste treatment, storage, or disposal facilities to use the uniform hazardous waste manifest (EPA Form 8700-22) and, if necessary, this continuation sheet (EPA Form 8700-22A) for both interstate and intrastate transportation.

I. Instructions for Generators

Item 21. Generator's ID Number

Enter the generator's U.S. EPA twelve digit identification number or, the State generator identification number if the generator site does not have an EPA identification number.

Item 22. Page ___

Enter the page number of this Continuation Sheet.

Item 23. Manifest Tracking Number

Enter the Manifest Tracking number from Item 4 of the Manifest form to which this continuation sheet is attached.

Item 24. Generator's Name—

Enter the generator's name as it appears in Item 5 on the first page of the Manifest.

Item 25. Transporter—Company Name

If additional transporters are used to transport the waste described on this Manifest, enter the company name of each additional transporter in the order in which they will transport the waste. Enter after the word "Transporter" the order of the transporter. For example, Transporter 3 Company Name. Also enter the U.S. EPA twelve digit identification number of the transporter described in Item 25.

Item 26. Transporter—Company Name

If additional transporters are used to transport the waste described on this Manifest, enter the company name of each additional transporter in the order in which they will transport the waste. Enter after the word "Transporter" the order of the transporter. For example, Transporter 4 Company Name. Each Continuation Sheet can record the names of two additional transporters. Also enter the U.S. EPA twelve digit identification number of the transporter named in Item 26.

Item 27. U.S. D.O.T. Description Including Proper Shipping Name, Hazardous Class, and ID Number (UN/NA)

For each row enter a sequential number under Item 27b that corresponds to the order of waste codes from one continuation sheet to the next, to reflect the total number of wastes being shipped. Refer to instructions for Item 9 of the manifest for the information to be entered.

Item 28. Containers (No. And Type)

Refer to the instructions for Item 10 of the manifest for information to be entered.

Item 29. Total Quantity

Refer to the instructions for Item 11 of the manifest form.

Item 30. Units of Measure (Weight/Volume)

Refer to the instructions for Item 12 of the manifest form.

Item 31. Waste Codes

Refer to the instructions for Item 13 of the manifest form.

Item 32. Special Handling Instructions and Additional Information

Refer to the instructions for Item 14 of the manifest form.

CleanVenture/CycleChem CVCC 122772

The Environmental Services Source

NON-HAZARDOUS SOLID WASTE

WO# 89646

BILL OF LADING

 24 Hour Emergency Number (908) 354-0210

Generator's Name and Mailing Address: SULZER METCO US INC
1101 PROSPECT AVE
WESTBURY, NY 11590
Generator's Phone ((516) 338-2417

BOL

SAME

Transporter 1 Company Name: CLEAN VENTURE INC.
State Trans. ID-NJDEPE 16755
Decal No.-
Transporter's Phone ((908) 355-5800

Transporter 2 Company Name:
State Trans. ID-NJDEPE
Decal No.-
Transporter's Phone ( )

Designated Facility Name and Site Address: Cycle Chem Inc.
217 South First Street
Elizabeth, NJ 07206
10. US EPA ID Number: NJD002200046
Facility's Phone ((908) 355-5800

	US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group)	Containers No.	Containers Type	Total Quantity	Unit Wt/Vol	Waste No.
a.	NON REGULATED MATERIAL, (MAGNESIUM OXIDE, TITANIUM OXIDE) Non-RCRA Non-DOT	1	D.M	329	~~G~~ P	ID27
b.	NON REGULATED MATERIAL Non-RCRA Non-DOT	2	D M	651	~~G~~ P	ID27
c.	UNIVERSAL WASTE LAMPS Non-RCRA Non-DOT	1	C F	30	P	
d.	NON REGULATED MATERIAL (WATER, OIL) Non-RCRA Non-DOT	1	D M	442	~~G~~ P	ID72

J. Additional Descriptions for Materials Listed Above

a.

b.

c.

d.

SULZER METCO (US) INC
SEP 02 2008
EHS DEPARTMENT

CCI Generator # and Product Codes: 945948/-1/89646/235503 (1)FC02-5 METAL OXIDES & CERAMIC POWDERS-SOLID (2)FC02-13 LUCITE-POLY METHYL METHACRYLATE (3)SR2-39 STRAIGHT FLUORESCENT TUBES FOR RECLAIM (4)REM002-43 WATER/ OIL

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and are non-hazardous by USEPA & applicable state regulations.

PLACARDS REQUIRED — PLACARDS SUPPLIED ☐ YES ☐ NO- FURNISHED BY CARRIER

GENERATOR

Printed/Typed Name: Jim Kouvelis — Signature — Month Day Year: 08/19/08

TRANSPORTER

Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Kevin Howard — Signature — Month Day Year: 08/19/08

Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest.

Printed/Typed Name: Mylene Gonzalez — Signature — Month Day Year: 08/19/08

SIGNATURE AND INFORMATION *MUST* BE LEGIBLE ON ALL COPIES

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21. Generator ID Number

22. Page 2 of 2

23. Manifest Tracking Number CYCC122772

24. Generator's Name SULZER METCO US INC
1101 PROSPECT AVE
WESTBURY, NY 11590

25. Transporter _____ Company Name — U.S. EPA ID Number

26. Transporter _____ Company Name — U.S. EPA ID Number

27a. HM	27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	28. Containers No.	28. Containers Type	29. Total Quantity	30. Unit Wt./Vol.	31. Waste Codes
	(1) NON REGULATED MATERIAL (OILY SOAP) Non-RCRA Non-DOT	1	D M	516	~~G~~ P	ID72
	(2) Chemical Process Solid Non-RCRA Non-DOT	8	D M	5413	~~G~~ P	ID27
	(3) Chemical Process Solid NON DOT NON RCRA	9	D M	6165	~~G~~ P	ID27

32. Special Handling Instructions and Additional Information (1)PC04-48 WATER, OIL, & SOAP (2)PC06-48 DUST COLLECTOR WASTE (3)PC01-52 WET METAL/CERAMIC POWDER

GENERATOR

TRANSPORTER

33. Transporter _____ Acknowledgment of Receipt of Materials
Printed/Typed Name: Kevin Howard — Signature: Kevin Howard — Month 08 Day 19 Year 08

34. Transporter _____ Acknowledgment of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

35. Discrepancy

36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

EPA Form 8700-22A (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

WASTE DRUM INVENTORY

WASTE COMPANY: Cycle Chem DATE: 8/19/08

DRUM #	PROFILE #	DESCRIPTION	WEIGHT	COMMENTS
1	PC06-48	Dust Collector	663	404, 405, 406
2	" "	" "	667	" "
3	PC01-52	Wet metal/ceramic Powder	767	OVENS
4	"	" " "	738	"
5	"	" " "	720	"
6	"	" " "	723	"
7	"	" " "	792	"
8	"	" " "	837	"
9	"	" " "	781	"
10	"	" " "	807	"
11	"	" " "	804	"
12	PC06-48	Dust Collector	386	404, 405, 406
13	"	" "	422	" " "
14	REMOOL-43	water/oil	442	3000329
15	PC04-46	Water/oil/Soap	576	3000329
16	PC06-48	Dust Collector	309	404 405 406
17	PC06-48	Dust Collector	1198	" " "
18	PC02-13	Lucite (IN OVEN AREA)		OVENS
19	PC02-13	Lucite		OVENS
20	SR-39	Flourescent Bulbs	30	Fixtures
21	ST9-8	Mixed Spent Acid		LAB (VIC)
22	PC02-5	Metal Oxides Ceramic Powder		LAB (WALTER)

Form: Waste Drum Inventory.xls

Clean Venture, Inc. *201 South First Street, Elizabeth, NJ 07206*
PH (908) 355-5800; FX (908) 355-0344

Trip Ticket #: TTEL-515
Job Date: 8/19/2008

Driver: Kevin Howard
Tractor #: ST114/48 Drum w/liftgate
Trailer #:
Beginning of Trip Date:
End of Trip Date:
Beginning of Trip Time:
End of Trip Time:
Beginning of Trip City/State: 11752 Cl-2 NJ
End of Trip City/State: 11799 Westbury NJ
Beginning Odometer Reading:
Ending Odometer Reading:
Total Trip Miles:
Total Hours on Duty:
Account Name: Cycle Chem - Elizabeth (I)
CCI Broker:
MAS200 #: 0000100
Contract:
Site Name: Sulzer Metco US Inc
Site Street Address: 1101 Prospect Ave
Site Street Address:
Site City, State, Zip: Westbury, NY, 11590
Site Contact: Jim Kourkoumelis
Site Contact Phone Number: 516-338-2417
CVI05 Job #: TR6134
Customer Reference #: NA
SITE DATE:
TIME IN: 0830
TIME OUT: 09:00
Site Representative Name:
Signature:
Project Description/Notes:

Number of Drums/Containers Picked Up: 24
Number of Gallons:
Helper Yes/No:

Destination Name: CCI
Representative Name:
Signature:
Destination Address:
City:
State:
Zip:
DESTINATION DATE:
TIME IN:
TIME OUT:
Manifest/BOL #: 12272
Manifest/BOL #: 001028600
Manifest/BOL #:
Supplies Quantity:
Description:

ROLL OFF SECTION: - Box #: Drop Off_____ Pick-Up_____ Live Load_____
Condition of Roll Off Equipment (Circle all that apply)
Bottom Rail/Top Rail/Ribs
Tailgate/Hinges/Ratchets/Rollers
Tarp/Plastic Liner
 # Of Bows
 # Of Straps
Comments:
Destination Name: **Representative Name:** **Signature:**
DESTINATION DATE **TIME IN** **TIME OUT** **Manifest/BOL#:** **Manifest/BOL#:**

ROLL OFF SECTION: - Box #: Drop Off_____ Pick-Up_____ Live Load_____
Condition of Roll Off Equipment (Circle all that apply)
Bottom Rail/Top Rail/Ribs
Tailgate/Hinges/Ratchets/Rollers
Tarp/Plastic Liner
 # Of Bows
 # Of Straps
Comments:
Destination Name: Representative Name: Signature:
DESTINATION DATE **TIME IN** **TIME OUT** **Manifest/BOL#:** **Manifest/BOL#:**

ROLL OFF SECTION: - Box #: Drop Off_____ Pick-Up_____ Live Load_____
Condition of Roll Off Equipment (Circle all that apply)
Bottom Rail/Top Rail/Ribs
Tailgate/Hinges/Ratchets/Rollers
Tarp/Plastic Liner
 # Of Bows
 # Of Straps
Comments:
Destination Name: **Representative Name:** **Signature:**
DESTINATION DATE **TIME IN** **TIME OUT** **Manifest/BOL#:** **Manifest/BOL#:**

Mileage/Toll History (Record all Miles in Every State)

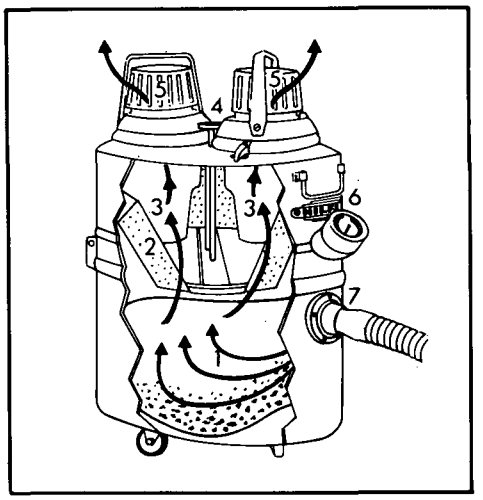
State	Number of Miles	Fuel Purchased in State?	Gallons Purchased	Price Per Gallon	Total Fuel Cost

This is not a DOT document. This is a driver time sheet.

White/Office Canary/Billing Pink/Driver Goldenrod/Customer

Nilfisk GS 82 Features

1 This first stage of filtration captures the bulk of collected debris in a metal container. Or an optional two-ply 12 gallon disposable paper bag can be installed for more secure dust-free disposal.
2 Extra-large main filter assures a steady, even airflow which extends filter life and eliminates premature clogging.
3 This optional microfilter, a final step in pre-filtration, protects the motor and acts as a barrier to even bacteria-sized particulates.
4 Shaking this filter agitator handle keeps the main filter free of clogging dust. Maintains the vacuum's maximum suction and filtration efficiency.
5 HEPA filter assures that 99.97% of all ultrafine particulates, toxic and nuisance, are retained—down to and including 0.3 microns. Meets ANSI Z9.2-1971 standards.
6 The manometer measures pressure differential within the vacuum. Tells operator when to shake the filter agitator handle.
7 Ball-joint couplings give 360° freedom of movement without hoses splitting and cracking, and eliminate knots.



Guidelines For Writing Your Purchase Specifications

Motor	1. Motors must be capable of at least 2000 hours of carbon brush life in normal usage; must be interference suppressed so it will not affect electronic equipment; and must include thermo-valves to prevent overheating and burnout. 2. Minimum airflow of 191 cfm. Minimum of 75" water lift, measured with sealed orifice. 3. Noise level should not exceed 70dB(A) measured at a distance of 6½ ft. from the cleaner.
Container	1. Container capacity must be 12 gallons dry bulk and have optional disposable paper bag system. 2. Main filter shall be cleaned by an external shaking device to prevent operator's exposure to collected dust. 3. Optional manometer will alert the operator to the need for cleaning the main filter.
Hose	1. Hose must have ball-joint connections at both ends to eliminate stress and prevent cracking. 2. Hose should be made of smooth-lined, steel reinforced neoprene to reduce possibility of blockage.
Filtration	1. Vacuum must have up to four-stage filtration capability including optional microfilters and HEPA. 2. Microfilters must be 99.5% efficient at 2 microns. 3. HEPA filter must be 99.97% efficient at 0.3 microns in particle size and must mount on motor to prevent air by-pass. All HEPA filters must be individually DOP-tested and certified. HEPA filters must have a normal service life of not less than one year.
Warranty	All equipment must be covered by a two-year warranty against defects in workmanship and materials. Replacement parts must be available for 20 years if the machine is withdrawn from production.

GS 82 Specifications

Motor type, primary cooled	GSD/GSJ	Paper bag capacity, gallons dry bulk	12
Voltage, volts	115/220	Filter area, square inches*	3,447
Current draw, amps	12/8	Height, inches	30½
Watts consumed, watts	1400	Width, inches	18½
Waterlift, inches	75	Length, inches	27½
Air flow, cubic ft./min.	191	Weight without accessories, lbs.	65
Tank capacity, gallons dry bulk	12	Sound level, dB(A) at 6½ ft. from vacuum	70

Filter type: standard cotton, optional dralon or Gore-Tex®**

Optional accessories: HEPA filter, manometer, paperbag system, blower adapter (220 volt only), sound suppressor, microfilter.

*filter area includes paper bag, main filter, microfilter, HEPA

**Gore-Tex is a registered trademark of W.L. Gore & Assoc.

NILFISK

Dust Collection Specialists Since 1910.

NILFISK OF AMERICA, INC., 300 Technology Drive, Malvern, PA 19355, (215) 647-6420

Printed in U.S.A.
PS107 4/89

Since this product is continually being improved, these specifications may change without notice.

5000C

Form designed for use on elite (12-pitch) typewriter.

NON-HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No. N.Y.D.0.5.7.7.3.1.6.6.3	Manifest Document No.	2. Page 1 of 1	Same

3. Generator's Name and Mailing Address
SULZER METCO
325 DUFFY AVENUE, HICKSVILLE, NY 11801

PX3646

4. Generator's Phone (516) 338-2570

5. Transporter 1 Company Name	6. US EPA ID Number	A. Transporter's Phone
CHEMICAL POLLUTION CONTROL INC.	N.Y.D.0.8.2.7.8.5.4.2.9	516-586-0333
7. Transporter 2 Company Name	8. US EPA ID Number	B. Transporter's Phone

9. Designated Facility Name and Site Address	10. US EPA ID Number	C. Facility's Phone
CHEMICAL POLLUTION CONTROL INC. 120 SOUTH FOURTH STREET BAY SHORE, NY 11706	N.Y.D.0.8.2.7.8.5.4.2.9	516-586-0333

11. Waste Shipping Name and Description	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. Petroleum oil 'not listed under RCRA'	007	DF	00360	G
b. water soluable oil 'not listed under RCRA'	002	DF	00110	G
c. speedy-DRY/oil 'not listed under RCRA'	001	DM	00400	P
d. verlin Turnings (plastic milling turnings) 'not listet under RCRA	013	DM	02000	P

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above
A
B ORG
C HMD
D HMD

15. Special Handling Instructions and Additional Information
11 A 3376 A
B 3376 B
C 3376 C
D 3376 J

16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.

Printed/Typed Name	Signature	Month	Day	Year
x Bill Bouchard	x B Bouchard	06	04	98

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
TD Snoyd		06	04	98

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
FRANK FAZIO		06	04	98

GENERATOR — TRANSPORTER — FACILITY

Printed by J. J. KELLER & ASSOCIATES, INC. Neenah, WI 54957-0368

ORIGINAL – RETURN TO GENERATOR

12-BLS-C5 Rev. 1/97

P2SUL005380

Please print or type
(Form designed for use on elite (12-pitch) typewriter)

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. N.Y.D.0.5.7.7.3.1.6.6.3
Manifest Document No.
2. Page 1 of 1
Same

3. Generator's Name and Mailing Address
SULZER METCO
325 DUFFY AVENUE, HICKSVILLE, NY 11801
4. Generator's Phone (516) 338-2570

PX 3646

5. Transporter 1 Company Name
CHEMICAL POLLUTION CONTROL INC.
6. US EPA ID Number N.Y.D.0.8.2.7.8.5.4.2.9
A. Transporter's Phone 516-586-0333

7. Transporter 2 Company Name
8. US EPA ID Number
B. Transporter's Phone

9. Designated Facility Name and Site Address
CHEMICAL POLLUTION CONTROL INC.
120 SOUTH FOURTH STREET
BAY SHORE, NY 11706
10. US EPA ID Number N.Y.D.0.8.2.7.8.5.4.2.9
C. Facility's Phone 516-586-0333

11. Waste Shipping Name and Description	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. Petroleum oil 'not listed under RCRA'	007	DF	00360	G
b. water soluble oil 'not listed under RCRA'	002	DF	00110	G
c. Spent wash/oil 'not listed under RCRA'	001	DM	00400	P
d. Metal turnings (plastic coating turnings) 'not listed under RCRA'	003	DM	02000	P

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above
1. [illegible]
2. [illegible]
3. [illegible]

15. Special Handling Instructions and Additional Information
A 3376A
B 3376B
C 3376C
D 3376D

16. **GENERATOR'S CERTIFICATION:** I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.

Printed/Typed Name: X Bill Bouchard
Signature: X B. Bouchard
Month Day Year: 10 6 94

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: T D Sneyd
Signature: [illegible]
Month Day Year: 10 6 94

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.

Printed/Typed Name
Signature
Month Day Year

GENERATOR
TRANSPORTER
FACILITY

Printed by J. J. KELLER & ASSOCIATES, INC.
Neenah, WI 54957-0368

12-BLS-C5 Rev. 1/97

GENERATOR'S COPY

P2SUL005381

ECOLOGY SERVICES, INC.

10220 Old Columbia Road
Columbia, Maryland 21046
(410) 381-2600
1-800-932-7299
Fax (410) 381-2602

September 19, 2002

Peter DiPietrantonio
Sulzer Metro, Inc.
1101 Prospect Ave.
Westbury, NY

RE: Quote for Thoriated tungsten and Zirconium contaminated with natural Uranium and Thorium

Dear Mr. DiPietrantonio:
Ecology Services, Inc. is pleased to provide the following quotation for the packaging and disposal of low-level radioactive wastes from the above referenced facility. This quotation is based on volumes and concentrations per your faxes dated 5/7/02 and 6/11/02.

Item Disposal (processed through RACE, LLC)	Cost	Est. Units	Est. Line Total
55-gallon drum of Zirconium (nat-Th, U-nat) Final disposal via WCS	$175.00	50	$8,750.00
Thoriate tungsten per pound Final disposal via EnviroCare	$4.00	500	$2,000.00
Labor & Materials per shipment	$350.00	1	$350.00
Travel expense	$250.00	1	$250.00
Transportation from generator to processor	$3,600.00	lot	$3,600.00
Estimated Total			$14,950.00

Quote is valid for total shipment described only

All waste must meet the acceptance criteria of Ecology Services, Inc. and any relevant processor and/or disposer. Residual material will be shipped to Waste Control Specialists in Andrews, Texas or EnviroCare of Utah as appropriate for final disposal. Invoice is based on actual units. All containers must be in DOT shippable condition, without external contamination.

ESI will provide a Radiation Worker and Hazardous Waste Operations trained technician to prepare this material for shipment. Pricing includes labeling, manifest preparation, loading, transportation, processing and disposal. ESI will schedule this project on a mutually agreeable date upon receiving your approval.

These prices are valid for thirty days from the date of this quotation. Thank you for providing this opportunity to Ecology Services, Inc. We look forward to providing services to your organization.

Sincerely,

Brenda J. Klug
Account Manager

ECOLOGY SERVICES, INC.

10220 Old Columbia Road
Columbia, Maryland 21046
(410) 381-2600
1-800-932-7299
Fax (410) 381-2602

FACSIMILE TRANSMISSION

COVER SHEET

Date: September 19, 2002

To: Mr. Peter DiPietrantonio, Sulzer Metco (US), Inc., phone:(516) 338-2337

From: Brenda J. Klug, Account Manager

Fax No. (516) 338-2123 No. of Pages: 2 (including cover sheet)

Consolidated quote as requested.

THE INFORMATION IN THIS FACSIMILE TRANSMISSION IS INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY TO WHICH IT IS ADDRESSED, AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL AND EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAW. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, OR THE EMPLOYEE OR AGENT RESPONSIBLE FOR DELIVERING THE MESSAGE TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPYING OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE (410) 381-2600 AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE U.S. POSTAL SERVICE. THANK YOU.

D3875081
PPW 09/22/2004

MARYLAND DEPARTMENT OF THE ENVIRONMENT

2500 Broening Highway Baltimore, Maryland 21224
(410) 631-3344 1-800-633-6101 (within Maryland) http://www.mde.state.md.us

HAZARDOUS WASTE PROGRAM
HAZARDOUS WASTE MANIFEST

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039.

In case of an emergency or spill, immediately call the National Response Center at (800) 424-8802 and the MDE at (410) 631-3400. Nights and Holidays at (410) 974-3551.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD131318651 — Manifest Document No.
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Phone ( ) 516 338-2337

A. State Manifest Document Number: MDC 1025883
B. State Generator's ID: SAME
C. State Transporter's ID: HWH 107194 DC
D. Transporter's Phone: (781) 848-1800
E. State Transporter's ID: HWH DC
F. Transporter's Phone: ( )
G. State Facility ID: A-151
H. Facility's Phone: 410 244 6266

5. Transporter 1 Company Name: Clean Harbors Env Services Inc — 6. US EPA ID Number: MAD032222560
7. Transporter 2 Company Name — 8. US EPA ID Number

9. Designated Facility Name and Site Address
Clean Harbors Of Baltimore Inc
1910 Russell Street
Baltimore, MD, 21230
10. US EPA ID Number: MDD980551360

GENERATOR

11. US DOT Description (Including Proper Shipping Proper Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II	002	DF	00958	P	D002
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

	Haz. Code	Physical State	Specific Gravity	Percentage
a.	C	L	10	100
11a. ERG#154 COPPER CLEANER/CHRONIC ACID				
b.				
c.				
d.				

K. Handling Codes for Wastes Listed Above
a. T c.
b. d.

15. Special Handling Instructions and Additional Information
EMERGENCY PHONE # (800) 483-3718
11a: CH189142 D008 D007 D008 NYDEC:T NYMX006 NJDEP#07259 D002W 17805.

16. GENERATORS CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and Maryland Statutes or Regulation.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR**, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: David Lovelock — Signature — Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date
Printed/Typed Name: Joe Lavoie — Signature — Month Day: 10 5 04

18. Transporter 2 Acknowledgement of Receipt of Materials — Date
Printed/Typed Name — Signature — Month Day

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Clean Harbors has the appropriate permits for and will accept the waste this generator is shipping.
Printed/Typed Name — Signature — Date Month Day

MDC 1025883

EPA Form 8700-22 (9-99)
Previous editions are obsolete.

COPY 8 - GENERATOR: DETACH & RETAIN THIS COPY

OPTIONAL INFORMATION: INSTRUCTIONS

The Hazardous Waste Manifest is designed to track waste from point of generation to final disposal (cradle to grave). In order to accomplish this aim, it is essential that all items on the manifest be completed correctly. Incomplete or incorrect manifests could make you subject to civil and criminal liabilities as specified in the **Annotated Code of Maryland.**

A. State Manifest Document Number: Preprinted number except on continuation sheets. Enter this number on each continuation sheet attached to or part of a manifest.

B. State Generator's I.D. Number: Enter Generator's State I.D. Number if it is different from U.S. EPA I.D. Number.

C. State Transporter's I.D. Number: Enter State Certified Hauler Number, Certified Vehicle Number, followed by Driver Certification Number.

D. Transporter's Phone: Enter a telephone number where an authorized agent of the transporter may be reached in the event of an emergency.

E. State Transporter's I.D. Number: If applicable, enter Certified Hauler Number, Certified Vehicle Number and Driver Certification I.D. Numbers of the second transporter who will transport this waste.

F. Transporter's Phone: If applicable enter a telephone number where an authorized agent of the second transporter may be reached in the event of an emergency.

G. State Facility's I.D. Number: If applicable enter the Facility's State I.D. Number.

H. Facility's Phone: Enter the telephone number of the facility or where an authorized agent of the facility may be reached in the event of an emergency.

I. Waste Number: Enter EPA Hazardous Waste Number, if not RCRA Hazardous, enter State Hazardous Waste Code Numbers.

J. Additional Descriptions for Materials Listed above: Enter EPA Hazardous Codes, physical states, specific gravity if other than one, and if known, the estimated percentages.

Codes for Physical States
S — Solid
L — Liquid
G — Gas
SL — Sludge

EPA Hazardous Codes
I — Ignitable Waste
C — Corrosive Waste
R — Reactive Waste
E — EP Toxic Waste
H — Acute Hazardous Waste
T — Toxic Waste

K. Handling Codes: Enter in this space one of the following handling codes for waste listed above:

Code	Handling Codes
L	Landfill
B	Incineration, heat recovery, burning
T	Chemical or physical treatment
R	Beneficial reuse or recycling
S	Storage

Boxes 1 thru 20 are to be completed using instructions contained in 40 CFR Part 260, 262 and 261 and 49 CFR Parts 171 and 172 Uniform Hazardous Waste Manifest; Joint EPA/DOT Rule Coding for boxes 12 and 14 are indicated below. Instructions for item 19 Discrepancy Indication Space are also listed below.

Table I — Types of Containers

DM = Metal drums, barrels, kegs
DW = Wooden drums, barrels, kegs
DF = Fireboard or plastic drums, barrels, kegs
TP = Tanks portable
TT = Cargo tanks (tank trucks)
TC = Tank cars
DT = Dump Trucks
CY = Cylinders
CM = Metal boxes, cartons, cases (including roll-offs)
CW = Wooden boxes, cartons, cases
CF = Fiber or plastic boxes, cartons, cases
BA = Burlap, cloth, paper or plastic bags

Table II — Units of Measure

G = Gallons (liquids only)
P = Pounds
T = Tons (2000 lbs.)
Y = Cubic yards
L = Liters (liquids only)
K = Kilograms
M = Metric tons (1000 kg)
N = Cubic meters

Item 19: Instructions

The authorized representative of the designated (or alternate) facility's owner or operator must note in this space any significant discrepancy between the waste described on the Manifest and the waste actually received at the facility. Disposal methods not specified in item K above are considered discrepancies and must be reported in this space.

Upon discovering a significant discrepancy, the owner or operator shall attempt to reconcile the discrepancy with the waste generator or transporter (for example, with telephone conversations). If the discrepancy is not resolved within 15 days after receiving the waste, the owner or operator shall immediately submit to the secretary a letter describing the discrepancy and attempts to reconcile it, and a copy of the manifest at issue.

BURDEN DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW., Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

C 282200 1828 00051 W I
LOCATION FAC EP

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0099
RUN DATE: 08/01/88

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/07/87
(5) 11590	(10) REP: A TEICHER 334-1300	PRIOR CO ISSUE DATE 11/16/87
		PRIOR CO EXPIRATION DATE 11/15/88

PAGE 4
CONTINUED FROM PREVIOUS PAGE

FACILITY EMIS-CLASS / PGM-CODE: A2 POINT EMIS-CLASS / PGM-CODE:

EMISSION POINT 00051
(41)UTM-E: 622.2 KM. (42)STACK HEIGHT: 14 FT. (43)EXIT VELOCITY: 52.00 FT/SEC (44)SIC: 3569 (45)AGENCY-CODE-1: C (COUNTY)
(46)UTM-N: 513.4 KM. (47)HT ABV STRUC: FT. (48)EXIT FLOW: 10000.00 ACFM (49)CO FEE: $75.00 (50)AGENCY-CODE-2: C (COUNTY)
(51)GRND ELEV: 139 FT. (52)STK DIAM: 24 IN. (53)EXIT TEMP: 70 DEGR F (54)CO CONDITIONS: 1 3

UNIT I
(55)HOURS/DAY: 2.0 (56)DAYS/YEAR: 200 (57)% OP BY SEASON: 25 25 25 25 (58)SOURCE CODE: 1308 OTHER SURFACE COATIN
(59)BLDG: (60)FLOOR NAME: (61)RULE 1: 212.00 (62)RULE 2:

PROCESS/UNIT DESCRIPTION (72)DESCRIPTION
1. TO ELIMINATE EMISSION POINTS 25, 26, & 36 A NEW DUCT
2. SYSTEM WILL BE INSTALLED CONNECTING THESE THREE POINTS
3. TO A COMMON DUCT. WIRES OR POWDERS ARE SPRAYED TO TEST
4. EQUIPMENT OR MATERIAL. A NEW CARTRIDGE TYPE DUST
5. COLLECTOR WILL BE INSTALLED.
6. COLLECTED DUST WILL BE SOLD AS SCRAP.

CONTROL EQUIPMENT (73)TYPE: 008 FABRIC COLLECTOR (74)MFG: FARR-TENKEY DUST COLLECTOR 40L (75)ID: 51 (76)DATE INSTALLED: 08/85
(77)DISPOSAL METHOD: 06 SOLD (78)USEFUL LIFE: 10 YEARS

AIR CONTAMINANTS	CAS NUMBER	ENV RATING	EMISSIONS ACTUAL	UNIT	HOW DET	PERMISSIBLE	% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR	ANNUAL EMISSIONS (LBS/YEAR) ACTUAL	10x	PERMISSIBLE
ALUMINUM	(085) 07429-90-5	(086) D	(087) .060	(088) 01	(089) 06	(090) .060	(091) 95.0	(092) .060	(093) 24.000	(094) 0	(095) 24.000
IRON OXIDE	(096) 01309-37-1	(097) D	(098) .060	(099) 01	(100) 06	(101) .060	(102) 95.0	(103) .060	(104) 24.000	(105) 0	(106) 24.000
COPPER	(107) 07440-50-8	(108) D	(109) .060	(110) 01	(111) 06	(112) .060	(113) 95.0	(114) .060	(115) 24.000	(116) 0	(117) 24.000
ZINC OXIDE	(118) 01314-13-2	(119) D	(120) .060	(121) 01	(122) 06	(123) .060	(124) 95.0	(125) .060	(126) 24.000	(127) 0	(128) 24.000

SPECIAL CONDITIONS (151)CONDITION 1. AG1 COMPLIANCE

CONTINUED ON NEXT PAGE

GERAGHTY
& MILLER, INC.
Environmental Services

A Heidemij company

March 1, 1995

Jamie Ascher
New York State Department of Environmental Conservation
Division of Hazardous Waste Remediation
SUNY, Building 40
Stony Brook, New York 11790-2356

Agnes Gara
Assistant Sanitary Engineer
New York State Department of Environmental Conservation
SUNY Building 40
Stony Brook, New York 11790-2356

RE: Transmittal of Soil Quality Results from the Metco Facility, 325 Duffys Avenue, Hicksville, New York.

Dear Mr. Ascher and Ms. Gara:

At the request of The Perkin-Elmer Corporation, Geraghty & Miller, Inc. is enclosing one copy of the report detailing the remediation of soils impacted with polychlorinated biphenyls (PCBs) from below a dry well located at the Metco Facility, 325 Duffys Avenue, Hicksville, New York. This work was conducted as specified in the terms and conditions for the sale of Perkin-Elmer's Metco Division to Sulzer.

The scope of work conducted included the removal of approximately 22 cubic yards of soil from below a dry well located in the loading dock area of the site. The soils were removed to a depth of approximately 20 to 22 ft below grade. One post excavation sample was collected and analyzed in the field for total PCBs and one post excavation sample was collected and submitted to IEA laboratories of Monroe Connecticut for confirmatory analyses. As detailed in the attached letter report, the analytical results of the post excavation soil samples indicate that the PCBs detected in the soils remaining on-site are present at concentrations below the NYSDEC Recommended Soil Cleanup Objective of 10 parts per million (ppm) for sub-surface soils.

125 East Bethpage Road • Plainview, New York 11803 • (516) 249-7600 • FAX (516) 249-7610

GERAGHTY & MILLER, INC.

If you have any questions, please contact Victoria Kramer at (516)391-5268, Tom Lobasso at (516)391-5235, or Charles Heinzer of Perkin-Elmer at (203) 762-1491.

Sincerely,

GERAGHTY & MILLER, INC.

Victoria H. Kramer
Senior Scientist\Project Manager

Thomas Lobasso by NV

Thomas Lobasso Jr.
Vice President

CC: Constance Conroy (Sulzer Metco)

VHK:TL:bjm
G:\APROJECT\PERKINEL\NY0747.005\CORRES\ASCH0227.LTR

TigerVac®

THE TIGER'S FAMILY

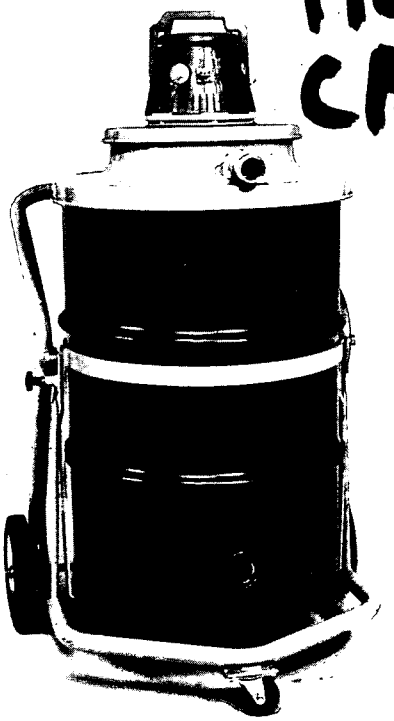
"QUALITY
VACUUM CLEANERS
SINCE 1965"

THE SUPER TWO

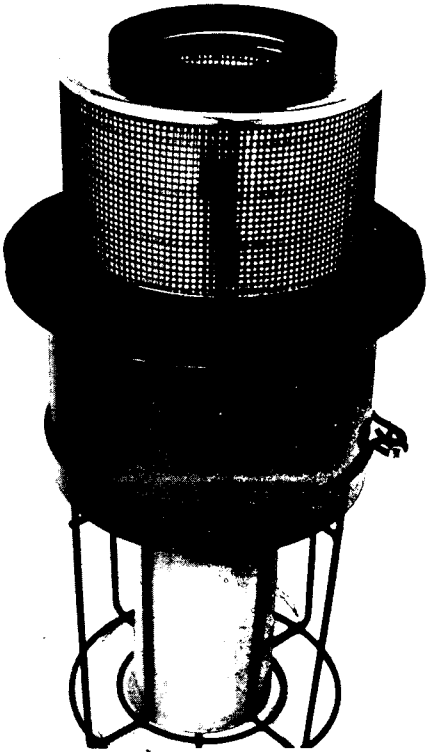
WET & DRY WITH SELF-CLEANING DUST FILTER

THE BIG ONE

TILT CART



Full line of high quality products for Industrial - Commercial - Institutional needs.



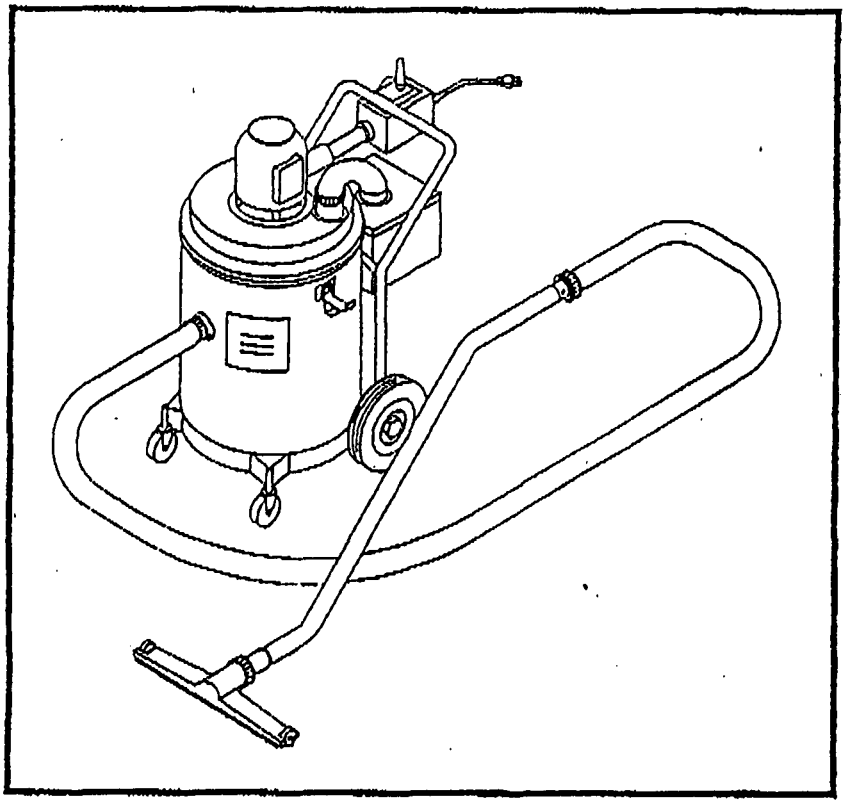
Dangerous materials no problems with the (H.E.P.A.) high efficiency particulate air.

Filters are 99.97% escape-proof at 0.3 microns. Verified by independent test.

TWO-STAGE TOTALLY ENCLOSED MOTOR COMMERCIAL AND INDUSTRIAL VACUUM

HAZARDOUS LOCATION EQUIPMENT

EXPLOSION-PROOF/DUST IGNITION PROOF



OPERATING INSTRUCTIONS

AND

TECHNICAL DATA

CSA® approved for use in CLASS I - GROUP D, CLASS II - GROUP E, CLASS II - GROUP F, and CLASS II - GROUP G, Atmospheres.

TABLE OF CONTENTS

A. - Precautions for Designated substances Page: 1

B. - Ground continuity Page: 1

C. - Operating instructions (dry suction) Page: 2

D. - Operating instructions(wet suction) Page: 2 and 3

E. - Assembling H.E.P.A. housing box Page: 3

F. - Replacing H.E.P.A. filter Page: 3

G. - EXP-1 Applications Page: 4

H. - Grounding instructions Page: 5

I. - Specifications Page: 5

TO ENSURE A SAFE WORKING ENVIRONMENT, CAREFULLY READ THE FOLLOWING INSTRUCTIONS BEFORE OPERATING THE EXP-1 UNIT.

A. **WARNING** : If the EXP-1 unit is used to pick-up designated substances (toxic/hazardous materials) the following precautions must be taken.

1. - EXP-1 unit must be equipped with an HE.P.A. filter.

2. - The clamps on the ends of the hose connecting the EXP-1 air exhaust to the square H.E.P.A. housing box must be mechanically tightened. This will prevent contaminated air from escaping.

3. - Service and operation should only be carried out by trained personel.

4. - Dispose of all collected waste responsibly. Follow government regulations for the disposal of hazardous materials.

B. GROUND CONTINUITY

Each EXPLOSION PROOF/DUST IGNITION PROOF vacuum is supplied with a ground continuity tester. It is highly recommended that each unit be tested for ground continuity before each use.

To verify ground continuity:

1. - Fasten the alligator clip from the ground continuity tester to the ground pin on the EXP-1 electrical power cord. Connect the other end of circuit to the test prod.

2. - Touch any part of the EXP-1 metal power unit with the test prod. The light on the test prod will illuminate. This indicates that there is ground continuity and that the EXP-1 unit is functioning properly.

WARNING : If there is no light on the test prod DO NOT OPERATE UNIT. Refer unit to an AUTHORIZED SERVICE CENTER only.

C. OPERATING INSTRUCTIONS FOR DRY SUCTION ONLY.

1. - Release latches and remove power-head from dust container.

2. - Place the static dissipating self cleaning cloth filter on the dust container, making sure that it's gasket covers the entire circumference of the dust container lip.

3. - Place the EXP-1 power-head on the dust container and fasten latches.

4. - Fasten the static dissipating neoprene hose to the suction intake on the dust collector and attach the necessary tools to the hose.

5. - Operate EXP-1 unit on grounded electrical outlets only.

6. - Operate switch.

D. OPERATING INSTRUCTIONS FOR WET SUCTION.

1. - Release latches and remove power-head from dust container.

2. - Remove static dissipating cloth filter. Rinse-out and dry the inside of dust container and static dissipating neoprene hose.

3. - Place static dissipating nylon mesh filter on the dust container, making sure that it's gasket covers the entire circumference of the dust container lip.

4. - Make sure that the cylindrical aluminium floater is in the slotted aluminium housing. To avoid placing floater upside-down, follow the directions located on the floater.

5. - Place the EXP-1 power-head on the dust container and fasten latches.

6. - Fasten the static dissipating neoprene hose to the suction intake on the dust container and attach the necessary tools to the hose.

7. - Operate EXP-1 unit on grounded electrical outlets only.

OPERATING INSTRUCTIONS FOR WET SUCTION (cont'd)

8. - Operate switch.

9. - Dry the inside of dust container and static dissipating hose after wet suction.

E. ASSEMBLING H.E.P.A. HOUSING BOX

1. - Hook the square H.E.P.A. housing box to the back of the EXP-1 unit on the horizontal drum support bar.

2. - Connect the hose from the H.E.P.A. housing box to the EXP-1 air exhaust.
It is very important that the clamps on both ends of the connecting hose be mechanically tightened. This will ensure that no contaminated air will escape.

F. REPLACING H.E.P.A. FILTER

To replace the absolute filter located in the square H.E.P.A. housing box.

1. - Unlock the latches located on the H.E.P.A. housing box and remove lid.

2. - Remove contaminated filter.

3. - Insert new filter following the directions indicated on the filter itself. The arrow which indicates the passage of air through the filter must point downwards.

4. - Place lid on the square H.E.P.A. housing box and secure it with the latches.

5. - Dispose of contaminated filter according to government regulations.

G. The motors used in the EXP-1 vacuum have been listed by Underwriters Laboratories Inc. in guide PTDR, file E-25653, for use in hazardous locations with respect to the safety of operation as follows:

CLASS I - GROUP D - Atmospheres containing: Gazoline, petroleum, naphta, benzine, butane, propane, alcohol, acetone, benzol, lacquer solvent vapors or natural gas.

CLASS II - GROUP E- Atmospheres containing: Metal dust, including aluminium, magnesium and other commercial alloys

CLASS II - GROUP F- Atmospheres containing: Carbon black, coal or coke dust.

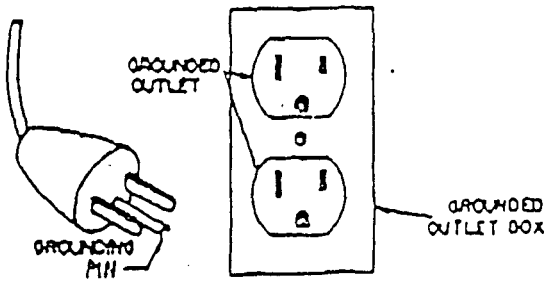
CLASS II - GROUP G- Atmospheres containing: Flour, starch or grain dust.

N.B.: The motors used in the EXP-1 vacuum are designed for use in commercial and industrial vacuum equipment which employs filters to remove dirt from the air-stream before reaching the vacuum fans. Do not operate the EXP-1 vacuum without proper filter system.

H. This vacuum cleaner must be grounded. If it should malfunction or breakdown, grounding provides a path of least resistance for electric current to reduce the risk of electrical shock. This vacuum cleaner is equipped with a cord having an equipment-grounding conductor and an optional grounding plug. The plug must be plugged into an appropriate outlet that is properly installed and grounded in accordance with all local codes and ordinances.

DANGER Improper connection of the equipment-grounding conductor can result in a risk of electric shock. Check with a qualified electrician or service person if you are in doubt as to whether the outlet is properly grounded. Do not modify the plug provided with the vacuum cleaner, if it will not fit the outlet, have a proper outlet installed by a qualified electrician.

This vacuum cleaner is for use on a nominal 120-volt circuit and has a grounding plug that looks like the plug illustrated below. Make sure that the vacuum cleaner is connected to an outlet having the same configuration as the plug. No adaptor should be used with this vacuum cleaner.



I. SPECIFICATIONS

MODEL EXP-1 : 115 Volts, 60 Hz

Water lift : 69"

CFM
@1 1/2" opening: 120

6C

Company Name METCO INC
Site Name Duffy Ave

20. (Continued)

m. Identify any other wastewater or sludge generated by the air pollution control device and indicate the amount discharged, frequency of discharge, and method of disposal.

	Amount (specify units)	Frequency of Discharge	Method of Disposal
Equipment cleanup			
Sludge removal	5 gallons	one/3 months	Storage in 55 gallon drum
Other			Removed by scrap metal recycler

n. Destination of process water discharged from air pollution control device:

_____ Reuse in another operation (specify operation): _____
_____ Discharged to surface water _____ after treatment
_____ without treatment
_____ Discharged to POTW _____ after treatment
_____ without treatment
_____ Holding pond or lagoon with no discharge
✓ Other, specify dump ground

21. Briefly describe any other sources of wastewater at your site, indicate volume generated, and if applicable tell which product or item (as in Question 14) the operation relates to:

	Volume (gallons/yr)	Method of Disposal	Product
Laboratories			
Laundries			
Other			

LR-SMG

LAIDLAW ENVIRONMENTAL SERVICES

Please print or type.

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. / Manifest Document No.: NYD131318651992 57

2. Page 1 of 21

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
SULZER METCO
1101 PROSPECT AVENUE, WESTBURY, NY 11590

4. Generator's Phone (516 338-2337

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: FREEHOLD CARTAGE, INC.

6. US EPA ID Number: NJD054126154

C. State Transporter's ID

D. Transporter's Phone (732) 462-1001

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
SAFETY-KLEEN(TS)INC.
3527 WHISKEY BOTTOM ROAD
LAUREL, MD 20724

10. US EPA ID Number: MDD980554653

G. State Facility's ID: A207

H. Facility's Phone: (301) 939-6000

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	NON-REGULATED MATERIAL		003 ~~006~~	DM	00490	P	NONE
b.	NON-REGULATED MATERIAL		001	DM	00708	P	NONE
c.	NON-REGULATED MATERIAL		006	DM	02493	P	NONE
d.	NON-REGULATED MATERIAL		001	DM	01000	P	NONE

J. Additional Descriptions for Materials Listed Above
Additional EPA Waste Codes a. b. c. d.

K. Handling Codes for Wastes Listed Above
a.SL
b.SL
c.SL
d.SL

15. Special Handling Instructions and Additional Information
Approval Numbers a.6SMG-001 b.6SMG-004 c.6SMG-005 d.6SMG-016

Emergency Contact: 1-800-468-1760 (596) 3E

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Printed/Typed Name: X David Walzak | Signature: David Walzak | Month Day Year: 02 08 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Don Johnson | Signature: Don Johnson | Month Day Year: 02 09 99

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
SECTION 2, CORRECTED AT SAFETY-KLEEN (TS) INC. 2/9/99 JG

20. Facility Owner or Operator: Certification of receipt of materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Joseph E. Gorinossi | Signature: Joseph E. Gorinossi | Month Day Year: 02 09 99

ORIGINAL - RETURN TO GENERATOR

LAIDLAW ENVIRONMENTAL SERVICES

Please print or type.

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD013185251 Manifest Document No. 9925

2. Page 1 of 2

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
SULZER METCO
1101 PROSPECT AVENUE, WESTBURY, NY 11590

4. Generator's Phone (516) 338-2337

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: FREEHOLD CARTAGE, INC.

6. US EPA ID Number: NJD054126154

C. State Transporter's ID

D. Transporter's Phone (732) 462-1001

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
SAFETY-KLEEN(TS)INC.
3527 WHISKEY BOTTOM ROAD
LAUREL, MD 20724

10. US EPA ID Number: MDD980554653

G. State Facility's ID: A207

H. Facility's Phone: (301) 939-6000

GENERATOR

	HM	11. US DOT Description (Including Proper Shipping Name, Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.		NON-REGULATED MATERIAL	003 006	DM	00490	P	NONE
b.		NON-REGULATED MATERIAL	001	DM	00706	P	NONE
c.		NON-REGULATED MATERIAL	006	DM	02493	P	NONE
d.		NON-REGULATED MATERIAL	001	DM	01000	P	NONE

J. Additional Descriptions for Materials Listed Above
Additional RCRA Waste Codes: a. b. c. d.

K. Handling Codes for Wastes Listed Above
a.SL
b.SL
c.SL
d.SL

15. Special Handling Instructions and Additional Information
Approval Numbers: a.6SMG-001 b.6SMG-004 c.6SMG-005 d.6SMG-016

Emergency Contact: 1-800-468-1760 (596) JE

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Printed/Typed Name: X David Wilson | Signature | Month 02 Day 08 Year 99

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

GENERATOR COPY

P2SUL007857

LAIDLAW ENVIRONMENTAL SERVICES

Please print or type.

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NJPDD[illegible] Manifest Document No. [illegible]

2. Page 1 of 2

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
SULZER METCO
1101 PROSPECT AVENUE, WESTBURY, NY 11590

4. Generator's Phone (516) 338-2337

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: FREEHOLD CARTAGE, INC.

6. US EPA ID Number: NJD064126162

C. State Transporter's ID

D. Transporter's Phone (732) 462-1001

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
SAFETY-KLEEN(TS)INC.
3527 WHISKEY BOTTOM ROAD
LAUREL, MD 20724

10. US EPA ID Number: MDD065645663

G. State Facility's ID: A207

H. Facility's Phone: (301) 939-6000

GENERATOR

	HM	11. US DOT Description (Including Proper Shipping Name, Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.		NON-REGULATED MATERIAL	005 006	DM	00110	P	NONE
b.		NON-REGULATED MATERIAL	001	DM	00700	P	NONE
c.		NON-REGULATED MATERIAL	006	DM	00073	P	NONE
d.		NON-REGULATED MATERIAL	001	DM	01000	P	NONE

J. Additional Descriptions for Materials Listed Above
Additional EPA Waste Codes
a.
b.
c.
d.

K. Handling Codes for Wastes Listed Above
a. SL
b. SL
c. SL
d. SL

15. Special Handling Instructions and Additional Information
Approval Numbers a. 6SNG-001
b. 6SNG-004
c. 6SNG-005
d. 6SNG-016

Emergency Contact: 1-800-468-1760 (596) 3E

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Printed/Typed Name | Signature | Month Day Year 0 2 0 9 9 1

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

FILE COPY OR STATE COPY

P2SUL007858

Safety-Kleen.

CUSTOMER NO.	BILLING NO.	SALESPERSON	DATE
PICKUP DATE	CLIENT P.O.	DISP. SITE SWO	COUNTY

BILLING CUSTOMER

PICK-UP CUSTOMER AND ADDRESS

CHEMIST/DRIVER

TRANSPORTATION (04000)	UNIT/PRICE 30/55/3-5	UNIT/PRICE 85	EXTENSION
0-50 MILES			
51-100 MILES			
101-200 MILES			
200-500 MILES			
► 500 MILES			
TOTAL			

LABOR (04045)	HOURS	PRICE
Chemist 1 x 3hrs	3	
OTHER		
Project Manager		

PROFESSIONAL SERVICES (04035)	QUANTITY	PRICE
SAMPLE ANALYSIS		
WASTE STREAM EVALUATION		

EQUIPMENT (04065)	QUANTITY	PRICE

DISPOSAL (04060)

MATERIALS (04040)	QUANTITY	PRICE
85-G Salvage Drum-New		
55-G 17C, 17H, 17E Recon.		
55-G 37M - New		
30-G 17H - New		
30-G, 20-G Fiber New		
5-G Pail - 37E, 37A-New, 34-5, 35-50		
Dot Spec. Wooden Box		
Drum Thief		
Disposal Collwassa		
Absorbant, Clay, Vermiculite, CornCob - Bag		
Drum Pump-Use & Decon.		
4 Mil Liners		
Reactive Bags		
Dot Labels		
EPA Labels		
Sample Bottles		
Protective Gear - Level I		
Protective Gear - Level II		
Packing Materials 5G		
Packing Materials 20G		
Packing Materials 300G, 55G		

OTHER (04055)	QUANTITY	PRICE
Minimum Charge		

PROFILE/LABPACK	DESCRIPTION	QTY.	UM	UNIT PRICE
[illegible]	METAL & CERAMIC POWDERS	3	[illegible]	
[illegible]	GRIT BLAST MATERIAL	1	[illegible]	
[illegible]	CERAMIC POWDER	6	[illegible]	
[illegible]	METAL/CERAMIC POWDER AND WATER	1	[illegible]	

11 pieces

X [illegible]

Remarks

1. ACCTG-1	2. Customer Service Rep.	3. Customer Service Supv.	4. Operations

85-7546 (3-94)

GENR SIGNATURE

P2SUL007859

FACILITY COPY

THIS WASTE DOES NOT CONTAIN ANY DIOXINS, CHLORINATED FURANS, EXPLOSIVES OR RADIOACTIVE MATERIALS.

LAIDLAW ENVIRONMENTAL SERVICES

Container Contents

☐ Bulk ☐ Mixed Lab

Manifest #
Manifest page _____ Line Item _____
RQ _____

	Year	Month	Day	Code			Number	
Container Number:				N	J		–	01-01

Chemist: [illegible]

DOT Shipping Name: [illegible]

Absorbent C V O

Container Type: Size: 55 | UN/NA Number | HM

Hazard Class: Division: | Chemical: Constituents:

Profile Number	[illegible]
Disposal Site	WM
Approval Code	AW-1

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01	[illegible]						S	[illegible]		[illegible]
02	[illegible]							[illegible]		
03	[illegible]							157		
04	[illegible]									
05	[illegible]									
06										
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28										

ABSORBENT	PS - PHYSICAL STATE	IC - INTERNAL CONTAINER	
C - CORN COB	L - LIQUID/POURABLE	G - GLASS	M - METAL
V - VERMICULITE	S - SOLID	P - PLASTIC	F - PAPER
O - OTHER	X - SLUDGE		

This Lab Pack list continues: YES ☐ NO ☐ This is page _____ of _____

ORIGINAL - FINAL T.S.D. • GREEN - TRANS/CERT • YELLOW - DISPOSER • PINK - 1ST T.S.D. • GOLD - GENERATOR

THIS WASTE DOES NOT CONTAIN ANY DIOXINS, CHLORINATED FURANS, EXPLOSIVES OR RADIOACTIVE MATERIALS.

LAIDLAW ENVIRONMENTAL SERVICES

Container Contents

☒ Bulk ☐ Mixed Lab

Manifest #
Manifest page _____ Line Item _____
RQ _____

Container Number:	Year / Month / Day	Code	Number	Chemist
	[illegible]	N J [illegible]	[illegible]	

DOT Shipping Name:	[illegible]
Container Type: Size:	UN/NA Number: HM
Hazard Class: Division:	Chemical: Constituents:
Absorbent C V O	

Profile Number	[illegible]
Disposal Site	[illegible]
Approval Code	[illegible]

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01	[illegible]					[illegible]	[illegible]	[illegible]		[illegible]
02	[illegible]					[illegible]				
03										
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28										

ABSORBENT	PS - PHYSICAL STATE	IC - INTERNAL CONTAINER
C - CORN COB	L - LIQUID/POURABLE	G - GLASS M - METAL
V - VERMICULITE	S - SOLID	P - PLASTIC F - PAPER
O - OTHER	X - SLUDGE	

This Lab Pack list continues: YES ☐ NO ☐ This is page 1 of 1

ORIGINAL - FINAL T.S.D. • GREEN - TRANS/CERT • YELLOW - DISPOSER • PINK - 1ST T.S.D. • GOLD - GENERATOR

THIS WASTE DOES NOT CONTAIN ANY DIOXINS, CHLORINATED FURANS, EXPLOSIVES OR RADIOACTIVE MATERIALS.

LADLAW ENVIRONMENTAL SERVICES

Container Contents

☑ Bulk ☐ Mixed Lab

Manifest #
Manifest page _____ Line Item _____
RQ _____

Container Number:	Year	Month	Day	Code	Number	Chemist
				N J	–	

DOT Shipping Name:	Absorbent C V O
Container Type: Size:	UN/NA Number / HM
Hazard Class: Division:	Chemical: Constituents:

Profile Number	
Disposal Site	
Approval Code	

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01										
02										
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27										
28										

ABSORBENT	PS - PHYSICAL STATE	IC - INTERNAL CONTAINER
C - CORN COB	L - LIQUID/POURABLE	G - GLASS M - METAL
V - VERMICULITE	S - SOLID	P - PLASTIC F - PAPER
O - OTHER	X - SLUDGE	

This Lab Pack list continues: YES ☐ NO ☐ This is page _____ of _____

ORIGINAL - FINAL T.S.D. • GREEN - TRANS/CERT • YELLOW - DISPOSER • PINK - 1ST T.S.D. • GOLD - GENERATOR

THIS WASTE DOES NOT CONTAIN ANY DIOXINS, CHLORINATED FURANS, EXPLOSIVES OR RADIOACTIVE MATERIALS.

LAIDLAW ENVIRONMENTAL SERVICES

Container Contents

☐ Bulk ☐ Mixed Lab

Manifest #
Manifest page _____ Line Item _____
RQ _____

Container Number:	Year Month Day	Code	Number	Chemist
		N J	01-06	

DOT Shipping Name:			Absorbent C V O
Container Type: Size:	UN/NA Number	HM	
Hazard Class: Division:	Chemical: Constituents:		

Profile Number	
Disposal Site	
Approval Code	

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01										
02										
03										
04										
05										
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ABSORBENT	PS - PHYSICAL STATE	IC - INTERNAL CONTAINER
C - CORN COB	L - LIQUID/POURABLE	G - GLASS M - METAL
V - VERMICULITE	S - SOLID	P - PLASTIC F - PAPER
O - OTHER	X - SLUDGE	

This Lab Pack list continues: YES ☐ NO ☐ This is page 1 of 1

ORIGINAL - FINAL T.S.D. • GREEN - TRANS/CERT • YELLOW - DISPOSER • PINK - 1ST T.S.D. • GOLD - GENERATOR

Safety-Kleen
WMS - State Manifest System
Container Cross Reference Report

02/05/99
13:23:51
Page 1

Generator Name: SULZER METCO
Generator EPA ID: NYD131318651
Manifest Load #: NJSMG

Page	D.O.T. Description	Lab Pack	Bulk	DR LB	Drum Containers
1 a	NON-REGULATED MATERIAL		X	0	
b	NON-REGULATED MATERIAL		X	0	
c	NON-REGULATED MATERIAL		X	0	
d	NON-REGULATED MATERIAL		X	0	
2 a				0	

FORM B1 ***(Must be accompanied by Form A)***

Generator Name / Location Sulzer Metco, Westbury NY **Page** 2 **of** 2

EPA I.D. Number : NYD 13318651 **Manifest :** [illegible]

Waste Profile or ARF	Category No.	EPA or State Waste Code	Variance Date	Description/Sub Category	Treatability Group (WW or NWW)	Waste Constituents or Legend #
6SM6-001	1	NONE	—		NWW	
6SM6-004	1	NONE	—		NWW	
6SM6-005	1	NONE	—		NWW	
6SM6-018	1	NONE	—		NWW	

CONSTITUENTS IN SOLVENT, CALIFORNIA LIST AND CHARACTERISTIC WASTES.

F001 - F005 spent solvents

Legend #	Constituent Name
1	Acetone
2	Benzene
3	n-Butyl alcohol
*4	Carbon disulfide
5	Carbon tetrachloride
6	Chlorobenzene
7	Cresol (m-and p-isomers)
8	o-Cresol
*9	Cyclohexanone
10	1,2-Dichlorobenzene
11	Ethyl Acetate
12	Ethyl Benzene
13	Ethyl Ether
14	Isobutyl alcohol
*15	Methanol
16	Methylene Chloride
17	Methyl Ethyl Ketone
18	Methyl isobutyl ketone
19	Nitrobenzene
20	Pyridine
21	Tetrachloroethylene
22	Toluene
23	1,1,1-Trichloroethane
24	1,1,2-Trichloroethane
25	Trichlorothylene
26	1,1,2-Trichloro-1,2,2-trifluoroethane
27	Trichloromonofluoro-methane
28	Xylenes (total)

Legends 29-31 RESERVED

** If these constituents are present alone or in any combination of the three, then non waste water forms of these constituents must be treated to **TCLP** levels as indicated in §268.40.*

Technology-Based standards For F005 when the constituent is the only listed F00-F005 solvent

Legend #	Constituent Name
32	2-Ethoxyethanol
33	2-Nitropropane

Legends 34-43 RESERVED

CALIFORNIA LIST WASTES

Legend #	Constituent Name
44	Nickel
45	Thallium
46	Cyanide (Liquid)
47	Liquid Polychlorinated Biphenyls (PCB's)
48	Halogenated Organic compounds (HOC's)

SEE BACK FOR THE UNIVERSAL TREATMENT STANDARDS (UTS), Legends 49-264

Revised 10/94 585-7512-585003

LAIDLAW ENVIRONMENTAL SERVICES

FORM A

Customer Notification And Certification

Generator Name/Location: Sulzer METCO, Westbury NY

EPA I.D. Number: NYD 131318651

Waste Profile or ARF Designation: See Attached

Manifest Number: Non Haz 199257

EPA Waste Number(s): See Attached

Waste Analysis Available? Yes (attached) _____ No _____ On file at receiving facility ✓

Unrestricted Waste Notification (*Category 1*)

Mark the statement below if you generate a waste that is not a land disposal restricted waste (the waste has no applicable treatment standards).

☒ *I notify that I am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that the waste is not restricted as specified in 40 CFR §268, Subpart D or any applicable prohibitions set forth in 40 CFR §268.32 or RCRA Section 3004(d).*

Restricted Waste/Debris Notification (*Category 2*)

Mark statement (2a) below if you generate a waste that is restricted from land disposal (the waste has applicable treatment standards). **NOTE-1:** A waste may pass one or more standards and require treatment or be varianced for others. In this case, all applicable categories must be checked. **NOTE-2:** D001, D002 and D012 - D043 wastes must be evaluated for underlying constituents found in 40 CFR §268. 48 (Table UTS), that are reasonably expected to be present. A list of these constituents must be included on **FORM B**, or attached to and accompany this notification with each waste shipment. Mark statement (2b) if you generate a debris waste that will be treated to the alternate debris standards located in 40 CFR §268.45.

☐ **(2a) Restricted Waste Notification**

I notify that I am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that the waste is subject to the treatment standards specified in 40 CFR §268 Subpart D. The waste: (a) must be treated to the appropriate regulatory treatment standard, by the appropriate regulatory treatment method; (b) qualifies for a variance as described in category 3 below; or (c) meets some or all of the standards as described in Category 4 below.

☐ **(2b) Alternate Debris Treatment Notification: This hazardous debris is subject to the alternate treatment standards of 40 CFR §268.45.**

The waste contains the following contaminants subject to treatment [check all that apply]:

_____§268.45(b)(1) - Toxicity characteristic debris;

_____§268.45(b)(2) - Debris contaminated with listed waste;

_____§268.45(b)(3) - Cyanide reactive debris.

Restricted Waste Variance Notification (*Category 3*)

Mark the statement below and list the applicable variance date on **Form B**, if you generate a waste which **does not** require treatment prior to land disposal because of a variance (including a case-by-case extension under 40 CFR §268.5, a nationwide variance under 40 CFR §268 Subpart C, a no migration petition under 40 CFR §268.6, or other applicable variance).

☐ *I notify pursuant to 40 CFR §268.7(a)(3) that I am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that this waste is subject to a national capacity variance under 40 CFR §268 Subpart C, or a case-by-case extension under 40 CFR §268.5, or an exemption under 40 CFR §268.6.*

Restricted Waste Certification (Treatment Standards Met) (*Category 4*)

Mark the certification statement below if you generate a waste that is restricted from land disposal (the waste has applicable treatment standards), and the waste meets the standards as generated. **Note:** All applicable constituent standards must be accounted for. A waste may pass one or more standards and require treatment or be variance for other constituents. In this case, all applicable categories must be checked.

☐ *I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA § 3004(d). I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.*

SIGNATURE: [signature] DATE: 2/8/99

PRINT NAME: David Wolzak TITLE: _____

Revised 10/94 585-7510-585003

FORM A

LAIDLAW ENVIRONMENTAL SERVICES

HAZARDOUS MATERIALS WASTE DISPOSAL

SAFETY KLEEN (TS), INC.
3527 WHISKEY BOTTOM ROAD
LAUREL MD 20724-

Mail To: SULZER METCO
1101 PROSPECT AVENUE
WESTBURY NY 11590
Attention:

Pickup Address: SULZER METCO
1101 PROSPECT AVENUE
WESTBURY NY 11590

EPA ID: NYD131318651

Manifest No: NJSMG-99257

This is to certify that hazardous material removed from SULZER METCO

has been disposed of in accordance with all applicable local, state and federal regulations in the following manner.

Container	Date	Location	Method
990208-NJSMG-001 6SMG-005	02/16/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990208-NJSMG-002 6SMG-005	02/16/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990208-NJSMG-003 6SMG-005	02/16/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990208-NJSMG-004 6SMG-005	02/16/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990208-NJSMG-005 6SMG-005	02/16/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990208-NJSMG-006 6SMG-005	02/16/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990208-NJSMG-007 6SMG-001	02/16/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990208-NJSMG-008 6SMG-001	02/16/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990208-NJSMG-009 6SMG-001	02/16/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990208-NJSMG-010 6SMG-016	02/16/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)
990208-NJSMG-011 6SMG-004	02/16/99	SAFETY-KLEEN (TS), INC VALLEY GROVE WV	Con. fb Ind. Landfill(Amer.Landfill,Inc)

Brinton H. Hoar

Operations

Date: 02/25/99

Service Center

safety-kleen.

Friday, February 26, 1999

SULZER METCO
1101 PROSPECT AVENUE
WESTBURY NY 11590

Dear Sir/Madam:

Enclosed please find a Certificate of Disposal which certifies that waste which Safety-Kleen (TS), Inc picked up from your site on 2/8/99 , manifest number NJSMG-99257 , has been properly disposed.

This certificate indicates the container number, date of disposal, disposal site and disposal method for all of the material picked up on the referenced manifest.

If for any reason, your company address or information should change, please contact our manifest and records department at (301) 939-6014 or (301) 939-6024. It is imperative that we keep your records current at all times.

If you have any questions, please feel free to contact your customer service representative.

Safety-Kleen (TS), Inc..

Enclosure

Safety-Kleen (TS), Inc.
3527 Whiskey Bottom Road Laurel, Maryland 20724
Phone 301.939.6000 Fax 301.939.6066

SULZER

Sulzer Metco

Waste Disposal Form

Department: Materials Operations Date: 11/19/04

Name of Submitter: Dave Hawley

Waste Description:

Quantity of waste: 11 drums

List all constituents known to be present and the approximate percent of each. If the waste is a mixture of Sulzer Metco products, list the approximate percent of each:

1.	Water	90 %	6.		%
2.	Ceramic (Zr)	7 %	7.		%
3.	Nickel/Tungsten	1 %	8.		%
4.	Other	2 %	9.		%
5.		%	10.		%

Properties:

Circle those that apply:

Powder	Liquid	Flammable	Combustible
Oxidizer	Corrosive	Highly Acidic	Highly Alkaline

Please submit this form to the Facilities Department. Do not take the material to anyone. Someone will be assigned to remove the material for storage prior to disposal.

Facilities Use Only:

Waste Profile Code: CH82414 Internal Tracking Number: N/a

Labels Required: N/a

WasteDisposalForm0303

State of New Jersey
DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF SOLID WASTE MANAGEMENT
CN 414, Trenton, N.J. 08625-0414
Fax # (609) 394-8626

DEC 18 1988

John V. Czapor
Director

Mary T. Sheil
Deputy Director

S06321

ENVIRONMENTAL TRANSFER CORP
GOLD MINE ROAD
FLANDERS, NJ 07836

NOTICE OF REGISTRATION EXTENSION

Dear Hazardous Waste Transporter:

This letter is in reference to your company's Department of Environmental Protection hazardous waste vehicle registration. The Division of Solid Waste Management is extending the hazardous waste vehicle registration period until September 30, 1989.

The yellow decals, registration cards stamped "OFFICIAL NJDEP-DWM RECORDS Bureau of Registration and Permits" and temporary letters are valid until September 30, 1989.

The registration cards and temporary letters must be carried in the registered vehicle at all times. Also, the DEP number and capacity of vehicle must be displayed on vehicles. All hazardous waste facilities have been notified.

To confirm any registration information call (609) 292-5196.

Very truly yours,

Robert M. Confer
Acting Chief
Bureau of Registration
and Permits Administration

RMC:g

New Jersey is an Equal Opportunity Employer
Recycled Paper

State of New Jersey
DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF SOLID WASTE MANAGEMENT

Environmental Transfer Corp.
Cold Mine Road
Flanders, NJ 07836

DEP # S-6321

Pursuant to N.J.A.C. 7:26-3.1 et seq. and N.J.A.C. 7:26-7.1 et seq., you are temporarily authorized and licensed to receive and transport hazardous waste in the State of New Jersey.

This temporary license is not transferable to any other person and all rights and privileges granted herein are automatically withdrawn on the expiration date noted above. Erasures, strike-overs, additions or any other evidence of tampering with this document will render it invalid.

The listing below represents a complete list of vehicles temporily authorized to haul hazardous waste. A copy of this document must be carried in the authorized vehicles at all times.

If there are any questions, please contact the Bureau of Registration and Permits Administration, Division of Solid Waste Management at (609) 292-5196.

Robert M. Confer
Acting Assistant Chief
Bureau of Registration
and Permits Administration

State of New Jersey
DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF SOLID WASTE MANAGEMENT
CN 414, Trenton, N.J. 08625

JUN 20 1988

Michael F. DeBonis
Acting Director

NOTICE OF EXTENSION

[illegible]

ENVIRONMENTAL TRANSPORT CORP
GOLD MINE ROAD
FLANDERS, NJ [illegible]

Dear Hazardous Waste Transporter:

This letter is in reference to your company's Department of Environmental Protection hazardous waste vehicle registration. The Division of Solid Waste Management is extending the hazardous waste vehicle registration period until December 31, 1988.

The yellow decals, registration cards stamped "OFFICIAL NJDEP-DWM RECORDS Bureau of Registration and Permits" and temporary letters are valid until December 31, 1988.

The registration cards and temporary letters must be carried in the registered vehicle at all times. Also, the DEP number and capacity of vehicle must be displayed on vehicles. All hazardous waste facilities have been notified.

To confirm any registration information call (609) 292-5196.

Very truly yours,

Robert M. Confer
Acting Chief
Bureau of Registration
and Permits Administration

RMC:g

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State of New Jersey
DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF SOLID WASTE MANAGEMENT
CN 414, Trenton, N.J. 08625

Michael F. DeBonis
Acting Director

APR 28 1988

S[illegible]21

ENVIRONMENTAL TRANSFER CORP
GOLD MINE ROAD
FLANDERS, NJ 07836

Dear Hazardous Waste Transporter:

This letter is in reference to your company's Department of Environmental Protection hazardous waste vehicle registration. The Division of Solid Waste Management is extending the hazardous waste vehicle registration period until June 30, 1988.

The yellow decals, registration cards stamped "OFFICIAL NJDEP-DWM RECORDS Bureau of Registration and Permits" and temporary letters are valid until June 30, 1988.

The registration cards and temporary letters must be carried in the registered vehicle at all times. Also, the DEP number and capacity of vehicle must be displayed on vehicles. All hazardous waste facilities have been notified.

To confirm any registration information call (609) 292-5196.

Very truly yours,

Robert M. Confer
Acting Chief
Bureau of Registration
and Permits Administration

RMC:g

New Jersey is an Equal Opportunity Employer

DIVISION OF WASTE MANAGEMENT
HAZARDOUS WASTE TRANSPORTER

217 -TNV

EXPIRES SEPT. 30, 1987

23636
DECAL NO.

his certifies that:

ENVIRONMENTAL TRANSFER CORP.

S- 6321
D.E.P. No.

has an approved license as a
HAZARDOUS WASTE TRANSPORTER
Issued by N.J.D.E.P.

TATE COMMISSIONER OF ENVIRONMENTAL PROTECTION

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WASTE MANAGEMENT
HAZARDOUS WASTE TRANSPORTER

693-TNG

EXPIRES SEPT. 30, 1987

23637
DECAL NO.

his certifies that:

ENVIRONMENTAL TRANSFER CORP.

S- 6321
D.E.P. No.

has an approved license as a
HAZARDOUS WASTE TRANSPORTER
Issued by N.J.D.E.P.

TATE COMMISSIONER OF ENVIRONMENTAL PROTECTION

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WASTE MANAGEMENT
HAZARDOUS WASTE TRANSPORTER

694-TNG

EXPIRES SEPT. 30, 1987

23638
DECAL NO.

his certifies that:

ENVIRONMENTAL TRANSFER CORP.

ESI Form 540 (6/99) This form contains all of the information required in the NRC form 540 (3 95)

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST SHIPPING PAPER

5. Shipper - Name and Facility
Sulzer-Metco (US), Inc.
1101 Prospect Ave.
Westbury, NY 11590

Shipper I.D. Number
N/A
Collector
Processor

7. NRC Form 540 and 540A — Page 1 of 4 Page(s)
NRC Form 541 and 541A — 9 Page(s)
NRC Form 542 and 542A — 0 Page(s)
Additional Information — 0 Page(s)

8. Manifest Number (Use this number on all continuation pages)
50829-02

Emergency Telephone Number (include Area Code)
(410) 377-3742

User Permit Number
N/A

Shipment Number
50829

☒ Generator type (specify)
Other

9. Consignee - Name and Facility Address:
WasteControl Specialists, LLC.
9998 W. Hwy. 176
Andrews, TX 79714

Contact Anne Dean
Telephone Number
(505) 394-4300

Organization
ECOLOGY SERVICES, INC.

Contact Peter DiPietrantonio

Telephone Number (Include Area Code)
(516) 338-2337

Signature - Authorized consignee acknowledging waste receipt

Date

2. Is this an "Exclusive Use" shipment?
☐ YES
☒ NO

3. Total number of packages identified on this manifest ==> 57

Carrier - Name and Address
Tri State Motor Transit Co.
PO Box 113
Joplin, MO 64802

EPA ID Number
MOD095038998

Shipping Date
08/31/05

10. Certification
This is to certify that the herein-named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation. This also certifies that the materials are classified, packaged, marked, and labeled and are in proper condition for transportation and disposal as described in accordance with the requirements of 10 CFR Parts 20 and 61, or equivalent state regulations.

4. Does EPA regulated waste requiring a manifest accompany this shipment? ☐ YES ☒ NO
If "yes" provide manifest number ==========>

EPA Manifest Number
TX 3216917

Contact Cassie Gardner

Signature - Authorized carrier acknowledging waste receipt

Telephone Number (Include Area Code)
800-234-8768

Date
08-31-05

Authorized Signature

Title

Date
8/31/05

11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (including proper shipping name, hazard class, UN ID number, and any additional information)	12. DOT LABEL "RADIOACTIVE"	13. TRANSPORT INDEX	14. PHYSICAL AND CHEMICAL FORM	15. INDIVIDUAL RADIONUCLIDES			16. TOTAL PACKAGE ACTIVITY IN SI UNITS	17. LSA/SCO CLASS	18. TOTAL WEIGHT OR VOLUME (use appropriate units)	19. IDENTIFICATION NUMBER OF PACKAGE
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	328 kg	S-01
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	274 kg	S-02
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	355 kg	S-03
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	326 kg	S-04
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	85 kg	S-05
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	85 kg	S-06
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	152 kg	S-07
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	52 kg	S-08

For Consignee Use Only

ESI Form 540A
(6/99)

This form contains all of the information required in the NRC form 540A

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST
SHIPPING PAPER
Continuation Sheet

8. Manifest Number
(Use this number on all continuation pages)

50829-02

11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (including proper shipping name, hazard class, UN ID number, and any additional information)	12. DOT LABEL "RADIOACTIVE"	13. TRANSPO RT INDEX	14. PHYSICAL AND CHEMICAL FORM	15. INDIVIDUAL RADIONUCLIDES			16. TOTAL PACKAGE ACTIVITY IN SI UNITS	17. LSA/SCO CLASS	18. TOTAL WEIGHT OR VOLUME (use appropriate units)	19. IDENTIFICATION NUMBER OF PACKAGE
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 μCi	N/A	118 kg	S-09
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 μCi	N/A	67 kg	S-10
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 μCi	N/A	73 kg	S-11
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 μCi	N/A	75 kg	S-12
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 μCi	N/A	56 kg	S-13
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 μCi	N/A	56 kg	S-14
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 μCi	N/A	63 kg	S-15
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 μCi	N/A	111 kg	S-16
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 μCi	N/A	74 kg	S-17
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 μCi	N/A	86 kg	S-18
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 μCi	N/A	82 kg	S-19
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 μCi	N/A	103 kg	S-20
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 μCi	N/A	208 kg	S-21
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 μCi	N/A	318 kg	S-22
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 μCi	N/A	330 kg	S-23
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 μCi	N/A	353 kg	S-24
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 μCi	N/A	310 kg	S-25

ESI Form 540A
(6/99)

This form contains all of the information required in the NRC form 540A

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST
SHIPPING PAPER
Continuation Sheet

8. Manifest Number
(Use this number on all continuation pages)

50829-02

11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (including proper shipping name, hazard class, UN ID number, and any additional information)	12. DOT LABEL "RADIOACTIVE"	13. TRANSPOR T INDEX	14. PHYSICAL AND CHEMICAL FORM	15. INDIVIDUAL RADIONUCLIDES			16. TOTAL PACKAGE ACTIVITY IN SI UNITS	17. LSA/SCO CLASS	18. TOTAL WEIGHT OR VOLUME (use appropriate units)	19. IDENTIFICATION NUMBER OF PACKAGE
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	236 kg	S-26
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	264 kg	S-27
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	192 kg	S-28
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	91 kg	S-29
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	77 kg	S-30
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	311 kg	S-31
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	376 kg	S-32
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	230 kg	S-33
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	229 kg	S-34
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	89 kg	S-35
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	102 kg	S-36
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	66 kg	S-37
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	75 kg	S-38
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	180 kg	S-39
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	113 kg	S-40
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	249 kg	S-41
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	75 kg	S-42
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	89 kg	S-43

ESI Form 540A
(6/99)

This form contains all of the information required in the NRC form 540A

8. Manifest Number
(Use this number on all continuation pages)

50829-02

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST
SHIPPING PAPER
Continuation Sheet

11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (including proper shipping name, hazard class, UN ID number, and any additional information)	12. DOT LABEL "RADIOACTIVE"	13. TRANSPORT INDEX	14. PHYSICAL AND CHEMICAL FORM	15. INDIVIDUAL RADIONUCLIDES			16. TOTAL PACKAGE ACTIVITY IN SI UNITS	17. LSA/SCO CLASS	18. TOTAL WEIGHT OR VOLUME (use appropriate units)	19. IDENTIFICATION NUMBER OF PACKAGE
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	75 kg	S-44
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	62 kg	S-45
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	98 kg	S-46
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	85 kg	S-47
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	111 kg	S-48
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	139 kg	S-49
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	87 kg	S-50
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	200 kg	S-51
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	73 kg	S-52
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	134 kg	S-53
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	273 kg	S-54
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	415 kg	S-55
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	354 kg	S-56
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts WP-019153	U-nat + C			0.566 MBq 15.30 µCi	N/A	362 kg	S-57

EXAMPLE

Forms Completed By Platers, Inc.

Form IC

The site was a LQG, since it generated more than 2,200 lbs. of RCRA hazardous waste during 1992. Therefore, it was required to file the 1992 Hazardous Waste Report. (See inside from cover, WHO MUST FILE). All sites required to submit this report must complete Form IC.

Sections I-IV	collect information about the site's location address, mailing address, contact person, and SIC Code(s).
Section V	certification is signed <u>after all the report forms are completed</u>.

NYC 551389-4

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4/97)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Document No.

2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number NYC 551389-4

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. | c.

b. | d.

K. Handling Codes for Wastes Listed Above

a. | c.

b. | d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR,** if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name: Joyce Zimmerman | Signature | Mo. Day Year: 10 10 99

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

COPY 5-Generator-Mailed by TSD facility

P2SUL007847

NYC 551389-4

2-118-08

Please print or type. DO NOT STAPLE.

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

(Hazardous Waste Manifest 4/97)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No.: NYD 131318651
Manifest Document No.: 90678
2. Page 1 of 1

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address
METCO INC
1101 PROSPECT AVE
WESTBURY NY 11590
R PILKARAN/LAB SUPP

4. Generator's Phone (516) 334-1300

A. State Manifest Document Number: NYC 551389-4
B. Generator's ID: SAME

5. Transporter 1 (Company Name): SAFETY-KLEEN SYSTEMS, INC
6. US EPA ID Number: ILD 984908202
C. State Transporter's ID: NY-EH 7621
D. Transporter's Telephone (516) 842-6311

7. Transporter 2 (Company Name)
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address: 211808
SAFETY-KLEEN SYSTEMS, INC
80 SEABRO
NO AMITYVILLE, NY 11701
10. US EPA ID Number: NYD 000708198
G. State Facility ID
H. Facility's Telephone (516) 842-6311

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a. WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII(D001 D018, D039, D040)(ERG#128)6.7LBS/GAL	01	DF	05	G	EPA D001 STATE
b. WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII(D001 D018, D039, D040)(ERG#128)6.7LBS/GAL	01	DM	08	G	EPA D001 STATE
c.					EPA STATE
d.					EPA STATE

J. Additional Descriptions for Materials Listed Above
a. I(A) D018 D039 (A) D040
b. I(B) D018 D039 (B) D040
c.
d.

K. Handling Codes for Wastes Listed Above
a. R
b. R
c.
d.

15. Special Handling Instructions and Additional Information
*
EMERGENCY RESP#1-800-468-1760 24HR
9901 96460493 990678 2-118-08-4041 01

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford

Printed/Typed Name: DAVID WALZAK
Signature:
Mo. 01 Day 06 Year 99

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: FRANK BURCZYK
Signature:
Mo. 01 Day 06 Year 99

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name
Signature
Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name
Signature
Mo. Day Year

A: 704 B: 704 C: D:

COPY 3-Disposer State-mailed by generator

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the New York State Department of Environmental Conservation (800) 457-7362

NYC 551389-4

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4/97)

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No.

Manifest Document No.

2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number NYC 551389-4

B. Generator's ID

5. Transporter 1 (Company Name)

6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name)

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address

10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. | c.

b. | d.

K. Handling Codes for Wastes Listed Above

a. | c.

b. | d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

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Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

COPY 8-Generator-retained by generator

P2SUL007849

SAFETY-KLEEN

[illegible] DISPOSAL RESTRICTION NOTICE

LOCATION: [illegible]

EPA ID NO. NYD000708198
(DESIGNATED FACILITY)

TO: SAFETY-KLEEN SERVICES, INC.
[illegible]
NO ATTENTION

NYL551389-1

UNDER MANIFESTING EPA SERVICE NUMBER [illegible] THE GENERATOR NOTED BELOW IS SHIPPING YOU A WASTE DETERMINED TO BE RESTRICTED UNDER 40 CFR PART 268. IN ACCORDANCE WITH 40 CFR [illegible] AND ONLY OR [illegible] THE GENERATOR HEREBY PROVIDES NOTICE THAT THE WASTE IS RESTRICTED FROM LAND DISPOSAL. A COPY OF THIS FORM MUST BE KEPT BY THE GENERATOR FOR (THREE) YEARS FROM THE DATE OF SHIPMENT.

SKDOT#: 0000704

WASTE NAME: SOLVENT [illegible] LEGAL [illegible]
WASTE CODE(S): [illegible]
TREATABILITY GROUP: [illegible]

EPA WASTE CODE	WASTE MANAGEMENT SUBCATEGORY OR TREATMENT/CONCENTRATION SUBCATEGORY OR REGULATED HAZARDOUS CONSTITUENT	TREATMENT STANDARD (*) CONCENTRATION OR TECHNOLOGY CODE
		[illegible] UP LIMIT **
D001	HIGH [illegible] NON-WASTEWATER WASTE	[illegible] MG/KG ****
D018	BENZENE	[illegible] MG/KG ****
D039	TETRACHLOROETHYLENE	[illegible] MG/KG ****
D040	TRICHLOROETHYLENE	[illegible]

SKDOT#: 0000704

WASTE NAME: SOLVENT [illegible] LEGAL [illegible]
WASTE CODE(S): [illegible]
TREATABILITY GROUP: [illegible]

EPA WASTE CODE	WASTE MANAGEMENT SUBCATEGORY OR TREATMENT/CONCENTRATION SUBCATEGORY OR REGULATED HAZARDOUS CONSTITUENT	TREATMENT STANDARD (*) CONCENTRATION OR TECHNOLOGY CODE
		[illegible] UP LIMIT **
D001	HIGH [illegible] NON-WASTEWATER WASTE	[illegible] MG/KG ****
D018	BENZENE	[illegible] MG/KG ****
D039	TETRACHLOROETHYLENE	[illegible] MG/KG ****
D040	TRICHLOROETHYLENE	

THE [illegible] BASED ON [illegible] THE [illegible] TOTAL MATERIAL SAFETY DATA SHEETS FOR THE CHEMICALS [illegible] AND [illegible] PRODUCT WHICH CREATED THE WASTE.

NOTES: * [illegible] STANDARDS DO NOT [illegible] DECLARATION PRIOR TO FINAL DISPOSAL.
** NON TREATABLE [illegible] STANDARD [illegible] EFFECTIVE 10-19-94.
*** TCLP [illegible] STANDARDS APPLICABLE IN CERTAIN NON-AUTHORIZED STATES
**** TCLP [illegible] TREATMENT STANDARD
AND [illegible] TREATMENT STANDARD
***** NEW [illegible] STANDARDS UNDER FINAL RULES EFFECTIVE 7-8-96
****** NEW TREATMENT STANDARDS UNDER FINAL RULES EFFECTIVE 8-24-98.
[illegible] TREATMENT STANDARDS [illegible] UNDERLYING CONSTITUENTS
UHC NOTICE: [illegible] PER GASOLINE [illegible] UNDERLYING CONSTITUENTS PRIOR [illegible] TREATOR NOTIFIES FOR ALL REGULATED CONSTITUENTS PRIOR TO DISPOSAL
EXP NOTICE: THIS COPY EXPIRES ON [illegible]

EPA ID: NYD131018651

GENERATOR NAME: [illegible] INC

SHW#: [illegible] LOT: [illegible] SEQ: [illegible] TRANS. [illegible] RCRA: [illegible] 990578 SW: 9901

TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFER

EPA United States Environmental Protection Agency

Envirofacts Warehouse Toxics Release Inventory

Overview | Law EXIT EPA | State Reports | Query | Customized Query (NEW) | Model | Feedback | EF Home

Envirofacts TRI Report

Query executed on 26-OCT-1998
Results are based on data extracted on 23-SEP-98

Click on the underlined FACILITY ID value to view EPA Facility information for the facility.

Facility Name:	SULZER METCO (US) INC.	Mailing Name:			
Facility Name(2):		Mailing Name (2):			
Address:	1101 PROSPECT AVE. WESTBURY NY 11590	Mailing Address:			
County:	NASSAU	Region:	02		
FACILITY ID:	NYD131318651	TRI ID:	11590PRKNL1101P	DUNS Number:	057731663
TRI Preferred Latitude:	40.7639	TRI Preferred Longitude:	73.5556		
Public Contact:		Phone:			
Parent Company:	SULZER INC.	Parent DUNS:	001826957		

Primary SIC Codes for 1996

SIC CODE	SIC DESCRIPTION
3542	MACHINE TOOLS, METAL FORMING TYPE

The above information comes from 1996, which is the latest reporting year on file for this facility.

Map this facility

Map this facility using one of Envirofact's mapping utilities.

Besides TRI, this facility also does the following:

- handles hazardous waste

More information about these additional regulatory aspects of this facility can be found by pressing the other regulatory data button below.

Other Regulatory Data

Total Aggregate Releases of TRI Chemicals to the Environment:

Please note that all release amounts are reported in pounds. For all releases estimated as a range, the mid-point of the range was used in these calculations. This table summarizes the releases reported by the facility. ***NR*** *- signifies that there were no releases reporting for the corresponding media for the given reporting year.*

Media	1996	1995	1994	1993	1992	1991	1990	1989	1988	1987
Air Emissions	NR	NR	270	1500	742	1082	0	0	0	NR
Surface Water Discharges	NR	NR	0	0	0	0	0	0	0	NR
Releases to Land	NR	NR	0	0	0	0	0	0	0	NR
Underground Injection	NR	NR	0	0	0	0	0	0	0	NR
Total Releases	NR	NR	270	1500	742	1082	0	0	0	NR

Graphic Summary of this Table

Names and Amounts of Chemicals Released to the Environment by Year.

Please note that all release amounts are reported in pounds. For all releases estimated as a range, the mid-point of the range was used in these calculations. ***NR*** *- signifies that there were no releases reported for the corresponding media for the given reporting year. Rows with all "0" or "NR" values were not listed.*

Chemical Name	Media	1996	1995	1994	1993	1992	1991	1990	1989	1988	1987
ALUMINUM (FUME OR DUST) (TRI Chemical ID: 007429905)	Air - Stack	NR	NR	5	0	0	0	0	0	NR	NR
ALUMINUM OXIDE (FIBROUS FORMS) (TRI Chemical ID: 001344281)	Air - Stack	NR	NR	NR	NR	NR	340	NR	NR	NR	NR

P2SUL004918

CHROMIUM (TRI Chemical ID: 007440473)	Air - Stack	NR	NR	5	250	48	48	0	0	0	NR
COBALT (TRI Chemical ID: 007440484)	Air - Stack	NR	NR	5	250	67	67	0	0	0	NR
COPPER (TRI Chemical ID: 007440508)	Air - Stack	NR	NR	5	250	47	47	0	0	0	NR
NICKEL (TRI Chemical ID: 007440020)	Air - Stack	NR	NR	250	750	580	580	0	0	0	NR

Discharge of Chemicals into Streams or Bodies of Water:

Please note that there were no discharge of chemicals into streams or bodies of water for this facility for the years 1987 to 1996

Transfer of Chemicals to Off-Site Locations other than POTWs:

Please note that transfer amounts are not included in release totals shown above. All transfer amounts are reported in pounds. For all releases estimated as a range, the mid-point of the range was used in these calculations.

Chemical Name	Year	Release Amount (Pounds)	Transfer Site Name and Address	Type Of Treatment
ALUMINUM (FUME OR DUST) (TRI Chemical ID: 007429905)	1994	250	CHEMICAL WASTE MANAGEMENT OF 100 LISTER AVE. NEWARK, NJ 07105	LANDFILL/DISPOSAL SURFACE IMPOUNDMENT
ALUMINUM (FUME OR DUST) (TRI Chemical ID: 007429905)	1993	250	LONI-JO METAL CORP. 70 KINKEL ST. WESTBURY, NY 11590	METALS RECOVERY
ALUMINUM (FUME OR DUST) (TRI Chemical ID: 007429905)	1992	250	LONI JO SCRAP METAL 70 KINKEL ST. WESTBURY, NY 11590	METALS RECOVERY
			LONI JO SCRAP	

ALUMINUM (FUME OR DUST) (TRI Chemical ID: 007429905)	1991	30	LONI-JO SCRAP METAL 70 KINKEL ST. WESTBURY, NY 11590	METALS RECOVERY
ALUMINUM OXIDE (FIBROUS FORMS) (TRI Chemical ID: 001344281)	1991	220	LONI-JO SCRAP METAL 70 KINKEL ST. WESTBURY, NY 11590	METALS RECOVERY
CHROMIUM (TRI Chemical ID: 007440473)	1994	750	CHEMICAL WASTE MANAGEMENT OF 100 LISTER AVE. NEWARK, NJ 07105	LANDFILL/DISPOSAL SURFACE IMPOUNDMENT
CHROMIUM (TRI Chemical ID: 007440473)	1993	1000	LONI-JO METAL CORP. 70 KINKEL ST. WESTBURY, NY 11590	METALS RECOVERY
CHROMIUM (TRI Chemical ID: 007440473)	1992	750	LONI JO SCRAP METAL 70 KINKEL ST. WESTBURY, NY 11590	METALS RECOVERY
CHROMIUM (TRI Chemical ID: 007440473)	1991	180	LONI-JO SCRAP METAL 70 KINKEL ST. WESTBURY, NY 11590	METALS RECOVERY
COBALT (TRI Chemical ID: 007440484)	1994	250	CHEMICAL WASTE MANAGEMENT OF 100 LISTER AVE. NEWARK, NJ 07105	LANDFILL/DISPOSAL SURFACE IMPOUNDMENT
COBALT (TRI Chemical ID: 007440484)	1993	250	LONI-JO METAL CORP. 70 KINKEL ST. WESTBURY, NY 11590	METALS RECOVERY
			LONI-JO SCRAP	

P2SUL004920

COBALT (TRI Chemical ID: 007440484)	1992	250	LONI JO SCRAP METAL 70 KINKEL ST. WESTBURY, NY 11590	METALS RECOVERY
COBALT (TRI Chemical ID: 007440484)	1991	140	LONI-JO SCRAP METAL 70 KINKEL ST. WESTBURY, NY 11590	METALS RECOVERY
COPPER (TRI Chemical ID: 007440508)	1994	750	CHEMICAL WASTE MANAGEMENT OF 100 LISTER AVE. NEWARK, NJ 07105	LANDFILL/DISPOSAL SURFACE IMPOUNDMENT
COPPER (TRI Chemical ID: 007440508)	1993	1100	LONI-JO METAL CORP. 70 KINKEL ST. WESTBURY, NY 11590	METALS RECOVERY
COPPER (TRI Chemical ID: 007440508)	1992	750	LONI JO SCRAP METAL 70 KINKEL ST. WESTBURY, NY 11590	METALS RECOVERY
COPPER (TRI Chemical ID: 007440508)	1991	250	LONI-JO SCRAP METAL 70 KINKEL ST. WESTBURY, NY 11590	METALS RECOVERY
NICKEL (TRI Chemical ID: 007440020)	1994	3500	CHEMICAL WASTE MANAGEMENT OF 100 LISTER AVE. NEWARK, NJ 07105	LANDFILL/DISPOSAL SURFACE IMPOUNDMENT
NICKEL (TRI Chemical ID: 007440020)	1993	3700	LONI-JO METAL CORP. 70 KINKEL ST. WESTBURY, NY 11590	METALS RECOVERY
			LONI-JO SCRAP	

P2SUL004921

NICKEL (TRI Chemical ID: 007440020)	1992	3000	LONI JO SCRAP METAL 70 KINKEL ST. WESTBURY, NY 11590	METALS RECOVERY
NICKEL (TRI Chemical ID: 007440020)	1991	2800	LONI-JO SCRAP METAL 70 KINKEL ST. WESTBURY, NY 11590	METALS RECOVERY

Summary of Waste Management Activites:

This facility did not report any waste management activites.

Chemicals Under Waste Management:

This facility did not report any chemicals as being treated, recycled, or used in energy recovery.

Transfer of Chemicals to Publicly Owned Treatment Works:

This facility did not transfer any chemicals to a publicly owned treatment works.

Non Production Releases:

This facility did not report any non-production releases.

All chemicals reported above have release or transfer amounts greater than zero. To see a list of all chemicals reported by this facility click here.

The Environmental Defense Fund's (EDF) Chemical Scorecard has on-line environmental information regarding this EXIT EPA facility's reported TRI releases. This information resource is not maintained, managed, or owned by the Environmental Protection Agency (EPA) or the Envirofacts Support Team. Neither the EPA nor the Envirofacts Support Team is responsible for their content or site operation. The Envirofacts Warehouse provides this reference only as a convenience to our Internet users.

P2SUL004922

48-14-1 (9-94)-7f

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

Form Approved OMB No. 2050-0039, Expires 9-30-96

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.

2. Page 1 of

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number NY C 411221-2

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Phone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone ( )

9. Designed Facility Name and Site Address | 10. US EPA ID Number

G. State Facility's ID

H. Facility's Phone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. | c.

b. | d.

K. Handling Codes for Wastes Listed Above

a. | c.

b. | d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR,** if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

NY C 411221-2

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 5-Generator-Mailed by TSD facility

P2SUL006897

48-14-1 (9-94)-7f

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

Please print or type. DO NOT STAPLE.

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 6-30-96

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. [illegible] | Manifest Document No. [illegible]
2. Page 1 of [illegible]

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
[illegible] PROSPECT AVE
WESTBURY NY 11590
4. Generator's Phone (516) 334-[illegible]

A. State Manifest Document Number NY C 411221-2
B. Generator's ID SAME

5. Transporter 1 (Company Name) [illegible]
6. US EPA ID Number [illegible]

C. State Transporter's ID [illegible]
D. Transporter's Phone (516) 542-[illegible]

7. Transporter 2 (Company Name)
8. US EPA ID Number

E. State Transporter's ID
F. Transporter's Phone ( )

9. Designed Facility Name and Site Address [illegible]
[illegible]
[illegible] HICKSVILLE NY 11801
10. US EPA ID Number NYD [illegible]

G. State Facility's ID
H. Facility's Phone 516)942-6311

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE COMBUSTIBLE LIQUID, N.O.S. PETROLEUM NAPHTHA, NA1993, PG III [illegible]	[illegible]	DM	[illegible]	[illegible]	EPA D001 / STATE
b. WASTE COMBUSTIBLE LIQUID, N.O.S. PETROLEUM NAPHTHA, NA1993, PG III [illegible]	[illegible]	DM	[illegible]	[illegible]	EPA D001 / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
a. (A) D006 D008 (B) D018, D035, D039, D040
b. (A) D006 D008 (B) D018, D035, D039, D040
c.
d.

K. Handling Codes for Wastes Listed Above
a. [illegible] c. [illegible]
b. [illegible] d. [illegible]

15. Special Handling Instructions and Additional Information
EMERGENCY RESPONSE 800-468-1760 24HR
[illegible]

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR,** if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name [illegible] | Signature | Mo. Day Year

GENERATOR

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name [illegible] | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

19. Discrepancy Indication Space

FA

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

700-22 (Rev. 9-88) Previous editions are obsolete

COPY 8-Generator-retained by generator

P2SUL006898

NY C 411221-2

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

2-118-08

safety-kleen

LAND DISPOSAL RESTRICTION AND WASTE ANALYSIS CRITERIA FORM

PHASE II GENERATOR IS NOT REQUIRED TO LIST UNDERLYING CONSTITUENTS BECAUSE TREATER
LDR NOTICE: WILL MONITOR FOR ALL 216 REGULATED CONSTITUENTS PRIOR TO DISPOSAL.

TO: SAFETY-KLEEN CORP. (DESIGNATED FACILITY) EPA ID NO. _____ (DESIGNATED FACILITY)

ADDRESS: _____

Under manifest/sales service number NYC 4/12/2[illegible] the generator noted below is shipping to you a waste determined to be restricted under 40 CFR Part 268. In accordance with 40 CFR Part 268.7, the generator hereby provides notice that the waste is restricted from land disposal. A copy of this form must be kept by the generator and facility for five (5) years from the date of waste shipment.

PLEASE ✓ THE APPROPRIATE BOXES

WASTE NAME (FOR NON-WASTE WATER)	WASTE CODE	THE WASTE MAY CONTAIN THE FOLLOWING RESTRICTED CONSTITUENTS	TREATMENT STANDARD OR METHOD
☒ Waste Petroleum Naphtha 105	D001	Ignitable Liquid (High TOC Subcategory)	COMBUSTION (CMBST)
		Halogenated Organic Compounds (HOC's)≥1000 mg/l	or recovery (RORGS)(40 CFR 268.42)(non-waste water)
	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/KG
	D035	Methyl Ethyl Ketone	36 (non-waste water) MG/KG
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
	D040	Trichloroethylene	6.0 (non-waste water) MG/KG
☐ Waste Petroleum Naphtha 140	D001	Ignitable Liquid (High TOC Subcategory)	CMBST, or RORGS (40 CFR 268.42)(non-waste water)
	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/KG
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
☐ Actrel Solvent (If customer specific TCLP is not available)	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/KG
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
	D040	Trichloroethylene	6.0 (non-waste water) MG/KG
☐ Aqueous Parts Washer	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
☐ 150 Premium Solvent	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/KG
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
	D040	Trichloroethylene	6.0 (non-waste water) MG/KG
☐ AQUEOUS BRAKE CLEANER	D006	Cadmium	1.0 (non-waste water) MG/L
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
☐ Waste Petroleum Naphtha (sludges from Safety-Kleen Service Center Operations)	D001	Ignitable Liquid (High TOC Subcategory)	CMBST, or RORGS (40 CFR 268.42)(non-waste water)
	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
	D040	Trichloroethylene	6.0 (non-waste water) MG/KG
☐ Photo Imaging	D011	Silver	5.0 (non-waste water) MG/KG
☐ Waste Compound Cleaning Liquid/ Immersion cleaner 699	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/L
	D027	1, 4-Dichlorobenzene	6.0 (non-waste water) MG/KG
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/KG
	D040	Trichloroethylene	6.0 (non-waste water) MG/KG
☐ Waste Gasoline Filters	D001	Ignitable Liquid (High TOC Subcategory)	CMBST, or RORGS (40 CFR 268.42)(non-waste water)
	D018	Benzene	10 (non-waste water) MG/KG

OPTIONAL STATE INFO.

MACHINE NUMBER	SPECIFIC GRAVITY	EXCESS FLUID IN DRUM? (MS>2/3)(C>1/3)(Y/N)	OFF-COLOR? (Y/N)	MORE THAN 30% SOLIDS? (Y/N)	UNUSUAL ODOR? (Y/N)	UNUSUAL MATERIALS INCLUDED/ADDED? (Y/N)

SPECIFIC GRAVITY ACCEPTANCE GUIDELINES

SALES REPRESENTATIVE SIGNATURE
(FOR OPTIONAL STATE INFORMATION)

The constituent composition is based on knowledge of the waste (via Material Safety Data Sheets for the chemical(s) used, and the process which created the waste).

***These treatment standards do not preclude reclamation prior to final disposition.**

Generator Company _____ P2SUL006899 EPA ID NO.: _____

Safety-Kleen Corp. manages the above waste through its recycling and fuels program in accordance with all applicable elements of the land disposal restriction

GENERATOR

FORM 1339 (1/96)

Z 314 694 225

Receipt for Certified Mail

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

UNITED STATES POSTAL SERVICE

Sent to	NYS DIV SOLID & HAZARDOUS WASTE MANIFEST SECTION
Street and No.	PO BOX 12820
P.O., State and ZIP Code	ALBANY NY 12212
Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form 3800, March 1993

Fold at line over top of envelope to the right of the return address

CERTIFIED MAIL

Z 314 694 225

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

NEW YORK STATE
DIV OF SOLID & HAZARDOUS WASTE
MANIFEST SECTION
PO BOX 12820
ALBANY, NY 12212

4a. Article Number
Z 314 694 225

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: *(Print Name)*

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature: *(Addressee or Agent)*
X

PS Form **3811**, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

Form Approved OMB No. 2050-0072

Tier Two
EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: PERKIN-ELMER CORPORATION METCO DIVISION
Street: 220 MILLER PLACE
City: HICKSVILLE County: NASSAU State: NY Zip: 11801
SIC Code: 3999 Dun & Brad Number: 05-773-1663

FOR OFFICIAL USE ONLY
ID #:
Date Received:

Owner/Operator Name
Name: JOSEPH MACRI Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact
Name: JOSEPH MACRI 2374 Title: MANAGER FACILITIES
Phone: (516) 334-1300 EXT. 24 Hr Phone: (800) 424-9300
Name: Title:
Phone: ( ) 24 Hr Phone: ( )

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19 92

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) — Container Type / Pressure / Temperature	Storage Locations	Optional
CAS 7429-90-5; Trade Secret ☐ Chem. Name: Aluminum Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 04 Avg. Daily Amount (code): 04 No. of Days On-site (days): 365	D 1 4 N 1 4 R 1 4 E 1 4 I 1 4	Warehouse, Production Floor Production Floor Production Floor Hardened Steel Hoppers Production Floor Production Floor	☐
CAS 1344-25-1; Trade Secret ☐ Chem. Name: Aluminum Oxide Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 04 Avg. Daily Amount (code): 04 No. of Days On-site (days): 365	D 1 4 N 1 4 R 1 4 E 1 4 I 1 4	Warehouse, Production Floor Production Floor Production Floor Hardened Steel Hoppers Production Floor Production Floor	☐
CAS 1314-23-4; Trade Secret ☐ Chem. Name: Zirconium Oxide Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) X Delayed (chronic) ☐	Max. Daily Amount (code): 04 Avg. Daily Amount (code): 04 No. of Days On-site (days): 365	D 1 4 N 1 4 R 1 4 E 1 4 I 1 4	Production Floor Production Floor Production Floor Hardened Steel Hoppers Production Floor Warehouse, Production Floor	☐

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 2 and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

JOSEPH MACRI MANAGER FACILITIES
Name and official title of owner/operator OR owner/operator's authorized representative

Signature: [signature]

02-26-93
Date signed

Optional Attachments

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

US EPA TIER II CALENDER YEAR 1993
EMERGENCY HAZ CHEMICAL INVENTORY

KELLER'S

INDUSTRIAL SAFETY REPORT

•SPECIAL REPORT•

COMMUNITY RIGHT TO KNOW

Tier One And Tier Two Reporting

KELLER'S

INDUSTRIAL SAFETY REPORT

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15. State Emergency Response Commissions Contact List

19. Additional Information

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EDITOR: Theresa A. Weeks
CONTRIBUTING EDITORS: Kim F. Laabs, Linda Wereley, Janet L. LeNoble

ISSN 1053-3826

KELLER'S

INDUSTRIAL SAFETY REPORT

SPECIAL REPORT ON TIER ONE AND TIER TWO REPORTING

FEATURED THIS MONTH

This SPECIAL REPORT focuses on the Tier One and Tier Two reporting required under SARA Title III - Community Right to Know. Tier One and Tier Two reports are due March 1.

In this Special Report, we will answer: who must report; what chemicals are regulated; where do reports get sent; and what changes can be expected in this year's reporting.

Community Right To Know

What Is Community Right To Know?

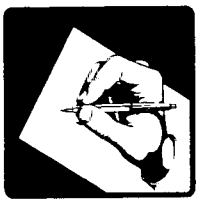
The Superfund Amendments Reauthorization Act (SARA), Title III, was developed in 1987 by EPA to address concerns that communities have over the possibilities of emergencies due to the inplant storage and/or release of hazardous chemicals. This community concern was triggered by the thousands of deaths resulting from the methylisocyanate release in Bhopal, India.

SARA, also known as Community Right To Know, is a complicated collection of regulations that establishes new authorities for emergency planning and preparedness, emergency release notification, community right to know reporting, and toxic chemical release reporting.

SARA requires companies to report what hazardous substances they have in plant and to provide safety and health information related to these substances. The data is intended to help communities focus on the substances and facilities of the most immediate concern for emergency planning and response.

This Special Report is primarily concerned with Section 312 of SARA, Title III. Under Section 312, all facilities affected by the OSHA Hazard Communication Standard that have hazardous chemicals at or above the reporting thresholds must submit a Tier One or Tier Two inventory form. This submission is due annually on March 1.

Penalties for noncompliance are quite severe. Fines could be as much as $25,000 per day. Each day that a violation continues is considered a separate violation.



Right To Know Reporting

Tier One and Tier Two Reporting

Any facility which must prepare or have available material safety data sheets under OSHA's Hazard Communication Standard is subject to Tier One/Tier Two reporting. Under Section 312, there are two categories of regulated substances First, there are extremely hazardous substances (EHSs) - 360 chemicals found in Part 355, Appendix A and B. Second, there are hazardous chemicals - any chemical regulated by OSHA under Hazard Communication, probable 55,000 to 60,000 chemicals.

You must report on all hazardous chemicals that you have 10,000 pounds or more of, now or at any time during the preceding year, and

any of the Extremely Hazardous Substances in amounts over 500 pounds (or 55 gallons) or the threshold planning quantity, whichever is less.

On the Tier One form, chemicals must be grouped in OSHA hazard categories, as to:

A. Estimated ranges of the maximum amount, in each of 5 hazard categories, present during the preceding calendar year;

B. Estimated ranges of the average daily amount, in each category, present during the preceding calendar year;

C. The general location of hazardous chemicals in each category.

Tier Two forms normally need only be submitted upon request from the local emergency planning committee, state commissions, and/or local fire departments. However, nearly every state requests the Tier Two form for the March 1 reporting. See the State Emergency Response Commission Contact List later in this report to determine whether your state requires the Tier One or Tier Two form to be filed.

Some states have developed their own versions of the Tier One and Tier Two reporting forms, while other states require the federal forms to be used. The contact list will also enable you to determine whether a state form or the federal form must be filed. You may wish to check with your state agency for additional details.

Tier Two forms, whether state or federal, require specific information on each hazardous chemical at the facility, a description of its storage, and the exact location of the hazardous chemical. Tier Two forms must be submitted within 30 days of the receipt of a request for submission.

Under uniform deadlines set in 1990, all facilities that have regulated amounts of hazardous chemicals must submit a Tier One or a Tier Two on March 1 of each year.

Changes To The Tier One And Tier Two Reporting Forms

According to government sources, there are no changes to the federal Tier One and Tier Two forms from last year. Copies of the current federal forms can be found later in this report. If your state requires a state form to be filed, check with your state to determine if the forms have changed.

In addition, there have been no changes to the list of Extremely Hazardous Substances and their threshold planning quantities that are the subject of reporting. The list of EHSs and the threshold planning quantities may also be found later in this report.

Questions And Answers On Tier One And Tier Two Reporting

Does Tier One/Tier Two reporting apply only to manufacturers?

Definitely not. Any facility which must prepare or have available material safety data sheets as required by OSHA's Hazard Communication Standard (1910 1200) may be required to submit a Tier One or Tier Two. Reporting is triggered if the facility has 10,000 pounds or more of a hazardous chemical or if the facility has 500 pounds or the threshold planning quantity, whichever is less, of an EHS at any time during the year.

How do I know if I need to submit a Tier One/II Form?

Determining your reporting requirements can be a time-consuming process. It involves detailed information on your chemical inventory. You need to know what chemicals you have and the maximum amount at any one time. Then you will need to compare your inventory with the EHS list to see if you have any EHS chemicals in the regulated quantities.

Following that, you will take all the rest of your hazardous chemicals, and determine if you ever have 10,000 pounds of any one chemical at one time. If the answer is yes in either case, then you must submit an inventory report on every chemical that is over the regulated quantity.

Where do I have to send the Tier One or II?

Copies of the forms must be submitted to three places. The first is the State Emergency Response Commission; the second is the Local

Emergency Planning Committee; and the third is your local fire department. Addresses for the State Commissions can be found later in this Report

Most of the chemicals my company uses are mixtures. How do I report on mixtures?

If a chemical is part of a mixture, you have the option of reporting either the weight of the entire mixture or only the portion that is a particular hazardous chemical. For example, if a hazardous solution, ABC, weighs 100 pounds but is composed of only 10% sulfuric acid, you can indicate in your reporting either 100 pounds of ABC or 10 pounds of sulfuric acid

IMPORTANT NOTE: Extremely Hazardous Substances (those 360 specific chemicals) are treated a little differently than the general hazardous chemical. The amount of an EHS at a facility (both pure substances and EHSs in mixtures) must be aggregated for purposes of threshold determination. Once you determine whether a threshold for an EHS has been reached, you should report either the total weight of the EHS at your facility, or the weight of each mixture containing the EHS.

Both the Tier One and Tier Two ask me to check off physical and health hazards that apply. Where do I find this information?

The reporting required under Sections 311 and 312 asks that you break down your chemicals into 5 categories - two health hazards, three physical hazards. These five hazard categories are a consolidation of the 23 hazard categories defined in the OSHA Hazard Communication Standard, 29 CFR 1910.1200.

Examine the MSDS for the substance you are reporting on. Using the chart below, you should be able to convert the hazard information on the MSDS into the hazard information that EPA is looking for.

Remember, you will often have multiple hazards to check off for one substance. For instance, a hazardous substance might be both flammable and highly toxic. Looking at the chart, you see that you must check "Fire Hazard" and "Immediate (Acute) Health Hazards "

HAZARD CATEGORY CONVERSION

EPA's Hazard Categories	OSHA's Hazard Categories
Fire Hazard	Flammable Combustion Liquid Pyrophoric Oxidizer
Sudden Release of Pressure	Explosive Compressed Gas
Reactive	Unstable Reactive Organic Peroxide Water Reactive
Immediate (Acute) Health Hazards	Highly Toxic Toxic Irritant Sensitizer Corrosive Other hazardous chemicals with an adverse effect with short term exposure.
Delayed (Chronic) Health Hazards	Carcinogens Other hazardous chemicals with an adverse effect with long term exposure.

Page _____ of _____ pages

Form Approved OMB No. 2050-0072

Revised June 1990

Tier One

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Aggregate Information by Hazard Type

FOR OFFICIAL USE ONLY

ID #

Date Received

Important. Read instructions before completing form

Reporting Period From January 1 to December 31, 19 _____

Facility Identification

Name _____

Street _____

City _____ County _____ State _____ Zip _____

SIC Code [ ][ ][ ][ ] Dun & Brad Number [ ][ ]-[ ][ ][ ]-[ ][ ][ ][ ]

Owner/Operator

Name _____

Mail Address _____

Phone ( )

Emergency Contacts

Name _____

Title _____

Phone ( )

24 Hour Phone ( )

Name _____

Title _____

Phone ( )

24 Hour Phone ( )

☐ **Check if information below is identical to the information submitted last year.**

☐ Check if site plan is attached

	Hazard Type	Max Amount*	Average Daily Amount*	Number of Days On-Site	General Location
Physical Hazards	Fire				
	Sudden Release of Pressure				
	Reactivity				
Health Hazards	Immediate (acute)				
	Delayed (Chronic)				

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through _____, and that based on my inquiry of those individuals responsible for obtaining the information I believe that the submitted information is true, accurate and complete

_____

Name and official title of owner/operator OR owner/operator's authorized representative

Signature _____ Date signed _____

*Reporting Ranges

Range Code	Weight Range In Pounds From	To
01	0	99
02	100	999
03	1000	9,999
04	10,000	99,999
05	100,000	999,999
06	1,000,000	9,999,999
07	10,000,000	49,999,999
08	50,000,000	99,999,999
09	100,000,000	499,999,999
10	500,000,000	999,999,999
11	1 billion	higher than 1 billion

Form Approved OMB No. 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name _____

Street _____

City _____ County _____ State _____ Zip _____

SIC Code [ ][ ][ ][ ] Dun & Brad Number [ ][ ] - [ ][ ][ ] - [ ][ ][ ][ ]

FOR OFFICIAL USE ONLY

ID # _____

Date Received _____

Owner/Operator Name

Name _____ Phone ( ) _____

Mail Address _____

Emergency Contact

Name _____ Title _____

Phone ( ) _____ 24 Hr Phone ( ) _____

Name _____ Title _____

Phone ( ) _____ 24 Hr Phone ( ) _____

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19 _____

☐ Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) — Container Type, Temperature, Pressure; *Storage Locations*	Optional
CAS [ ][ ][ ][ ][ ][ ] [ ][ ] [ ] Trade Secret [ ] Chem. Name _____ *Check all that apply:* ☐ Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas ☐ EHS EHS Name _____	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic)	[ ][ ] Max. Daily Amount (code) [ ][ ] Avg. Daily Amount (code) [ ][ ][ ] No. of Days On-site (days)		☐
CAS [ ][ ][ ][ ][ ][ ] [ ][ ] [ ] Trade Secret [ ] Chem. Name _____ *Check all that apply:* ☐ Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas ☐ EHS EHS Name _____	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic)	[ ][ ] Max. Daily Amount (code) [ ][ ] Avg. Daily Amount (code) [ ][ ][ ] No. of Days On-site (days)		☐
CAS [ ][ ][ ][ ][ ][ ] [ ][ ] [ ] Trade Secret [ ] Chem. Name _____ *Check all that apply:* ☐ Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas ☐ EHS EHS Name _____	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic)	[ ][ ] Max. Daily Amount (code) [ ][ ] Avg. Daily Amount (code) [ ][ ][ ] No. of Days On-site (days)		☐

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through _____ and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Name and official title of owner/operator OR owner/operator's authorized representative _____ Signature _____ Date signed _____

Optional Attachments

☐ I have attached a site plan

☐ I have attached a list of site coordinate abbreviations

☐ I have attached a description of dikes and other safeguard measures

Form Approved OMB No. 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name _____

Street _____

City _____ County _____ State _____ Zip _____

SIC Code [ ][ ][ ][ ] Dun & Brad Number [ ][ ] - [ ][ ][ ] - [ ][ ][ ][ ]

FOR OFFICIAL USE ONLY

ID # _____

Date Received _____

Owner/Operator Name

Name _____ Phone ( ) _____

Mail Address _____

Emergency Contact

Name _____ Title _____

Phone ( ) _____ 24 Hr Phone ( ) _____

Name _____ Title _____

Phone ( ) _____ 24 Hr Phone ( ) _____

Important. Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 _____

[ ] Check if information below is identical to the information submitted last year

Confidential Location Information Sheet

CAS	Chem Name	Container Type	Temperature	Pressure	Storage Codes and Locations (Non-Confidential) — Storage Locations	Optional
						[ ]
						[ ]
						[ ]

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through _____ and that based on my inquiry of those individuals responsible for obtaining the information I believe that the submitted information is true, accurate, and complete.

Name and official title of owner/operator OR owner/operator's authorized representative _____ Signature _____ Date signed _____

Optional Attachments

[ ] I have attached a site plan

[ ] I have attached a list of site coordinate abbreviations

[ ] I have attached a description of dikes and other safeguard measures

LIST OF EXTREMELY HAZARDOUS SUBSTANCES AND THEIR THRESHOLD PLANNING QUANTITIES

[Alphabetical Order]

CAS NO.	Chemical Name	Notes	Reportable quantity* (pounds)	Threshold planning quantity (pounds)
75-86-5	Acetone cyanohydrin		10	1,000
1752-30-3	Acetone thiosemicarbazide	e	1	1,000/10,000
107-02-8	Acrolein		1	500
79-06-1	Acrylamide	d,l	5,000	1,000/10,000
107-13-1	Acrylonitrile	d,l	100	10,000/10,000
814-68-6	Acrylyl chloride	e,h	1	100
111-69-3	Adiponitrile	e,l	1	1,000
116-06-3	Aldicarb	c	1	100/10,000
309-00-2	Aldrin	d	1	500/10,000
107-18-6	Allyl alcohol		100	1,000
107-11-9	Allylamine	e	1	500
20859-73-8	Aluminum phosphide	b	100	500
54-62-6	Aminopterin	e	1	500/10,000
78-53-5	Amiton	e	1	500
3734-97-2	Amiton oxalate	e	1	100/10,000
7664-41-7	Ammonia	l	100	500
300-62-9	Amphetamine	e	1	1,000
62-53-3	Aniline	d,l	5,000	1,000
88-05-1	Aniline, 2,4,6-trimethyl-	e	1	500
7783-70-2	Antimony pentafluoride	e	1	500
1397-94-0	Antimycin A	c,e	1	1,000/10,000
86-88-4	ANTU		100	500/10,000
1303-28-2	Arsenic pentoxide	d	1	100/10,000
1327-53-3	Arsenous oxide	d,h	1	100/10,000
7784-34-1	Arsenous trichloride	d	1	500
7784-42-1	Arsine	e	1	100
2642-71-9	Azinphos-ethyl	e	1	100/10,000
86-50-0	Azinphos-methyl		1	10/10,000
98-87-3	Benzal chloride	d	5,000	500
98-16-8	Benzenamine, 3-(trifluoromethyl)-	e	1	500
100-14-1	Benzene, 1-(chloromethyl)-4-Nitro-	e	1	500/10,000
98-05-5	Benzenearsonic acid	e	1	10/10,000
3615-21-2	Benzimidazole, 4,5-dichloro-2-(trifluoromethyl)-	e,g	1	500/10,000
98-07-7	Benzotrichloride	d	10	500
100-44-7	Benzyl chloride	d	100	500
140-29-4	Benzyl cyanide	e,h	1	500
15271-41-7	Bicyclo(2.2.1)heptane-2-carbonitrile, 5-chloro-6-(((methylamino) carbonyl) oxy)imino)-,(1s-(1-alpha, 2-beta, 4-alpha, 5-alpha, 6E))-	e	1	500/10,000
534-07-6	Bis(chloromethyl) ketone	e	1	10/10,000
4044-65-9	Bitoscanate	e	1	500/10,000
10294-34-5	Boron trichloride	e	1	500
7637-07-2	Boron trifluoride	e	1	500
353-42-4	Boron trifluoride compound with methyl ether (1:1)	e	1	1,000
28772-56-7	Bromadiolone	e	1	100/10,000
7726-95-6	Bromine	e,l	1	500
1306-19-0	Cadmium oxide	e	1	100/10,000
2223-93-0	Cadmium stearate	c,e	1	1,000/10,000
7778-44-1	Calcium arsenate	d	1	500/10,000
8001-35-2	Camphechlor	d	1	500/10,000
56-25-7	Cantharidin	e	1	100/10,000
51-83-2	Carbachol chloride	e	1	500/10,000
26419-73-8	Carbamic acid, methyl-, O-(((2,4-Dimethyl-1, 3-Dithiolan-2-yl) Methylene)Amino)-	e	1	100/10,000
1563-66-2	Carbofuran		10	10/10,000
75-15-0	Carbon disulfide	l	100	10,000/10,000
786-19-6	Carbophenothion	e	1	500
57-74-9	Chlordane	d	1	1,000
470-90-6	Chlorfenvinfos	e	1	500
7782-50-5	Chlorine		10	100
24934-91-6	Chlormephos	e	1	500
999-81-5	Chlormequat chloride	e,h	1	100/10,000
79-11-8	Chloroacetic acid	e	1	100/10,000
107-07-3	Chloroethanol	e	1	500
627-11-2	Chloroethyl chloroformate	e	1	1,000
67-66-3	Chloroform	d,l	10	10,000

LIST OF EXTREMELY HAZARDOUS SUBSTANCES AND THEIR THRESHOLD PLANNING QUANTITIES, Continued

CAS NO.	Chemical Name	Notes	Reportable quantity* (pounds)	Threshold planning quantity (pounds)
542-88-1	Chloromethyl ether	d,h	10	100
107-30-2	Chloromethyl methyl ether	c,d	10	100
3691-35-8	Chlorophacinone	e	1	100/10,000
1982-47-4	Chloroxuron	e	1	500/10,000
21923-23-9	Chlorthiophos	e,h	1	500
10025-73-7	Chromic chloride	e	1	1/10,000
10210-68-1	Cobalt carbonyl	e,h	1	10/10,000
62207-76-5	Cobalt, ((2,2'-(1,2-ethanediylbis (nitrilomethylidyne)) bis(6-fluoro-phenolato))(2-)N,N',O,O')-,	e	1	100/10,000
64-86-8	Colchicine	e,h	1	10/10,000
56-72-4	Coumaphos		10	100/10,000
5836-29-3	Coumatetralyl	e	1	500/10,000
95-48-7	o-Cresol(s)	d	1,000	1,000/10,000
535-89-7	Crimidine	e	1	100/10,000
4170-30-3	Crotonaldehyde		100	1,000
123-73-9	Crotonaldehyde (E)		100	1,000
506-68-3	Cyanogen bromide		1,000	500/10,000
506-78-5	Cyanogen iodide	e	1	1,000/10,000
2636-26-2	Cyanophos	e	1	1,000
675-14-9	Cyanuric fluoride	e	1	100
66-81-9	Cycloheximide	e	1	100/10,000
108-91-8	Cyclohexylamine	e,l	1	10,000/10,000
17702-41-9	Decaborane (14)	e	1	500/10,000
8065-48-3	Demeton	e	1	500
919-86-8	Demeton-s-methyl	e	1	500
10311-84-9	Dialifos	e	1	100/10,000
19287-45-7	Diborane	e	1	100
111-44-4	Dichloroethyl ether	d	10	10,000
149-74-6	Dichloromethylphenylsilane	e	1	1,000
62-73-7	Dichlorvos		10	1,000
141-66-2	Dicrotophos	e	1	100
1464-53-5	1,2:3,4-Diepoxybutane	d	10	500
814-49-3	Diethyl chlorophosphate	e,h	1	500
1642-54-2	Diethylcarbamazine citrate	e	1	100/10,000
71-63-6	Digitoxin	c,e	1	100/10,000
2238-07-5	Diglycidyl ether	e	1	1,000
20830-75-5	Digoxin	e,h	1	10/10,000
115-26-4	Dimefox	e	1	500
60-51-5	Dimethoate		10	500/10,000
2524-03-0	Dimethyl phosphorochloridothioate	e	1	500
77-78-1	Dimethyl sulfate	d	100	500
99-98-9	Dimethyl-p-phenylenediamine	e	1	10/10,000
75-78-5	Dimethyldichlorosilane	e,h	1	500
57-14-7	1,1-Dimethylhydrazine	d	10	1,000
644-64-4	Dimetilan	e	1	500/10,000
534-52-1	Dinitrocresol		10	10/10,000
88-85-7	Dinoseb		1,000	100/10,000
1420-07-1	Dinoterb	e	1	500/10,000
78-34-2	Dioxathion	e	1	500
82-66-6	Diphacinone	e	1	10/10,000
152-16-9	Diphosphoramide, octamethyl-		100	100
298-04-4	Disulfoton		1	500
514-73-8	Dithiazanine iodide	e	1	500/10,000
541-53-7	2,4-Dithiobiuret		100	100/10,000
2104-64-5	EPN	e	1	100/10,000
316-42-7	Emetine, dihydrochloride	e,h	1	1/10,000
115-29-7	Endosulfan		1	10/10,000
2778-04-3	Endothion	e	1	500/10,000
72-20-8	Endrin		1	500/10,000
106-89-8	Epichlorohydrin	d,l	100	1,000
50-14-6	Ergocalciferol	c,e	1	1,000/10,000
379-79-3	Ergotamine tartrate	e	1	500/10,000
1622-32-8	Ethanesulfonyl chloride, 2-chloro-	e	1	500
10140-87-1	Ethanol, 1,2-dichloro-, acetate	e	1	1,000
563-12-2	Ethion		10	1,000
13194-48-4	Ethoprophos	e	1	1,000

LIST OF EXTREMELY HAZARDOUS SUBSTANCES AND THEIR THRESHOLD PLANNING QUANTITIES, Continued

CAS NO.	Chemical Name	Notes	Reportable quantity* (pounds)	Threshold planning quantity (pounds)
542-90-5	Ethyl thiocyanate	e	1	10,000/10,000
538-07-8	Ethylbis(2-chloroethyl)amine	e,h	1	500
371-62-0	Ethylene fluorohydrin	c,e,h	1	10
75-21-8	Ethylene oxide	d,l	10	1,000
107-15-3	Ethylenediamine		5,000	10,000/10,000
151-56-4	Ethylenimine	d	1	500
22224-92-6	Fenamiphos	e	1	10/10,000
122-14-5	Fenitrothion	e	1	500
115-90-2	Fensulfothion	e,h	1	500
4301-50-2	Fluenetil	e	1	100/10,000
7782-41-4	Fluorine	k	10	500
640-19-7	Fluoroacetamide	j	100	100/10,000
144-49-0	Fluoroacetic acid	e	1	10/10,000
359-06-8	Fluoroacetyl chloride	c,e	1	10
51-21-8	Fluorouracil	e	1	500/10,000
944-22-9	Fonofos	e	1	500
50-00-0	Formaldehyde	d,l	100	500
107-16-4	Formaldehyde cyanohydrin	e,h	1	1,000
23422-53-9	Formetanate	e,h	1	500/10,000
2540-82-1	Formothion	e	1	100
17702-57-7	Formparanate	e	1	100/10,000
21548-32-3	Fosthietan	e	1	500
3878-19-1	Fuberidazole	e	1	100/10,000
110-00-9	Furan		100	500
13450-90-3	Gallium trichloride	e	1	500/10,000
77-47-4	Hexachlorocyclopentadiene	d,h	10	100
4835-11-4	Hexamethylenediamine, N,N'-dibutyl-	e	1	500
302-01-2	Hydrazine	d	1	1,000
74-90-8	Hydrocyanic acid		10	100
7647-01-0	Hydrogen chloride (gas only)	e,l	5,000	500
7664-39-3	Hydrogen fluoride		100	100
7722-84-1	Hydrogen peroxide (conc. greater than 52%)	e,l	1	1,000
7783-07-5	Hydrogen selenide	e	1	10
7783-06-4	Hydrogen sulfide	l	100	500
123-31-9	Hydroquinone	l	1	500/10,000
13463-40-6	Iron, Pentacarbonyl-	e	1	100
297-78-9	Isobenzan	e	1	100/10,000
78-82-0	Isobutyronitrile	e,h	1	1,000
102-36-3	Isocyanic acid, 3,4-dichlorophenyl ester	e	1	500/10,000
465-73-6	Isodrin		1	100/10,000
55-91-4	Isofluorphate	c	100	100
4098-71-9	Isophorone diisocyanate	b,e	1	100
108-23-6	Isopropyl chloroformate	e	1	1,000
119-38-0	Isopropylmethylpyrazolyl dimethylcarbamate	e	1	500
78-97-7	Lactonitrile	e	1	1,000
21609-90-5	Leptophos	e	1	500/10,000
541-25-3	Lewisite	c,e,h	1	10
58-89-9	Lindane	d	1	1,000/10,000
7580-67-8	Lithium hydride	b,e	1	100
109-77-3	Malononitrile		1,000	500/10,000
12108-13-3	Manganese, tricarbonyl methylcyclopentadienyl	e,h	1	100
51-75-2	Mechlorethamine	c,e	1	10
950-10-7	Mephosfolan	e	1	500
1600-27-7	Mercuric acetate	e	1	500/10,000
7487-94-7	Mercuric chloride	e	1	500/10,000
21908-53-2	Mercuric oxide	e	1	500/10,000
10476-95-6	Methacrolein diacetate	e	1	1,000
760-93-0	Methacrylic anhydride	e	1	500
126-98-7	Methacrylonitrile	h	1,000	500
920-46-7	Methacryloyl chloride	e	1	100
30674-80-7	Methacryloyloxyethyl isocyanate	e,h	1	100
10265-92-6	Methamidophos	e	1	100/10,000
558-25-8	Methanesulfonyl fluoride	e	1	1,000
950-37-8	Methidathion	e	1	500/10,000
2032-65-7	Methiocarb		10	500/10,000
16752-77-5	Methomyl	h	100	500/10,000

LIST OF EXTREMELY HAZARDOUS SUBSTANCES AND THEIR THRESHOLD PLANNING QUANTITIES, Continued

CAS NO.	Chemical Name	Notes	Reportable quantity* (pounds)	Threshold planning quantity (pounds)
151-38-2	Methoxyethylmercuric acetate	e	1	500/10,000
80-63-7	Methyl 2-chloroacrylate	e	1	500
74-83-9	Methyl bromide	l	1,000	1,000
79-22-1	Methyl chloroformate	d,h	1,000	500
60-34-4	Methyl hydrazine		10	500
624-83-9	Methyl isocyanate	f	1	500
556-61-6	Methyl isothiocyanate	b,e	1	500
74-93-1	Methyl mercaptan	l	100	500
3735-23-7	Methyl phenkapton	e	1	500
676-97-1	Methyl phosphonic dichloride	b,e	1	100
556-64-9	Methyl thiocyanate	e	1	10,000/10,000
78-94-4	Methyl vinyl ketone	e	1	10
502-39-6	Methylmercuric dicyanamide	e	1	500/10,000
75-79-6	Methyltrichlorosilane	e,h	1	500
1129-41-5	Metolcarb	e	1	100/10,000
7786-34-7	Mevinphos		10	500
315-18-4	Mexacarbate		1,000	500/10,000
50-07-7	Mitomycin C	d	10	500/10,000
6923-22-4	Monocrotophos	e	1	10/10,000
2763-96-4	Muscimol		1,000	500/10,000
505-60-2	Mustard gas	e,h	1	500
13463-39-3	Nickel carbonyl	d	10	1
54-11-5	Nicotine	c	100	100
65-30-5	Nicotine sulfate	e	100	100/10,000
7697-37-2	Nitric acid		1,000	1,000
10102-43-9	Nitric oxide	c	10	100
98-95-3	Nitrobenzene	l	1,000	10,000/10,000
1122-60-7	Nitrocyclohexane	e	1	500
10102-44-0	Nitrogen dioxide		10	100
62-75-9	N-Nitrosodimethylamine	d,h	10	1,000
991-42-4	Norbormide	e	1	100/10,000
	Organorhodium complex (PMN-82-147)	e	1	10/10,000
630-60-4	Ouabain	c,e	1	100/10,000
23135-22-0	Oxamyl	e	1	100/10,000
78-71-7	Oxetane, 3,3-bis(chloromethyl)-	e	1	500
2497-07-6	Oxydisulfoton	e,h	1	500
10028-15-6	Ozone	e	1	100
1910-42-5	Paraquat	e	1	10/10,000
2074-50-2	Paraquat methosulfate	e	1	10/10,000
56-38-2	Parathion	c,d	10	100
298-00-0	Parathion-methyl	c	100	100/10,000
12002-03-8	Paris green	d	1	500/10,000
19624-22-7	Pentaborane	e	1	500
2570-26-5	Pentadecylamine	e	1	100/10,000
79-21-0	Peracetic acid	e	1	500
594-42-3	Perchloromethylmercaptan		100	500
108-95-2	Phenol		1,000	500/10,000
4418-66-0	Phenol, 2,2'-thiobis(4-chloro-6-methyl)-	e	1	100/10,000
64-00-6	Phenol, 3-(1-methylethyl)-, methylcarbamate	e	1	500/10,000
58-36-6	Phenoxarsine, 10,10'-oxydi-	e	1	500/10,000
696-28-6	Phenyl dichloroarsine	d,h	1	500
59-88-1	Phenylhydrazine hydrochloride	e	1	1,000/10,000
62-38-4	Phenylmercury acetate		100	500/10,000
2097-19-0	Phenylsilatrane	e,h	1	100/10,000
103-85-5	N-Phenylthiourea		100	100/10,000
298-02-2	Phorate		10	10
4104-14-7	Phosacetim	e	1	100/10,000
947-02-4	Phosfolan	e	1	100/10,000
75-44-5	Phosgene	l	10	10
732-11-6	Phosmet	e	1	10/10,000
13171-21-6	Phosphamidon	e	1	100
7803-51-2	Phosphine		100	500
2703-13-1	Phosphonothioic acid, methyl-, O-ethyl O-(4-(methylthio) phenyl)ester	e	1	500
50782-69-9	Phosphonothioic acid, methyl-, S-(2-(bis(1-methylethyl)amino) ethyl)O-ethyl ester	e	1	100

LIST OF EXTREMELY HAZARDOUS SUBSTANCES AND THEIR THRESHOLD PLANNING QUANTITIES, Continued

CAS NO.	Chemical Name	Notes	Reportable quantity* (pounds)	Threshold planning quantity (pounds)
2665-30-7	Phosphonothioic acid, methyl-,O-(4-nitrophenyl) O-phenyl ester	e	1	500
3254-63-5	Phosphoric acid, dimethyl 4-(methylthio) phenyl ester	e	1	500
2587-90-8	Phosphorothioic acid, O,O-dimethyl-s-(2-methylthio) ethyl ester	c,e,g	1	500
7723-14-0	Phosphorus	b,h	1	100
10025-87-3	Phosphorus oxychloride	d	1,000	500
10026-13-8	Phosphorus pentachloride	b,e	1	500
1314-56-3	Phosphorus pentoxide	b,e	1	10
7719-12-2	Phosphorus trichloride		1,000	1,000
57-47-6	Physostigmine	e	1	100/10,000
57-64-7	Physostigmine, salicylate (1:1)	e	1	100/10,000
124-87-8	Picrotoxin	e	1	500/10,000
110-89-4	Piperidine	e	1	1,000
23505-41-1	Pirimifos-ethyl	e	1	1,000
10124-50-2	Potassium arsenite	d	1	500/10,000
151-50-8	Potassium cyanide	b	10	100
506-61-6	Potassium silver cyanide	b	1	500
2631-37-0	Promecarb	e,h	1	500/10,000
106-96-7	Propargyl bromide	e	1	10
57-57-8	Propiolactone, beta-	e	1	500
107-12-0	Propionitrile		10	500
542-76-7	Propionitrile 3-chloro-		1,000	1,000
70-69-9	Propiophenone, 4 amino-	e,g	1	100/10,000
109-61-5	Propyl chloroformate	e	1	500
75-56-9	Propylene oxide	l	100	10,000/10,000
75-55-8	1,2-Propylenimine	d	1	10,000/10,000
2275-18-5	Prothoate	e	1	100/10,000
129-00-0	Pyrene	c	5,000	1,000/10,000
140-76-1	Pyridine, 2-methyl-5-vinyl-	e	1	500
504-24-5	Pyridine, 4-amino-	h	1,000	500/10,000
1124-33-0	Pyridine, 4-nitro-, 1-oxide	e	1	500/10,000
53558-25-1	Pyriminil	e,h	1	100/10,000
14167-18-1	Salcomine	e	1	500/10,000
107-44-8	Sarin	e,h	1	10
7783-00-8	Selenious acid		10	1,000/10,000
7791-23-3	Selenium oxychloride	e	1	500
563-41-7	Semicarbazide hydrochloride	e	1	1,000/10,000
3037-72-7	Silane, (4-aminobutyl)diethoxymethyl-	e	1	1,000
7631-89-2	Sodium arsenate	d	1	1,000/10,000
7784-46-5	Sodium arsenite	d	1	500/10,000
26628-22-8	Sodium azide	b	1,000	500
124-65-2	Sodium cacodylate	e	1	100/10,000
143-33-9	Sodium cyanide	b	10	100
62-74-8	Sodium fluoroacetate		10	10/10,000
13410-01-0	Sodium selenate	e	1	100/10,000
10102-18-8	Sodium selenite	h	100	100/10,000
10102-20-2	Sodium tellurite	e	1	500/10,000
900-95-8	Stannane, Acetoxytriphenyl-	e,g	1	500/10,000
57-24-9	Strychnine	c	10	100/10,000
60-41-3	Strychnine, sulfate	e	10	100/10,000
3689-24-5	Sulfotep		100	500
3569-57-1	Sulfoxide, 3-chloropropyl octyl	e	1	500
7446-09-5	Sulfur dioxide	e,l	1	500
7783-60-0	Sulfur tetrafluoride	e	1	100
7446-11-9	Sulfur trioxide	b,e	1	100
7664-93-9	Sulfuric acid,		1,000	1,000
77-81-6	Tabun	c,e,h	1	10
13494-80-9	Tellurium	e	1	500/10,000
7783-80-4	Tellurium hexafluoride	e,k	1	100
107-49-3	TEPP		10	100
13071-79-9	Terbufos	e,h	1	100
78-00-2	Tetraethyl lead	c,d	10	100
597-64-8	Tetraethyltin	c,e	1	100
75-74-1	Tetramethyl lead	c,e,l	1	100
509-14-8	Tetranitromethane		10	500

LIST OF EXTREMELY HAZARDOUS SUBSTANCES AND THEIR THRESHOLD PLANNING QUANTITIES, Continued

CAS NO.	Chemical Name	Notes	Reportable quantity* (pounds)	Threshold planning quantity (pounds)
10031-59-1	Thallium sulfate	h	100	100/10,000
6533-73-9	Thallous carbonate	c,h	100	100/10,000
7791-12-0	Thallous chloride	c,h	100	100/10,000
2757-18-8	Thallous malonate	c,e,h	1	100/10,000
7446-18-6	Thallous sulfate		100	100/10,000
2231-57-4	Thiocarbazide	e	1	1,000/10,000
39196-18-4	Thiofanox		100	100/10,000
297-97-2	Thionazin		100	500
108-98-5	Thiophenol		100	500
79-19-6	Thiosemicarbazide		100	100/10,000
5344-82-1	Thiourea, (2-chlorophenyl)-		100	100/10,000
614-78-8	Thiourea, (2-methylphenyl)-	e	1	500/10,000
7550-45-0	Titanium tetrachloride	e	1	100
584-84-9	Toluene 2,4-diisocyanate		100	500
91-08-7	Toluene 2,6-diisocyanate		100	100
110-57-6	Trans-1,4-dichlorobutene		1	500
1031-47-6	Triamiphos	e	1	500/10,000
24017-47-8	Triazofos	e	1	500
1558-25-4	Trichloro(choromethyl)silane	e	1	100
27137-85-5	Trichloro(dichlorophenyl)silane	e	1	500
76-02-8	Trichloroacetyl chloride	e	1	500
115-21-9	Trichloroethylsilane	e,h	1	500
327-98-0	Trichloronate	e,k	1	500
98-13-5	Trichlorophenylsilane	e,h	1	500
998-30-1	Triethoxysilane	e	1	500
75-77-4	Trimethylchlorosilane	e	1	1,000
824-11-3	Trimethylolpropane phosphite	e,h	1	100/10,000
1066-45-1	Trimethyltin chloride	e	1	500/10,000
639-58-7	Triphenyltin chloride	e	1	500/10,000
555-77-1	Tris(2-chloroethyl)amine	e,h	1	100
2001-95-8	Valinomycin	c,e	1	1,000/10,000
1314-62-1	Vanadium pentoxide		1,000	100/10,000
108-05-4	Vinyl acetate monomer	d,l	5,000	1,000
81-81-2	Warfarin		100	500/10,000
129-06-6	Warfarin sodium	e,h	100	100/10,000
28347-13-9	Xylylene dichloride	e	1	100/10,000
1314-84-7	Zinc phosphide	b	100	500
58270-08-9	Zinc, dichloro(4,4-dimethyl-5((((methylamino)carbonyl)oxy)imino) pentanenitrile)-,(T-4)-	e	1	100/10,000

*Only the statutory or final RQ is shown. For more information, see 40 CFR Table 302.4

Notes

a This chemical does not meet acute toxicity criteria. Its TPQ is set at 10,000 pounds.

b This material is a reactive solid. The TPQ does not default to 10,000 pounds for non-powder, non-molten, non-solution form

c The calculated TPQ changed after technical review as described in the technical support document

d Indicates that the RQ is subject to change when the assessment of potential carcinogenicity and/or other toxicity is completed

e Statutory reportable quantity for purposes of notification under SARA section 304(a)(2)

f The statutory 1 pound reportable quantity for methyl isocyanate may be adjusted in a future rulemaking action

g New chemicals added that were not part of the original list of 402 substances

h Revised TPQ based on new or re-evaluated toxicity data

j TPQ is revised to its calculated value and does not change due to technical review as in proposed rule

k The TPQ was revised after proposal due to calculation error

l Chemicals on the original list that do not meet toxicity criteria but because of their high production volume and recognized toxicity are considered chemicals of concern ("Other chemicals")

STATE EMERGENCY RESPONSE COMMISSIONS CONTACT LIST

Title III of the Superfund Amendments and Reauthorization Act (SARA) requires every state to set up an emergency response agency. Here is a complete listing of those agencies. The symbols following the name of each state indicate which form is to be filed and whether a fee must be submitted with the filing.

Key to Symbols

* - File federal Tier One form
\# - File state Tier One form
\+ - File federal Tier Two form
@ - File state Tier Two form
$ - fee for filing

Alabama +
Mr. Leigh Pegues, Co-Chair
Alabama Emergency Response Commission
Director, Alabama Department of
Environmental Management
1751 Federal Drive
Montgomery, Alabama 36130
(205) 271-7700

Alaska +
Camille Stevens
Alaska State Emergency Response Commission
P O. Box A
Juneau, Alaska 99811
(907) 465-5239

Arizona +
Ethel DeMarr, Assistant Director
Arizona Emergency Response Commission
Division of Emergency Management
5636 East McDowell Road
Phoenix, Arizona 85008
(602) 221-6221

Arkansas +
Randall Mathis, Director
Arkansas Hazardous Materials Emergency
Response Commission
Arkansas Department of Pollution
Control & Ecology
P.O Box 9583
8001 National Drive
Little Rock, Arkansas 72219
(501) 562-7444

California #
California Emergency Response Commission
Hazardous Materials
2800 Meadow View Road
Sacramento, California 95832
(916) 262-1750

Colorado +
Richard Bardsley
Colorado Emergency Planning & Community
Right to Know Commission
Division of Disaster Emer. Services
Camp George West
Golden, Colorado 80401
(303) 273-1624

Connecticut +
Sue Vaughn
Connecticut Emergency Response Commission
State Office Building, Room 161
165 Capitol Avenue
Hartford, Connecticut 06106
(203) 566-4017

Delaware *, +, $
Clifford Graviet, Acting Secretary
Department of Public Safety
Administration Center
Dover, Delaware 19901
(302) 739-5911

District of Columbia +
Pam Thurber
Office of Emergency Preparedness
1000 14th Street, NW
8th Floor
Washington, DC 20009
(202) 722-3155

Florida @, $
Bob Nave, Director
Florida Emergency Response Commission
1720 South Gadsden Street
Tallahassee, Florida 32399
(904) 487-4918

Georgia @
Michelle Ivuy
Georgia Emergency Response Commission
Environmental Protection Division
1152 Floyd Towers East
Atlanta, Georgia 30334
(404) 656-6905

Hawaii +
Rhonda Goyke
Hawaii Emergency Response Commission
Hawaii Department of Health
Environmental Epidemiology Program
P.O Box 3378
Honolulu, Hawaii 96801
(808) 586-4249

Idaho @
Margaret Ballard, Chief of Staff
Idaho Emergency Response Commission
Department of Health & Welfare
State House
Boise, Idaho 83720
(208) 334-5888

Illinois *, +
Ovan Robinson
Illinois Emergency Response Commission
Illinois Emergency Service & Disaster Agency
110 E Adams Street
Springfield, Illinois 62706
(217) 782-4694

Indiana +, $
Denise Nichols
Indiana Department Of Environmental Management
Emergency Response Management
105 South Meridian Street
P.O. Box 6015
Indianapolis, Indiana 46206
(317) 243-5176

Iowa +
Ellen Gordon, Chair
Iowa Emergency Response Commission
Iowa Office of Disaster Services
Hoover Building, Room A-29
Des Moines, Iowa 50319
(515) 281-6175

Kansas +, $
John Flint
Kansas Emergency Response Commission
Kansas Department of Health and Environment
Topeka, Kansas 66620
(913) 296-1690

Kentucky @, $
James R. Everett, Director
Kentucky Emergency Response Commission
Executive Director, Kentucky Disaster and Emergency Services
Boone National Guard Center
Frankfort, Kentucky 40601
(502) 564-8682

Louisiana @, $
Floyd Cox
Louisiana Emergency Response Commission
Department of Public Safety & Correction
Office of Public Safety
P.O. Box 66614
Baton Rouge, Louisiana 70896
(504) 925-6113

Maine @, $
Rayna Leibowitz
Maine Emergency Managements Agency
State Office Building, Station 82
Augusta, Maine 04333
(207) 287-4080

Maryland +
George Harman
Governor's Emergency Management Advisory Council
State Emergency Response Commission
2500 Broening Highway
Baltimore, Maryland 21224
(410) 631-3814

Massachusetts +
Mr. Arnold Sapenter
Title III Emergency Response Commission
Department of Environmental Quality Engineering
One Winter Street
Boston, Massachusetts 02108
(617) 292-5944

Michigan +
Chris Brown
Michigan Department Natural Resources
Environmental Response Division
Title III Notification
P.O. Box 30028
Lansing, Michigan 48909
(517) 373-4112

Minnesota *, $
Paul Aasen, Director
Minnesota Emergency Response Commission
Division of Emergency Services
Room B-5
State Capitol
St. Paul, Minnesota 55155
(612) 643-3000

Mississippi +
J E. Maher, Chair
Mississippi Emergency Response Commission
Director, Mississippi Management Agency
P O Box 4501
Fondran Station
Jackson, Mississippi 39216-0501
(601) 352-9100

Missouri @, $
Dean Martin
Missouri Emergency Response Commission
Missouri Department of Natural Resources
Box 176
Jefferson City, Missouri 65102
(314) 526-3349

Montana * or +
Mr. Tom Ellerhoff
Montana Water Quality Bureau
Department of Health & Environmental Sciences
Cogswell Bldg. A-206
Helena, Montana 59620
(406) 444-3948

Nebraska @
John Stienauer
Nebraska Emergency Response Commission
Nebraska Department of Environmental Control
P.O. Box 94877
State House Station
Lincoln, Nebraska 68509
(402) 471-4251

Nevada @
Kathy Esparza, Program Officer
Division of Emergency Management
2525 S. Carson St.
Carson City, NV 89710
(702) 687-4240

New Hampshire @
George Iverson
State Emergency Management Agency
State Office Park South
107 Pleasant Street
Concord, New Hampshire 03301
(603) 271-2231

New Jersey @
New Jersey Emergency Response Commission
SARA Title III Project
Department of Environmental Protection
Division of Environmental Quality
CN-402
Trenton, New Jersey 08625
(609) 292-6714

New Mexico +, $
New Mexico Emergency Response Commission
New Mexico State Police
Hazardous Materials Bureau
P O. Box 1628
Santa Fe, New Mexico 87504-1628
(505) 827-9226

New York +
Lee Battes, Supervisor
New York Emergency Response Commission
New York State Department of Environmental Conservation
Bureau of Spill Prevention & Response
50 Wolf Road
Room 326
Albany, New York 12233-3510
(518) 457-9958

North Carolina +
Emily Kilpatrick
North Carolina Emergency Response Commission
116 W Jones Street
Raleigh, North Carolina 27611
(919) 733-3867

North Dakota * or +, $
Ron Affeldt, Director
North Dakota State Department of Health
1200 Missouri Avenue
P O. Box 5520
Bismarck, North Dakota 58502-5520
(701) 224-2370

Ohio @, $
Ken Schultz, SARA Title III Coordinator
Ohio Emergency Response Commission
Ohio Environmental Protection Agency
Office of Emergency Response
P.O. Box 1049
Columbus, Ohio 43266-0149
(614) 644-2081

Oklahoma +, $
Monty Elder
Emergency Response Commission
Office of Civil Defense
P.O. Box 53365
Oklahoma City, Oklahoma
(405) 271-8056

Oregon @, $
Oregon Emergency Response Commission
c/o State Fire Marshal
3000 Market Street Plaza
Suite 534
Attn: Survey Section
Salem, Oregon 97310
(503) 378-3473

Pennsylvania +, $
Pennsylvania Emergency Response Commission
SARA Title III Officer
FEMA Response & Recovery
P.O. Box 3321
Harrisburg, Pennsylvania 17025
(717) 783-8150/8193

Rhode Island +
John Aucott
Rhode Island Emergency Response
Commission
Rhode Island Emergency Management Agency
State House M.27
Providence, Rhode Island 02903
(401) 421-7333

South Carolina @
Pete Saussy, Coordinator
South Carolina Emergency Response
Commission
Division of Public Safety Programs
Office of the Governor
1205 Pendleton Street
Columbia, South Carolina 29201
(803) 935-6444

South Dakota +, $
LeeAnn Smith
South Dakota Response Commission
Department of Water & Natural Resources
Joe Foss Building
523 East Capitol
Pierre, South Dakota 57501-3181
(605) 773-3151

Tennessee +
Betty Eaves
Tennessee Emergency Response Council
Tennessee Emergency Management Agency
3041 Sidco Drive
Nashville, Tennessee 37204
(615) 741-0001 or (800) 258-3300

Texas @, $
David Haun
Texas Emergency Response Commission
Division of Emergency Management
P O. Box 4087
Austin, Texas 78773-0001
(512) 465-2138

Utah +
Neil Taylor
Utah Hazardous Chemical Emergency
Response Commission
Department of Health
288 N. 1460 West
P.O. Box 16690
Salt Lake City, Utah 84116-0690
(801) 536-4100

Vermont +, $
VOSHA Worker Right-to-Know
Community Right-to-Know Program
120 State Street
Montpelier, Vermont 05002
(802) 828-2886

Virginia +
David Timberline
Virginia Emergency Response Council
James Madison Building
Room 922
109 Governors Street
Richmond, Virginia 23219
(804) 371-8904
(804) 225-2667

Washington @
James Phillips
Washington Emergency Response Commission
Department of Ecology
Mail Stop PV-11
Olympia, Washington 98504-8711
(206) 459-6312

West Virginia +
Carl Bradford
West Virginia Emergency Response
Commission
Director, Department of Natural Resources
Capitol Building - Room 669
1800 Washington Street, East
Charleston, West Virginia 25305
(304) 558-5380

Wisconsin @, $
Richard I. Braund
Department of Emergency Government
4802 Sheboygan Avenue
Room 99A
Madison, Wisconsin 53707
William Clare (608) 266-1509
Chris Bacon (608)266-1899

Wyoming +
Joseph Daly, Coordinator
Wyoming Emergency Response Management
Comprehensive Emergency Management
5500 Biship Blvd.
P O. Box 1709
Cheyenne, Wyoming 82003
(307) 777-7566

Additional Information

The EPA has established a toll-free hotline to answer your Community Right To Know questions. The hotline is staffed Monday through Friday from 8:30 to 5:00 (Eastern Standard Time). the number is 1-800-535-0202. Hotline staff will be able to respond to Tier One and Tier Two reporting questions.

You may also contact your regional EPA office for information.

EPA REGIONAL OFFICES

EPA Region 1
John F. Kennedy Federal Building
Room 2203
1 Congress St.
Boston, MA 02203
617/565-3420

EPA Region 2
26 Federal Plaza
Room 900
New York, NY 10278
212/264-2525

EPA Region 3
841 Chestnut Street
Philadelphia, PA 19107
215/597-9800

EPA Region 4
345 Courtland Street, N.E.
Atlanta, GA 30365
404/347-7604

EPA Region 5
230 South Dearborn Street
Chicago, IL 60604
312/353-2000

EPA Region 6
1445 Ross Avenue
Suite 1200
Dallas, TX 75202
214/655-2200

EPA Region 7
726 Minnesota Avenue
Kansas City, KS 66101
913/551-7000

EPA Region 8
1860 Lincoln Street
Denver, CO 80295
303/837-3895

EPA Region 9
215 Fremont Street
San Francisco, CA 94105
415/744-1500

EPA Region 10
1200 Sixth Avenue
Seattle, WA 98101
206/442-5810

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Tier One And Tier Two Reporting

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Background Information

- Location
- Description of Sites
- Production Processes
- Previous Investigations
- Report Timelines

Field Investigations

- Surface and Subsurface Investigations
- Site Characterization

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, D.C. 20460

OFFICE OF
SOLID WASTE AND EMERGENCY RESPONSE

December 7, 1987

Dear Facility Manager:

The Environmental Protection Agency (EPA) is gathering extensive information to use in developing regulations pursuant to the Resource Conservation and Recovery Act (RCRA) amendments of 1984. We are asking for your assistance in gathering information on hazardous waste generation and handling at your location.

You will find enclosed EPA's National Survey of Hazardous Waste Generators. Please return the questionnaire within 60 days of the date you receive it. Your response is required under Section 3007 of RCRA. We have included some important details about Confidential Business Information with this letter. Please read this carefully before responding.

The purpose of this survey is to gather information for use in regulatory development. We will use the information you provide in evaluating waste minimization practices; development of the land disposal restrictions rules and exemptions due to lack of alternate waste management capacity; development of standards for the clean-up of solid waste management units at facilities; and for possible revisions to tank regulations.

This package includes nine sections:

- General Facility Information
- Hazardous Waste Characterization
- Fuel Blending
- Reuse as Fuel
- Wastewater Treatment
- Metals Recovery for Reuse
- Solvent and Liquid Organic Recovery for Reuse
- Other Recovery Processes
- Tank Systems

You need only fill out the sections for the types of operations you have onsite that may be conducted without a hazardous waste treatment, storage, or disposal permit or interim status. If you've already completed the Hazardous Waste Treatment, Storage, Disposal, and Recycling Facility Survey, we have only sent you the General Facility Information and Hazardous Waste Characterization sections of the questionnaire. Also enclosed is an instruction booklet which contains definitions of terms and example questions designed to help you complete the questionnaire.

EPA appreciates your efforts to provide timely and accurate information and looks forward to your response. If you have any questions about the survey, please call the toll-free survey helpline (800-635-8850). If you are unable to get through on this number, you may call Jim Craig of my staff at 202-382-2791.

Sincerely,

Marcia Williams, Director
Office of Solid Waste, (WH-562)

Enclosures

ADDENDUM: Confidential Business Information

This addendum addresses information requested in the accompanying letter which you may regard as Confidential Business Information (CBI).

You may not withhold information from the Administrator or his authorized representatives because it is Confidential Business Information (CBI). However, if you designate information as CBI, EPA may disclose that information only to the extent permitted by and in accordance with its regulations concerning confidentiality of business information at Title 40 of the Code of Federal Regulations, Part 2, Subpart B.

You may, if you desire, assert a claim of CBI covering all or part of the information furnished to EPA. You should make any claims by specifically marking the information claimed CBI (such as by circling the information and writing "confidential" next to it). If you do not claim confidentiality when you furnish the information to EPA, we may make the information available to the public without further notice to you.

Section 3007(b) of RCRA and implementing regulations (40 CFR }2.305(h)) authorize EPA to disclose information obtained under Section 3007 to EPA contractors and subcontractors performing work in connection with RCRA notwithstanding the fact that the information might otherwise be entitled to confidential treatment. EPA will transfer the data submitted in the survey, including CBI, to Research Triangle Institute (RTI) of Research Triangle Park, North Carolina, who will process and analyze the data for EPA (Contract Number 68-01-7350). EPA will also transfer the data submitted in this survey to the contractors and subcontractors listed on the following page. The transfer of data submitted to EPA will occur no sooner than 10 days after you receive this letter. During that time, you may submit any comments on the transfer of such data to the above referenced contractors to Dina Villari at U.S. EPA, 401 M Street, SW (WH-563), Washington, D. C. 20460.

This addendum constitutes notice of EPA's intent to disclose information obtained pursuant to this survey, including information claimed as CBI, to the contractors and subcontractors referenced on the attached list. EPA has determined that such disclosure is necessary for these contractors and subcontractors to carry out work required by the contract or subcontract. EPA will notify these contractors and subcontractors that the information transferred to them may be entitled to confidential treatment and that any knowing and willful disclosure of such information may subject them and their employees to the penalties in Section 3007(b)(2) of RCRA.

List of Contractors and Subcontractors to whom EPA will transfer Results of National Survey of Hazardous Generators

1. Research Triangle Institute (see description in text of addendum).

2. ICF, Inc. of Washington, DC and its subcontractors DPRA of Manhattan, KS; Industrial Economics, Inc of Boston, MA; Pope-Reid Associates of St. Paul, MN; Temple, Barker, and Sloane of Lexington, MA; and Sobotka and Company, Inc. of Washington, DC (EPA Contract Number 68-01-7290).

   ICF, Inc.; Temple, Barker, and Sloane; and Sobotka and Company, Inc. will have access to the data for economic and risk analyses of regulations developed to implement the 1984 amendments.

   DPRA will have access to the data in order to provide data retrieval services to EPA analysts.

   Industrial Economics, Inc. will have access to the data for economic impact analysis of regulations developed to implement the land disposal restrictions.

   Pope-Reid Associates will have access to the data for engineering cost analysis of regulations developed to implement the land disposal restrictions.

3. Versar, Inc. of Springfield, VA (EPA Contract Number 68-01-7053) and its subcontractors Radian, Inc. of Austin, TX; Jacobs Engineering of Pasadena, CA; Environmental Resources Management, Inc. of West Chester, PA; and Camp, Dresser, and McKee of Boston, MA will have access to the data for analysis of available treatment capacity for wastes targeted for the land disposal restrictions.

4. NUS, Inc. of Gaithersberg, MD and its subcontractor DPRA of Manhattan, KS (EPA Contract Number 68-01-7310) will have access to the data in order to provide data retrieval services to EPA analysts.

5. Dynamac, Inc. of Rockville, MD and its subcontractor Research Triangle Institute of Research Triangle Park, NC (EPA Contract Number 68-01-7266) will have access to the data in order to process and analyze initial survey responses.

(IMPORTANT: Type or print; read instructions before completing form)

Form Approved OMB Number: 2070-0093
Approval Expires: 11/92

EPA
United States Environmental Protection Agency

FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER: 11590PRKNL1101P

Toxic Chemical, Category, or Generic Name: NICKEL POWDER

WHERE TO SEND COMPLETED FORMS:
1. EPCRA Reporting Center, P.O. Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 92

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?
[ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [X] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official: JOE MACRI, MANAGER FACILITIES

Signature: Joseph Macri

Date Signed: June 30, 1993

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: METCO DIVISION PERKIN-ELMER

TRI Facility ID Number: 11590PRKNL1101P

Street Address: 1101 Prospect Avenue

City: Westbury

County: Nassau

State: New York

Zip Code: 11590

Mailing Address (if different from street address):

City:

State:

Zip Code:

PUT LABEL HERE

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United States Environmental Protection Agency

EPA FORM R

PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
NICKEL POWDER

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check only one)	a. [ ] An entire facility	b. [X] Part of a facility
4.3	Technical Contact	Name: JOE MACRI	Telephone Number (include area code): (516) 334-1300
4.4	Public Contact	Name: JOE MACRI	Telephone Number (include area code): (516) 334-1300

4.5	SIC Code (4-digit)	a. 3542	b.	c.	d.	e.	f.
4.6	Latitude and Longitude	Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		075	09	50	027	53	16

4.7	Dun & Bradstreet Number(s) (9 digits)	a. 05-773-1663
		b.
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. NYD131318651
		b.
4.9	Facility NPDES Permit Number(s) (9 characters)	a. N/A
		b.
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. N/A
		b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	[ ] NA PERKIN-ELMER CORPORATION
5.2	Parent Company's Dun & Bradstreet Number	[ ] NA (9 digits) 00-118-4480

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
NICKEL POWDER

SECTION 1. TOXIC CHEMICAL IDENTITY

(Important: DO NOT complete this section if you complete Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	7440-02-0
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	NICKEL
1.3	Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)
	N/A

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
	N/A

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1	Manufacture the toxic chemical:	a. [ ] Produce b. [ ] Import	If produce or import: c. [ ] For on-site use/processing d. [ ] For sale/distribution e. [ ] As a byproduct f. [ ] As an impurity
3.2	Process the toxic chemical:	a. [ ] As a reactant b. [ ] As a formulation component	c. [ ] As an article component d. [ ] Repackaging
3.3	Otherwise use the toxic chemical:	a. [ ] As a chemical processing aid b. [ ] As a manufacturing aid	c. [X] Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	04	(Enter two-digit code from instruction package.)

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
NICKEL POWDER

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X] NA			
5.2	Stack or point air emissions	[ ] NA	580	C	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name: N/A				
5.3.2	Stream or Water Body Name: N/A				
5.3.3	Stream or Water Body Name: N/A				
5.4	Underground injections on-site	[X] NA			
5.5	Releases to land on-site				
5.5.1	Landfill	[X] NA			
5.5.2	Land treatment/ application farming	[X] NA			
5.5.3	Surface impoundment	[X] NA			
5.5.4	Other disposal	[X] NA			

[ ] Check here only if additional Section 5.3 information is provided on page 5 of this form.

Range Codes: A = 1 - 10 pounds; B = 1
C = 500 - 999 pounds.

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
NICKEL POWDER

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3	Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__	Stream or Water Body Name			
	N/A			
5.3.__	Stream or Water Body Name			
	N/A			
5.3.__	Stream or Water Body Name			
	N/A			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)
N/A	

6.1.B POTW Name and Location Information

6.1.B.__ POTW Name		6.1.B.__ POTW Name	
N/A			
Street Address		Street Address	
City	County	City	County
State	Zip Code	State	Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ]
(example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 C = 500 - 999 pounds.

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United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 11590PRKNL1101P

Toxic Chemical, Category, or Generic Name: NICKEL POWDER

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: LONI-JO SCRAP METAL

Street Address: 70 KINKEL STREET

City: WESTBURY | County: NASSAU

State: NY | Zip Code: 11590 | Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 3000	1. M	1. M 24
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: N/A

Street Address:

City: | County:

State: | Zip Code: | Is location under control of reporting facility or parent company? [ ] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Section 6.2 page this is, here. [ ] (example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 1
C = 500 - 999 pounds

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
NICKEL POWDER

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] **Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.**

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b 1 2 3 4 5 6 7 8	7A.1c	7A.1d %	7A.1e Yes [ ] No [ ]
7A.2a	7A.2b 1 2 3 4 5 6 7 8	7A.2c	7A.2d %	7A.2e Yes [ ] No [ ]
7A.3a	7A.3b 1 2 3 4 5 6 7 8	7A.3c	7A.3d %	7A.3e Yes [ ] No [ ]
7A.4a	7A.4b 1 2 3 4 5 6 7 8	7A.4c	7A.4d %	7A.4e Yes [ ] No [ ]
7A.5a	7A.5b 1 2 3 4 5 6 7 8	7A.5c	7A.5d %	7A.5e Yes [ ] No [ ]

If additional copies of page 7 are attached, indicate the total number of pages in this box [ ] and indicate which page 7 this is, here. [ ] (example: 1, 2, 3, etc.)

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
NICKEL POWDER

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.**

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.**

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

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United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Chemical, Category, or Generic Name
NICKEL POWDER

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

All quantity estimates can be reported using up to two significant figures.		Column A 1991 (pounds/year)	Column B 1992 (pounds/year)	Column C 1993 (pounds/year)	Column D 1994 (pounds/year)
8.1	Quantity released*	0	0	0	0
8.2	Quantity used for energy recovery on-site	0	0	0	0
8.3	Quantity used for energy recovery off-site	0	0	0	0
8.4	Quantity recycled on-site	0	0	0	0
8.5	Quantity recycled off-site	2800	3000	2900	2900
8.6	Quantity treated on-site	0	0	0	0
8.7	Quantity treated off-site	0	0	0	0
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	N/A			
8.9	Production ratio or activity index	.95			

8.10	Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.			
	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	W19	a. T04	b.	c.
8.10.2	W29	a. T04	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)	YES [ ]	NO [X]

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

PERKIN-ELMER **METCO Interoffice Memo**

To: H. Ingham Date: April 8, 1994

From: J. Macri

Subject: Floor Drains in Field Service

Looking at old prints, we traced pipes connected to the floor drain in the Field Service Department. We believe these pipes lead to an abandoned holding tank under a cement slab that holds tanks of bottle gas.

J. Macri

JM:ecb

Ingham.txt

COMPANY CORRESPONDENCE - FOR INTERNAL DISTRIBUTION ONLY

[illegible]ed. 5/1.

PROD PAK 3/16 —

8/8 K · Bottles OF AIR

Bill Sauch

Dec

E. N. O.
T. J. N.

Janie Ascher

751-7900

EX 387

Charlie Henzer

203-520-1491

BOWE SYSTEC INC
99 SEAVIEW BOULEVARD
PORT WASHINGTON, NY 11050-4610
Sales: (516) 621-3300
Parts & Service: (516) 621-3374
Accounting: (516) 621-3453
Fax: (516) 621-3569

May 3, 1993

Mr. Jim Zanetti
METCO
325 Duffy Avenue
Hicksville, N.Y.

Dear Jim Zanetti,

As you may know, Bowe Systec, Inc. is the owner of the property located immediately adjacent to the east of the Metco facility (at Section 11, Block H, Lot 484). Both of our properties are shown on the enclosed tax map for reference and accuracy.

Recently, we have been directed by the New York State Department of Environmental Conservation (NYSDEC) to conduct a groundwater investigation in the area surrounding our facility. Based on the groundwater flow direction map (constructed by our hydrogeologist) in this area of Hicksville and the location of Metco's recharge basin, a temporary well must be drilled and installed on your property. The purpose of the temporary well is to conduct a subsurface sampling program to determine background conditions for our property. We therefore seek your written authorization to access the recharge basin on your property so that we may conduct the work as required by NYSDEC.

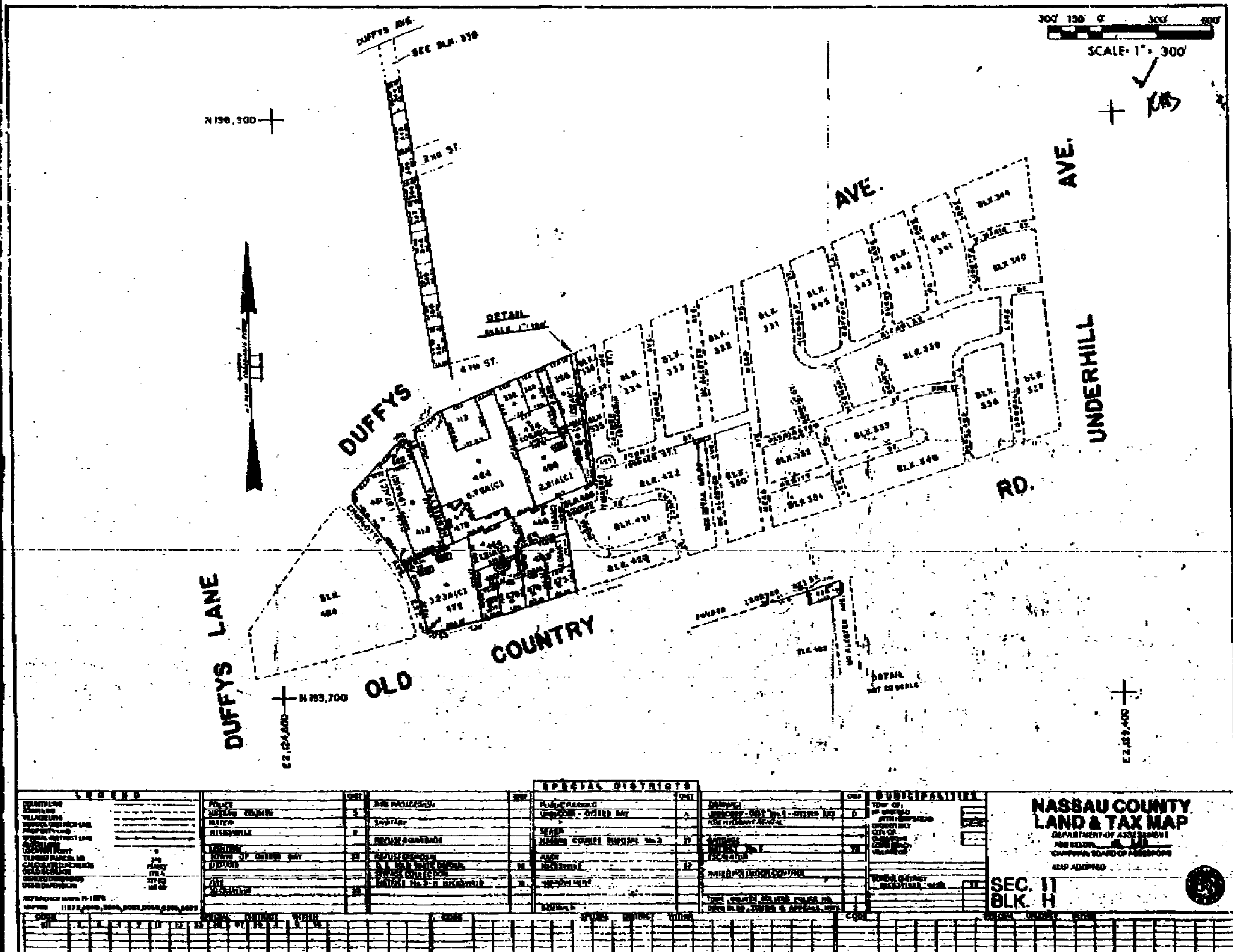
We will provide all necessary efforts in order to access the drilling location and will not obstruct your normal daily business operations while we are working. In addition, your site will also be restored to the pre-existing conditions (after our work) at no cost to you.

Since the importance of time has been stressed by NYSDEC, we ask that you provide us with your written authorization within the next week. Should you require any additional information from Bowe regarding this matter, please feel free to call me at any time.

Very truly yours,

Richard Reilly
National Service Director

Enclosure
cc: John Lombard
Harold Shaw, Esq.
Jamie Ascher, NYSDEC
Martin O. Klein, C.P.G.


SCALE: 1" = 300'
DUFFYS AVE.
SEE BLK. 330
2ND ST.
4TH ST.
N 198,300
N 193,700
E 2,124,600
E 2,129,400
AVE.
UNDERHILL AVE.
RD.
DUFFYS
DUFFYS LANE
OLD COUNTRY
DETAIL
BLK. 484
BLK. 331
BLK. 332
BLK. 333
BLK. 334
BLK. 335
BLK. 336
BLK. 337
BLK. 338
BLK. 339
BLK. 340
BLK. 341
BLK. 342
BLK. 343
BLK. 344
BLK. 345
BLK. 422
BLK. 481
BLK. 482
LEGEND
SPECIAL DISTRICTS
MUNICIPALITIES
NASSAU COUNTY
LAND & TAX MAP
DEPARTMENT OF ASSESSMENT
SEC. 11
BLK. H

NYC 537113-2

2-118-08

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4-97)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No.: NYD 057731663
Manifest Document No.: 618781
2. Page 1 of 1
Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address
SULZER METCO (US), INC
325 DUFFY AVENUE
HICKSVILLE NY 11808
4. Generator's Phone (516) 338-2517

A. State Manifest Document Number: NYC 537113-2
B. Generator's ID: SAME

5. Transporter 1 (Company Name): SAFETY-KLEEN CORP.
6. US EPA ID Number: ILD 984908202
C. State Transporter's ID: NY ETY217
D. Transporter's Telephone: (516) 842-6311

7. Transporter 2 (Company Name):
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address: 211808
SAFETY-KLEEN SYSTEMS, INC
80 SEABRO
NO AMITYVILLE, NY 11701
10. US EPA ID Number: NYD 000708198
G. State Facility ID:
H. Facility's Telephone: (516) 842-6311

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a. RQ WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII(D001) (D006, D008, D018, D027, D039D040) (ERG#128)	3	DM	33	G	EPA D001 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
a. I (A) D006 D008 (A) D018, D027, D039, D040
b.
c.
d.

K. Handling Codes for Wastes Listed Above
a. R
b.
c.
d.

15. Special Handling Instructions and Additional Information

EMERGENCY RESP#1-800-468-1760 24H

9835 95839870 618781 2-118-08-1500 XX

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: L LaPuglia
Signature: L LaPuglia
Mo. Day Year: 09 03 98

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: FRANK BURCZYK
Signature: Frank Burczyk
Mo. Day Year: 09 03 98

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name:
Signature:
Mo. Day Year:

FACIL

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Mo. Day Ye

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

NYC 537113-2

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4/97)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Document No.

2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number NYC 537113-2

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. c.

b. d.

K. Handling Codes for Wastes Listed Above

a. c.

b. d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR,** if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford

Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

COPY 8-Generator-retained by generator

P2SUL005489

TO: SAFETY-KLEEN SYSTEMS, INC.
80 SEABRO
NO AMITYVILLE, NY 11701

EPA ID NO. NYD000708198
(DESIGNATED FACILITY)

UNDER MANIFEST/SALES SERVICE NUMBER (NYC537113?) THE GENERATOR NOTED BELOW IS SHIPPING YOU A WASTE DETERMINED TO BE RESTRICTED UNDER 40 CFR PART 268. IN ACCORDANCE WITH 40 CFR 268.7 AND 6NYCRR 376.4(C), THE GENERATOR HEREBY PROVIDES NOTICE THAT THE WASTE IS RESTRICTED FROM LAND DISPOSAL. A COPY OF THIS FORM MUST BE KEPT BY THE GENERATOR FOR FIVE(5) YEARS FROM THE DATE OF SHIPMENT.

WASTE NAME: 662 SOLVENT 105 D001 SKDOT#: 0010083
WASTE CODE(S): D001 D006 D008 D018 D027 D039 D040
TREATABILITY GROUP: NONWASTEWATERS

EPA WASTE CODE	WASTE DESCRIPTION AND TREATMENT/REGULATORY SUBCATEGORY OR REGULATED HAZARDOUS CONSTITUENT	TREATMENT STANDARD (*) CONCENTRATION OR TECHNOLOGY CODE	
D001	HIGH TOC IGNITABLE CHARACTERISTIC WASTE.	RORGS; OR CMBST **	
D006	CADMIUM (CD)	1.0	MG/L TCLP
D008	LEAD (PB)	5.0	MG/L EP OR TCLP
D018	BENZENE	10	MG/KG ****
D027	P-DICHLOROBENZENE (1,4-DICHLOROBENZENE)	6.0	MG/KG ****
D039	TETRACHLOROETHYLENE	6.0	MG/KG ****
D040	TRICHLOROETHYLENE	6.0	MG/KG ****

N O T E S

THE CONSTITUENT COMPOSITION IS BASED ON KNOWLEDGE OF THE WASTE (VIA MATERIAL SAFETY DATA SHEETS FOR THE CHEMICAL(S) USED, AND THE PROCESS WHICH CREATED THE WASTE).

NOTES: * THESE TREATMENT STANDARDS DO NOT PRECLUDE RECLAMATION PRIOR TO FINAL DISPOSITION.
** NEW TREATMENT STANDARDS UNDER FEDERAL RULES EFFECTIVE 12-19-94.
*** TREATMENT STANDARDS APPLICABLE IN CERTAIN HSWA-AUTHORIZED STATES AND MEET UNIVERSAL TREATMENT STANDARDS.
**** NEW TREATMENT STANDARDS UNDER FEDERAL RULES EFFECTIVE 7-8-96.

UHC NOTICE: GENERATOR IS NOT REQUIRED TO LIST UNDERLYING CONSTITUENTS BECAUSE TREATER WILL MONITOR FOR ALL REGULATED CONSTITUENTS PRIOR TO DISPOSAL.

EXP NOTICE: THIS LDRN EXPIRES ON 6/30 FOR UT/MN OR ON 12/31 FOR ALL STATES.

GENERATOR NAME: SULZER METCO (US), INC EPA ID: NYD057731663

SEQ#: 2235 LOC: 211808 CUST: 2-118-08-1500 TERR: XX REF#: 618781 SW: 9835

TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFER

Memo 1

safety-kleen.

CUSTOMER REGULATORY UPDATE

EPA Promulgates Phase IV Final Rule

Here's a snapshot of EPA's recently published final rule addressing most of the remaining issues in Phase IV of the Land Disposal Restrictions (LDR). Some of the major changes include:

- Revising the non-wastewater universal treatment standards (UTS) for 12 metal constituents;
- Applying UTS for the first time to the Toxicity Characteristic (TC) metal wastes (D004-D011). Previously, the TC metal wastes only had to be treated to meet characteristic threshold levels;
- Additionally, TC metal wastes (D004-D011) must now be treated to meet both *organic & metal underlying hazardous constituents(UHC's). Note: Some subcategories of mercury & lead TC metal wastes have specified treatment technology methods, & are not affected by this rule;*

Universal Treatment Standards: Metal Constituents

Constituent	EPA Waste Code	*New* UTS WW mg/l (Total)	*New* UTS NWW mg/l (TCLP)	Old UTS (n.a. for D004-D011) WW mg/l (Total)	Old UTS (n.a. for D004-D011) NWW mg/l (TCLP)	Characteristic Waste Level mg/l (TCLP)
Antimony	N.A.	1.9	1.15	1.9	2.1	N.A.
Arsenic	D004	1.4	5.0	1.4	5.0	5.0
Barium	D005	1.2	21	1.2	7.6	100.0
Beryllium	N.A.	0.82	1.22	0.82	0.014	N.A.
Cadmium	D006	0.69	0.11	0.69	0.19	1.0
Chromium	D007	2.77	0.60	2.77	0.86	5.0
Lead	D008	0.69	0.75	0.69	0.37	5.0
Mercury-Retort	D009	N.A.	0.20	N.A.	0.20	0.2
Mercury-Other	D009	0.15	0.025	0.15	0.025	0.2
Nickel	N.A.	3.98	11.0	3.98	5.0	N.A.
Selenium	D010	0.82	5.7	0.82	0.16	1.0
Silver	D011	0.43	0.14	0.43	0.30	5.0
Thallium	N.A.	1.4	0.20	1.4	0.078	N.A.
Vanadium	N.A.	4.3	1.6	4.3	0.23	N.A.
Zinc	N.A.	2.61	4.3	2.61	5.3	N.A.

- Revising definition of underlying hazardous constituent that now excludes *sulfides & selenium*, as well as the previously excluded fluoride, vanadium & zinc as underlying hazardous constituents;
- Applying UTS to all newly-identified mineral processing wastes which exhibit a hazardous/toxic characteristic, i.e., D001-D043 hazardous wastes. These mineral processing wastes must also meet UTS for any underlying hazardous constituents. *Note: Exclusions for certain mineral processing wastes remain unaffected by this rule;*
- Adding to 40 CFR 268.3 the principle that the addition of iron fines, filings, or dust to any wastes requiring treatment for lead in order to achieve any LDR treatment standard is impermissible dilution;
- Implementing *alternative* treatment standards for listed/characteristic contaminated soils. The alternative standards are a reduction in concentration of each hazardous constituent subject to treatment by 90% *or* to 10 times UTS, i.e., "90% capped @ 10x UTS". Constituents subject to treatment are any UHC's at levels > 10 times UTS. If these standards are used, the soil remains subject to RCRA Subtitle C.

  Example # 1: Soil exhibits 1000 mg/l TCLP lead & is a D008 waste. The UTS level is 0.75 mg/l TCLP lead. This soil must be treated to a level of ≤100 mg/l lead (90% reduction) to meet the alternative treatment standards. However, this soil *does not* have to be treated to a level below 7.5 mg/l lead, which is 10x UTS for lead (10 times 0.75 mg/l lead UTS);

  Example # 2: Soil exhibits 10 mg/l TCLP arsenic & is a D004 waste. The UTS level is 5.0 mg/l TCLP arsenic. This soil does not have to be treated prior to land disposal because the arsenic concentration is < 10 x UTS (10 times 5.0 mg/l arsenic UTS).

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

STATE OF NEW YORK
DEPT ENVIRONMENTAL CONSERVATION
DIV SOLID & HAZARDOUS MATERIALS
MANIFEST SECTION
PO BOX 12820
ALBANY NY 12212

4a. Article Number

Z 593 811 004

4b. Service Type

☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: *(Print Name)*

6. Signature: *(Addressee or Agent)*

X

8. Addressee's Address *(Only if requested and fee is paid)*

PS Form **3811**, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 593 811 004

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to STATE OF NEW YORK
DEC DIV SOLID & HAZ MATERIALS
Street & Number
PO BOX 12820
Post Office, State, & ZIP Code
ALBANY NY 12212

Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form **3800**, April 1995

Fold at line over top of envelope to the right of the return address

CERTIFIED

Z 593 811 004

MAIL

WARNING FLAMMABLE ... HARMFUL IF SWALLOWED OR INHALED ... USE ONLY WITH ADEQUATE VENTILATION. FOR INDUSTRIAL USE ONLY.

READ MSDS BEFORE USING THIS PRODUCT. THOSE MATERIALS LISTED IN THE MSDS WITH AN ASTERISK HAVE BEEN LISTED BY ONE OF THE FOLLOWING TESTING AGENCIES: NATIONAL TOXICOLOGY PROGRAM, INTERNATIONAL RESEARCH AND CANCER, OR OSHA.

FIRST AID-

Effects of Overexposure

Inhalation: Anesthetic irritation of the respiratory track or acute nervous system depression characterized by headache, dizziness, staggering gait, confusion, unconsciousness or coma.

Skin or Eye Contact: Primarily irritation.

Emergency and First Aid Procedures

Vapor: Remove from overexposure. Restore breathing. Keep warm and quiet. Notify a physician.

Splash (eyes): Flush immediately with large quantities of running water for at least 15 minutes. Take to a physician for definitive medical treatment.

Splash (skin): Remove with soap and water. Remove contaminated clothing.

In Case of Fire:

Extinguishing Media: Use National Fire Protection Association (NFPA) Class B extinguishers (carbon dioxide, dry chemical or foam) designed to extinguish NFPA Class 1B flammable liquid fires.

Unusual Fire and Explosion Hazards: Keep containers tightly closed. Isolate from heat, electrical equipment, sparks and open flame. Closed container may explode when exposed to extreme heat. Do not apply to hot surfaces.

Special Fire Fighting Procedures: Water spray may be ineffective. Water may be used to cool containers to prevent pressure buildup and possible autoignition or explosion when exposed to extreme heat. If water is used, fog nozzles are preferable.

In Case of Spill or Leak:

Remove all sources of ignition (flames, hot surfaces and electrical, static, or frictional sparks). Avoid breathing vapors. Ventilate area. Remove with inert absorbent and nonsparking tools.

Special Protection Information

Respiratory Protection: In outdoor or open area use NIOSH approved mechanical filter respirator to remove solid airborne particles of overspray during spray application. In restricted ventilation areas use NIOSH approved chemical-mechanical filters designed to remove a combination of particulate and gas and vapor.

In confined areas use NIOSH approved air-supplied respirators or hoods.

Ventilation: Provide general dilution or local exhaust ventilation ~~of~~ volume and ???? to keep TLV of most hazardous ingredient on Material Safety Data Sheet below acceptable limit, and to remove decomposition products during welding or flame cutting on surfaces coated with this product.

Protective Gloves: Required for prolonged or repeated contact.

Eye Protection: Use safety eyewear designed to protect against splash of liquids.

Other Protection Equipment: Prevent prolonged skin contact with contaminated clothing.

Special Precautions:

Precautions to be Taken in Handling and Storing: Do not store above 120F.

Other Precautions: Do not take internally. Containers should be grounded when pouring. Avoid free fall of liquid in excess of a few inches. DO NOT FLAME CUT, BRAZE, OR WELD EMPTY CONTAINERS. KEEP CONTAINERS CLOSED WHEN NOT IN USE.

Waste Disposal Method: Dispose of in accordance with local, State and Federal regulations.

ATTENTION:

Hazardous product residue may be present after contents have been removed. Do not reuse empty package without commercial cleaning or reconditioning.

IN CASE OF SPILL
CALL CHEMTREC - DAY OR NIGHT
1-800-424-9300

USING THE NATIONAL PAINT AND COATINGS ASSOCIATION'S HAZARDOUS MATERIALS IDENTIFICATION SYSTEM, THIS PRODUCT'S HAZARD CLASSIFICATION IS:

HEALTH**	3

**Note: If an asterisk is present, see section 2 and 8 of the MSDS for further information.

FLAMMABILITY	3
REACTIVITY	0
PERSONAL PROTECTION	See the

label and MSDS for proper personal protective equipment.

Those materials listed on Section II of the MSDS may effect the following organs for:
RESPIRATORY TRACK
KIDNEY REPRODUCTIVE SYSTEM
BLOOD CENTRAL NERVOUS SYSTEM
CARDIAC SENSITIZATION LIVER

STIR WELL BEFORE USING.

Flash Point: 36
UN1263 PAINT

WARNING! Flammable. Harmful if swallowed. Use only with adequate ventilation. (See back panel for further information.)
FOR INDUSTRIAL USE ONLY.
KEEP CONTAINER CLOSED WHEN NOT IN USE.

WARNING: This product contains a chemical known to the STATE OF CALIFORNIA to cause cancer and/or reproductive harm.

LR-SMG

MARYLAND HAZARDOUS WASTE MANIFEST

Department of the Environment - Waste Management Administration
2500 Broening Highway Baltimore, MD 21224

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-97

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD133318651 Manifest Document No. 9932 4

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
SULZER METCO
1101 PROSPECT AVENUE, WESTBURY, NY 11590
4. Generator's Phone (516) 338-2337 MICHAEL LYDON

A. State Manifest Document Number MDC 0797374

B. State Generator's ID

C. State Transporter's ID HWH 141 144 204 DC

5. Transporter 1 Company Name: SAFETY KLEEN (TG), INC.
6. US EPA ID Number: S C D 9 8 7 5 7 4 6 4 7

D. Transporter's Phone (301) 939-6000

7. Transportert 2 Company Name: ~~FREEHOLD CARTAGE, INC~~ Sub S.S Transportation
8. US EPA ID Number: N J D 0 0 5 4 1 2 6 1 6 4

E. State Transporter's ID HWH 141 144 376 DC

9. Designated Facility Name and Site Address
SAFETY-KLEEN(TS)INC.
3527 WHISKEY BOTTOM ROAD
LAUREL, MD 20724
10. US EPA ID Number: M D D 9 8 0 5 5 4 6 5 3

F. Transporter's Phone ~~(732) 462-1001~~

G. State Facility ID A207

H. Facility's Phone (3 0 1) 9 3 9 - 6 0 0 0

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
HM X a.	HAZARDOUS WASTE, SOLID, N.O.S., (CHROMIUM), 9, NA3077, III	021	DM	00630	P	D007
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

	Haz. Code	Physical State	Specific Gravity	Percentage		Haz. Code	Physical State	Specific Gravity	Percentage
a.	E	S	1.0	100	c.				
b.					d.				

K. Handling Codes for Wastes Listed Above
a. ~~S1~~ 01 b. c. d.

15. Special Handling Instructions and Additional Information
NJDEP 10364
Emergency Contact: 1-800-468-1760 (596)
3K

NJDEP 10364 a.
Additional b.
EPA Waste c.
Codes d.

Profile Numbers a. 03XC ~~002~~ 017 b. c. d.

16. GENERATORS CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and Maryland Statutes or Regulation.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR**, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: David Wulzak Signature: [signature] Month 03 Day 18 Year 99

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: David G. Link Signature: David G. Link Date Month 03 Day 18 97

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Steven Gadas Signature: [signature] Date Month 03 Day 18 97

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: ERIC HERNANDEZ Signature: [signature] Date Month Day

MDC 0797374

GENERATOR — TRANSPORTER — FACILITY

In case of an emergency or spill, immediately call the National Response Center at (800) 424-8802 and the MDE at (410) 631-3400. Nights and Holidays at (410) 974-3551.

EPA Form 8700-22 (9-95)
Previous editions are obsolete.

P2SUL007877

COPY 3 – FACILITY: DETACH & RETURN THIS COPY TO GENERATOR

MARYLAND HAZARDOUS WASTE MANIFEST

Department of the Environment - Waste Management Administration
2500 Broening Highway Baltimore, MD 21224

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-97

In case of an emergency or spill, immediately call the National Response Center at (800) 424-8802 and the MDE at (410) 631-3400. Nights and Holidays at (410) 974-3551.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD 983 959 324 — Manifest Document No.

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
SULZER METCO
1101 PROSPECT AVENUE, WESTBURY, NY 11590

4. Generator's Phone (516) 938-2337 MICHAEL LYDON

A. State Manifest Document Number MDC 0797374

B. State Generator's ID

C. State Transporter's ID HWH DC

5. Transporter 1 Company Name: SAFETY KLEEN (TC), INC. — 6. US EPA ID Number: DDD 987 944 447

D. Transporter's Phone (301) 939-6000

7. Transporter 2 Company Name: FREEHOLD CARTAGE, INC. — 8. US EPA ID Number: NJD 054 136 844

E. State Transporter's ID HWH DC

9. Designated Facility Name and Site Address
SAFETY-KLEEN(TS)INC.
3527 WHISKEY BOTTOM ROAD
LAUREL, MD 20724

10. US EPA ID Number: MDD 985 954 833

F. Transporter's Phone (732) 462-1001

G. State Facility ID A207

H. Facility's Phone (301) 939-6000

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
HM a. HAZARDOUS WASTE, SOLID, N.O.S., (CHROMIUM), 9, NA3077, III X	001	DM	00050	P	D007
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

	Haz. Code	Physical State	Specific Gravity	Percentage
a.	F	S	3.0	100
b.				
c.				
d.				

K. Handling Codes for Wastes Listed Above
a. ST
b.
c.
d.

15. Special Handling Instructions and Additional Information
Emergency Contact: 1-800-468-1760 (596) 35
NJDEP 10364 a. Additional b. EPA Waste c. Codes d.
Profile Numbers a. 6SMG-002-01 b. c. d.

16. GENERATORS CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and Maryland Statutes or Regulation.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR**, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name — Signature — Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials — Date
Printed/Typed Name — Signature — Month Day

18. Transporter 2 Acknowledgement of Receipt of Materials — Date
Printed/Typed Name — Signature — Month Day

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. — Date
Printed/Typed Name — Signature — Month Day

GENERATOR — TRANSPORTER — FACILITY

MDC 0797374

EPA Form 8700-22 (9-95)
Previous editions are obsolete.

COPY 8 – GENERATOR'S FILE — PLEASE RETURN & RETAIN THIS COPY

Safety-Kleen
WMS - State Manifest System
Container Cross Reference Report

03/17/99
17:55:35
Page 1

Generator Name: SULZER METCO
Generator EPA ID: NYD131318651
Manifest Load #: NJSMG2

990318NTSMG

Page	D.O.T. Description	Lab Pack	Bulk	DR LB	Drum Containers
1 a	HAZARDOUS WASTE, SOLID, N.O.S.		X	630	09 - 29 (21)

THIS WASTE DOES NOT CONTAIN ANY DIOXINS, CHLORINATED FURANS, EXPLOSIVES OR RADIOACTIVE MATERIALS.

safety-kleen.

Container Contents

☐ Bulk ☐ Mixed Lab

Manifest #
Manifest page _____ Line Item _____
RQ _____

	Year	Month	Day	Code	Number	
Container Number:	[illegible]	[illegible]	[illegible]	N J [illegible]	[illegible]	Chemist [illegible]
DOT Shipping Name: [illegible]						Absorbent C V O
Container Type: [illegible] Size: [illegible]	UN/NA Number NA 3077			HM X		
Hazard Class: 9, III Division:	Chemical Constituents:					

Profile Number	[illegible] 017
Disposal Site	[illegible]
Approval Code	[illegible]

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01	Filters contaminated with paint						S	12 30 #		D001
02	RCRA metals									
03										
04										
05										
06										
07										
08										
09										
10										
11										
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25										
26										
27										
28										

ABSORBENT	PS - PHYSICAL STATE	IC - INTERNAL CONTAINER
C - CORN COB	L - LIQUID/POURABLE	G - GLASS M - METAL
V - VERMICULITE	S - SOLID	P - PLASTIC F - PAPER
O - OTHER	X - SLUDGE	

This Lab Pack list continues: YES ☐ NO ☐ This is page _____ of _____

ORIGINAL - FINAL T.S.D. • GREEN - TRANS/CERT • YELLOW - DISCOSER • PINK - 1ST T.S.D. • GOLD - GENERATOR

FORM B1 ***(Must be accompanied by Form A)***

Generator Name/Location Sulzer Medco / Westbury, NY **Page** 2 **of** 2

EPA I.D. Number : NYD 013318651 Manifest : NOC 0797374 / 79324

Waste Profile or ARF	Category No.	EPA or State Waste Code	Variance Date	Description/Sub Category	Treatability Group (WW or NWW)	Waste Constituents or Legend #
GSMG-017	6a	D007	–	–	NWW	Chromium

CONSTITUENTS IN SOLVENT, CALIFORNIA LIST AND CHARACTERISTIC WASTES.

F001 - F005 spent solvents

Legend #	Constituent Name
1	Acetone
2	Benzene
3	n-Butyl alcohol
*4	Carbon disulfide
5	Carbon tetrachloride
6	Chlorobenzene
7	Cresol (m-and p-isomers)
8	o-Cresol
*9	Cyclohexanone
10	1,2-Dichlorobenzene
11	Ethyl Acetate
12	Ethyl Benzene
13	Ethyl Ether
14	Isobutyl alcohol
*15	Methanol
16	Methylene Chloride
17	Methyl Ethyl Ketone
18	Methyl isobutyl ketone
19	Nitrobenzene
20	Pyridine
21	Tetrachloroethylene
22	Toluene
23	1,1,1-Trichloroethane
24	1,1,2-Trichloroethane
25	Trichlorothylene
26	1,1,2-Trichloro-1,2,2-trifluoroethane
27	Trichloromonofluoro-methane
28	Xylenes (total)

Legends 29-31 RESERVED

** If these constituents are present alone or in any combination of the three, then non waste water forms of these constituents must be treated to **TCLP** levels as indicated in §268.40.*

Technology-Based standards For F005 when the constituent is the only listed F00-F005 solvent

Legend #	Constituent Name
32	2-Ethoxyethanool
33	2-Nitropropane

Legends 34-43 RESERVED

CALIFORNIA LIST WASTES

Legend #	Constituent Name
44	Nickel
45	Thallium
46	Cyanide (Liquid)
47	Liquid Polychlorinated Biphenyls (PCB's)
48	Halogenated Organic compounds (HOC's)

SEE BACK FOR THE UNIVERSAL TREATMENT STANDARDS (UTS), Legends 49 - 264

Revised 6/96 585-7512A-585003

LAIDLAW ENVIRONMENTAL SERVICES

FORM A

Customer Notification And Certification

Generator Name/Location: Solter Media / Westbury, NY

EPA I.D. Number: NYD 013 18651

Waste Profile or ARF Designation: 65MG - 017

Manifest Number: MDC 079737 / 99324

EPA Waste Number(s): D007

Waste Analysis Available? Yes (attached) ____ No X On file at receiving facility X

Unrestricted Waste Notification (*Category 1*)

Mark the statement below if you generate a waste that is not a land disposal restricted waste (the waste has no applicable treatment standards).

☐ *I notify that I am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that the waste is not restricted as specified in 40 CFR §268, Subpart D or any applicable prohibitions set forth in 40 CFR §268.32 or RCRA Section 3004(d).*

Restricted Waste/Debris Notification (*Category 2*)

Mark statement (2a) below if you generate a waste that is restricted from land disposal (the waste has applicable treatment standards). **NOTE-1:** A waste may pass one or more standards and require treatment or be varianced for others. In this case, all applicable categories must be checked. **NOTE-2:** D001, D002 and D012 - D043 wastes must be evaluated for underlying constituents found in 40 CFR §268. 48 (Table UTS), that are reasonably expected to be present. A list of these constituents must be included on **FORM B**, or attached to and accompany this notification with each waste shipment. Mark statement (2b) if you generate a debris waste that will be treated to the alternate debris standards located in 40 CFR §268.45.

☒ **(2a) Restricted Waste Notification**

I notify that I am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that the waste is subject to the treatment standards specified in 40 CFR §268 Subpart D. The waste: (a) must be treated to the appropriate regulatory treatment standard, by the appropriate regulatory treatment method; (b) qualifies for a variance as described in category 3 below; or (c) meets some or all of the standards as described in Category 4 below.

☐ **(2b) Alternate Debris Treatment Notification: This hazardous debris is subject to the alternate treatment standards of 40 CFR §268.45.**

The waste contains the following contaminants subject to treatment [check all that apply]:

_____§268.45(b)(1)- Toxicity characteristic debris;

_____§268.45(b)(2)- Debris contaminated with listed waste;

_____§268.45(b)(3)- Cyanide reactive debris.

Restricted Waste Variance Notification (*Category 3*)

Mark the statement below and list the applicable variance date on **Form B**, if you generate a waste which **does not** require treatment prior to land disposal because of a variance (including a case-by-case extension under 40 CFR §268.5, a nationwide variance under 40 CFR §268 Subpart C, a no migration petition under 40 CFR §268.6, or other applicable variance).

☐ *I notify pursuant to 40 CFR §268.7(a)(3) that I am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that this waste is subject to a national capacity variance under 40 CFR §268 Subpart C, or a case-by-case extension under 40 CFR §268.5, or an exemption under 40 CFR §268.6.*

Restricted Waste Certification (Treatment Standards Met) (*Category 4*)

Mark the certification statement below if you generate a waste that is restricted from land disposal (the waste has applicable treatment standards), and the waste meets the standards as generated. **Note:** All applicable constituent standards must be accounted for. A waste may pass one or more standards and require treatment or be variance for other constituents. In this case, all applicable categories must be checked.

☐ *I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA § 3004(d). I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.*

SIGNATURE: [signature] DATE: 3/6/97

PRINT NAME: David Dalzak TITLE: Sales Representative III

Revised 10/94 585-7510-585003

safety-kleen.

CUSTOMER NO.	BILLING NO.	SALESPERSON	DATE
PICKUP DATE	CLIENT P.O.	DISP. SITE SWO	COUNTY

BILLING CUSTOMER

PICK-UP CUSTOMER AND ADDRESS

CHEMIST/DRIVER

TRANSPORTATION (04000)	UNIT/PRICE 30/55/3-5	UNIT/PRICE 85	EXTENSION
0-50 MILES			
51-100 MILES			
101-200 MILES			
200-500 MILES			
► 500 MILES			
TOTAL			

LABOR (04045)	HOURS	PRICE
Chemist	8	
OTHER 2 x 4 hours		
Project Manager		

PROFESSIONAL SERVICES (04035)	QUANTITY	PRICE
SAMPLE ANALYSIS		
WASTE STREAM EVALUATION		

EQUIPMENT (04065)	QUANTITY	PRICE

DISPOSAL (04060)

MATERIALS (04040)	QUANTITY	PRICE
85-G Salvage Drum-New		
55-G 17C, 17H, 17E Recon.		
55-G 37M - New		
30-G 17H - New		
30-G, 20-G Fiber New		
5-G Pail - 37E, 37A-New, 34-5, 35-50		
Dot Spec. Wooden Box		
Drum Thief		
Disposal Coliwassa		
Absorbant, Clay, Vermiculite, CornCob - Bag		
Drum Pump-Use & Decon.		
4 Mil Liners		
Reactive Bags		
Dot Labels	42	
EPA Labels	29	
Sample Bottles		
Protective Gear - Level I	1	
Protective Gear - Level II		
Packing Materials 5G		
Packing Materials 20G		
Packing Materials 300G, 55G		

OTHER (04055)	QUANTITY	PRICE
Minimum Charge		

PROFILE/LABPACK	DESCRIPTION	QTY.	UM	UNIT PRICE
[illegible] 17	[illegible] Filters	2		
		2		
05MG - 001		6.00	55	
	Total	29.0		

Remarks

1. ACCTG-1	2. Customer Service Rep.	3. Customer Service Supv.	4. Operations

585-7546 (3-94)

P2SUL007883

GENR COPY

Is your RETURN ADDRESS completed on the reverse side?

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
Maryland Dept. of the Envir. (MDE)
Waste Management Admin.
Hazardous Waste Program
2500 Broening Highway
Baltimore, MD 21224

4a. Article Number
Z 566 133 325

4b. Service Type
☐ Registered ☑ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: *(Print Name)*

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature: *(Addressee or Agent)*
X

PS Form **3811**, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 566 133 325

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail *(See reverse)*

Sent to Maryland Dept. of the Env. (MDE)
Street & Number 2500 Broening Highway
Post Office, State, & ZIP Code Baltimore, MD 21224

Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form **3800**, April 1995

Fold at line over top of envelope to the right of the return address

CERTIFIED MAIL

Z 566 133 325

safety-kleen.

Service Center

Monday, April 19, 1999

SULZER METCO
1101 PROSPECT AVENUE
WESTBURY NY 11590

Dear Sir/Madam:

Enclosed please find a Certificate of Disposal which certifies that waste which Safety-Kleen (TS), Inc. picked up from your site on 3/18/99 , manifest number NJSMG-99324 , has been properly disposed.

This certificate indicates the container number, date of disposal, disposal site and disposal method for all of the material picked up on the referenced manifest.

If for any reason, your company address or information should change, please contact our manifest and records department at (301) 939-6014 or (301) 939-6024 It is imperative that we keep your records current at all times.
If you have any questions, please feel free to contact your customer service representative.

Safety-Kleen (TS), Inc..

Enclosure

Safety-Kleen (TS), Inc.
3527 Whiskey Bottom Road Laurel, Maryland 20724
Phone 301.939.6000 Fax 301.939.6066

LAIDLAW ENVIRONMENTAL SERVICES

HAZARDOUS MATERIALS WASTE DISPOSAL

SAFETY KLEEN (TS), INC.
3527 WHISKEY BOTTOM ROAD
LAUREL MD 20724-

Mail To: SULZER METCO
1101 PROSPECT AVENUE
WESTBURY NY 11590
Attention:

Pickup Address: SULZER METCO
1101 PROSPECT AVENUE
WESTBURY NY 11590

EPA ID: NYD131318651

Manifest No: NJSMG-99324

This is to certify that hazardous material removed from SULZER METCO

has been disposed of in accordance with all applicable local, state and federal regulations in the following manner.

Container	Date	Location	Method
990318-NJSMG-009 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill
990318-NJSMG-010 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill
990318-NJSMG-011 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill
990318-NJSMG-012 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill
990318-NJSMG-013 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill
990318-NJSMG-014 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill
990318-NJSMG-015 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill
990318-NJSMG-016 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill
990318-NJSMG-017 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill
990318-NJSMG-018 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill
990318-NJSMG-019 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill
990318-NJSMG-020 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill
990318-NJSMG-021 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill
990318-NJSMG-022 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill

Brinton H. Hoar

Operations

Date: 04/19/99

LAIDLAW ENVIRONMENTAL SERVICES

HAZARDOUS MATERIALS WASTE DISPOSAL

SAFETY KLEEN (TS), INC.
3527 WHISKEY BOTTOM ROAD
LAUREL MD 20724-

Page: 2 Manifest No: NJSMG-99324

This is to certify that hazardous material removed from SULZER METCO

has been disposed of in accordance with all applicable local, state and federal regulations in the following manner.

Container	Date	Location	Method
990318-NJSMG-023 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill
990318-NJSMG-024 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill
990318-NJSMG-025 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill
990318-NJSMG-026 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill
990318-NJSMG-027 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill
990318-NJSMG-028 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill
990318-NJSMG-029 6SMG-017	03/23/99	SAFETY-KLEEN LTD LONDON ON	Stabilization f.b. Chem. Secure Landfill

Brinton H Hess

Operations

Date: 04/19/99

MATERIAL SAFETY DATA SHEET

FOR COATINGS , RESINS AND RELATED MATERIALS

DATE OF PREPARATION 2/26/90

MANUFACTURER'S NAME : HAYNES COATINGS - WHITTAKER CORPORATION
ADDRESS : MASSACHUSETTS INDUSTRIAL PARK
ADDRESS : FULLER ROAD
CITY,STATE : CHICOPEE, MA 01020-3794

EMERGENCY TELEPHONE NO. DAY: 413-592-4191 NIGHT: 413-592-4191
INFORMATION TELEPHONE NO. DAY: 413-592-4191 NIGHT: 413-592-4191

SECTION I PRODUCT IDENTIFICATION

Manufacturer's Code Identification: TL 469 Revision : 02
Product Class: MIXED SOLVENTS
Trade Name: THINNER
HMIS Information Health- 2 Flammability- 3
Reactivity- 0 Personal Protective Equipment-

SECTION II HAZARDOUS INGREDIENTS

----- INGREDIENT ----- MATERIAL DESCRIPTION	CAS#	% BY WEIGHT	OSHA-PEL	ACGIH-TLV	VAPOR PRESSURE MMHg @68DF	LEL	SARA 313	----- OTHER -----
DIACETONE ALCOHOL	123-42-2	14.04	50 PPM	50 PPM	.81	1.8	NO	
XYLENE	1330-20-7	37.59	100 PPM	100 PPM	6.60	1.0	YES	OSHA/ACGIH STEL:150PPM
METHYL ISOBUTYL KETONE	108-10-1	38.28	50 PPM	50 PPM	28.00	1.4	YES	OSHA/ACGIH-STEL 75 PPM
METHYL ISOBUTYL CARBINOL	108-11-2	10.09	25PPM-SKIN	25PPM-SKIN	5.00	1.0	NO	OSHA/ACGIH-STEL 40 PPM

SECTION III PHYSICAL DATA

BOILING RANGE, DEG. F HIGH 337.0 LOW 241.0
VAPOR PRESSURE, MM HG 28.00
VAPOR DENSITY HEAVIER THAN AIR
EVAPORATION RATE SLOWER THAN ETHER
WEIGHT PER GALLON, LBS. 7.0
% VOLATILE BY VOLUME 100.01
% VOLATILE BY WEIGHT 100.01 N/A = NOT APPLICABLE N/E = NOT ESTABLISHED

MANUFACTURER'S CODE: TL 469 Revision : 02 DATE OF PREPARATION- 2/26/90

SECTION IV -- FIRE AND EXPLOSION HAZARD DATA

FLAMMABILITY CLASSIFICATION OSHA-CLASS IB DOT- FLAMMABLE LIQUID
LOWEST FLASHPOINT T.C.C., DEG. F 62.0 LOWER EXPLOSION LEVEL (LEL) 1.0

EXTINGUISHING MEDIA: ( )-Foam (XXX)-Alcohol foam (XXX)-CO2
(XXX)-Dry chemical ( )-Water fog ( )-Other
SPECIAL FIRE FIGHTING PROCEDURES: Isolate from heat, sparks, electrical equipment and open flame. Water is not usually effective in fighting liquid fires.
UNUSUAL FIRE AND EXPLOSION HAZARDS: Water spray may be used to cool closed containers to help prevent explosion when exposed to extreme heat.
****

SECTION V -- HEALTH HAZARD DATA

EFFECTS OF OVEREXPOSURE-(ACUTE): Irritating to eyes, skin, nose and throat. Headache, dizziness and nausea can result from inhalation. Repeated or prolonged skin contact may result in dryness possibly leading to dermititis. TOXIC IF INGESTED. NOTE: If methanol is listed in section II-may be fatal or cause blindness if swallowed; cannot be made non-poisonous. If product contains toluene or xylene-may affect liver, kidneys or blood.

EFFECTS OF OVEREXPOSURE-(CHRONIC): Reports have associated repeated and prolonged occupational overexposure to solvents with permanent brain and nervous system damage. Intentional misuse by deliberately concentrating and inhaling the contents of this product may be harmful or fatal.
MAY CONTAIN TOLUENE and/or XYLENE WHICH MAY HARM THE DEVELOPING FETUS IF A PREGNANT WOMAN IS EXPOSED. SEE SECTION II FOR INGREDIENT LISTING.
DOES THIS PRODUCT CONTAIN ANY CHEMICALS CLASSIFIED AS KNOWN OR SUSPECTED CARCINOGENS (NTP/IARC/OSHA/ACGIH)? ( )-YES (XXX)-NO
PRIMARY ROUTE(S) OF ENTRY: (XXX)-INHALATION (XXX)-DERMAL ( )-INGESTION
EMERGENCY FIRST AID PROCEDURES: INHALATION-Remove to fresh air. Restore breathing. CONSULT PHYSICIAN. SPLASH(EYE)-Flush with water for at least 15 minutes. CONSULT PHYSICIAN. SPLASH(SKIN)-Wash with soap and water. Remove contaminated clothing. CONSULT PHYSICIAN IF IRRITATION PERSISTS. INGESTION-Drink 1 or 2 glasses of water to dilute. Do NOT induce vomiting. CONSULT PHYSICIAN OR POISON CONTROL CENTER IMMEDIATELY.

MEDICAL CONDITIONS PRONE TO AGGRAVATION BY EXPOSURE: Pre-existing skin disorders, chronic respiratory disease.
****

SECTION VI -- REACTIVITY DATA

STABILITY: (XXX)-STABLE ( )-UNSTABLE
CONDITIONS TO AVOID: None reasonably foreseeable.
INCOMPATIBILITY (MATERIALS TO AVOID): (metallics)-Water, acids, caustic, chlorinated hydrocarbons and oxidizers. Aluminum reacts with them to produce hydrogen and heat.
HAZARDOUS POLYMERIZATION: ( )-WILL OCCUR (XXX)-WILL NOT OCCUR
CONDITIONS TO AVOID: None reasonably foreseeable (see materials to avoid).
HAZARDOUS DECOMPOSITION PRODUCTS: Mostly CO2 with some CO.
****

MANUFACTURER'S CODE: TL 469 Revision : 02 DATE OF PREPARATION- 2/26/90

SECTION VII -- SPILL OR LEAK PROCEDURES

STEPS TO BE TAKEN IN CASE MATERIAL IS RELEASED OR SPILLED: Remove all spark sources, flames and hot surfaces. Maintain adequate ventilation. Avoid breathing vapors. Add absorbent to spill area. Recover free liquid. Keep chemical products out of streams and waterways.
WASTE DISPOSAL METHOD: Dispose of in accordance with local, state, and federal regulations.

****

SECTION VIII -- SAFE HANDLING & USE INFORMATION

RESPIRATORY PROTECTION: Unless air monitoring demonstrates vapor/dust/mist levels below the current PEL or TLV values always wear an appropriate, properly fitted (NIOSH/MSHA approved) respirator during use.
EYE PROTECTION: Chemical safety goggles (or glasses with side shields) or face shields to prevent eye splashes.
VENTILATION: Should be explosion proof and keep the air contaminant concentration below current OSHA Permissible Exposure Limit (PEL) or ACGIH's Threshold Limit Value (TLV).
PROTECTIVE GLOVES: Required to prevent skin contact.
OTHER PROTECTIVE EQUIPMENT: Remove and wash contaminated clothing before re-use.
HYGIENIC PRACTICES: Wash thoroughly before eating, smoking or using toilet facilities.
****

SECTION IX-- SPECIAL PRECAUTIONS

PRECAUTIONS TO BE TAKEN IN HANDLING AND STORING: Avoid storage in high temperature areas or near fire or open flame. Keep container closed. Use only with adequate ventilation.
OTHER PRECAUTIONS: Avoid contact with eyes and prolonged or repeated contact with skin. DO NOT INGEST. FOR INDUSTRIAL USE ONLY.
****

THE ABOVE INFORMATION HAS BEEN DERIVED FROM INFORMATION PROVIDED BY OUR RAW MATERIAL SUPPLIERS AND TO OUR BEST BELIEF AND KNOWLEDGE IS FACTUAL.

THESE DATA RELATE ONLY TO THE SPECIFIC MATERIAL DESIGNATED HEREIN AND DO NOT RELATE TO USE IN COMBINATION WITH ANY OTHER MATERIAL.

MSDS:A1 Text Revised 12/89. Prepared by: L. Dussault

PERKIN ELMER

The Perkin-Elmer Corporation
Metco Division
1101 Prospect Avenue — P.O. Box 1006
Westbury, New York 11590-0201
Phone (516) 334-1300
Fax (516) 338-2477
RCA 229913

March 3, 1992

Environmental Protection Agency
P.O. Box 70266
Washington, DC 20024-0266

Ref: SARA TITLE III - Tier II Reports

Dear Sir/Madam:

Enclosed please find the SARA TITLE III - Tier II Reports for our three facilities.

If we could be of further assistance, please contact me.

Sincerely,

Joseph Macri

Joseph Macri
Manager Facilities

JM:ecb
Enclosures
cc: A.B. Mazzone
C.L. Conroy

SARATII.pwp

P 617 298 169

Certified Mail Receipt
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

UNITED STATES POSTAL SERVICE

Sent to ENVIRONMENTAL PROTECTION	
Street & No. PO BOX 70266	
P.O., State & ZIP Code WASHINGTON DC 20024-0266	
Postage	$ .52
Certified Fee	1.00
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Address of Delivery	1.00
TOTAL Postage & Fees	$ 2.52
Postmark or Date 3-6-92	

PS Form 3800, June 1990

STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE, CERTIFIED MAIL FEE, AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES (see front).

1. If you want this receipt postmarked, stick the gummed stub to the right of the return address leaving the receipt attached and present the article at a post office service window or hand it to your rural carrier (no extra charge).

2. If you do not want this receipt postmarked, stick the gummed stub to the right of the return address of the article, date, detach and retain the receipt, and mail the article.

3. If you want a return receipt, write the certified mail number and your name and address on a return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends if space permits. Otherwise, affix to the back of article. Endorse front of article **RETURN RECEIPT REQUESTED** adjacent to the number.

4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse **RESTRICTED DELIVERY** on the front of the article.

5. Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in item 1 of Form 3811.

6. Save this receipt and present it if you make inquiry.

☆U.S.G.P.O. 1990-270-153

PS Form **3800**, June 1990 *(Reverse)*

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

METCO PERKIN-ELMER ATTN: Facilities

1101 PROSPECT AVENUE

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:
ENVIRONMENTAL PROTECTION
PO BOX 70266
WASHINGTON DC 20024-0266

4. Article Number
P 617 298 169

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X EPCRA REPORTING CENTER
P.O. BOX 23779
WASHINGTON, D.C. 20026-3779

6. Signature — Agent
X

7. Date of Delivery
MAR 11 1992

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

Form Approved OMB No. 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: PERKIN-ELMER CORPORATION METCO DIVISION
Street: 220 MILLER PLACE
City: HICKSVILLE County: NASSAU State: NY Zip: 11801
SIC Code: 3399 Dun & Bradstreet Number: 05-773-1663

FOR OFFICIAL USE ONLY
ID #:
Date Received:

Owner/Operator Name
Name: JOSEPH MACRI Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact
Name: JOSEPH MACRI Title: MANAGER FACILITIES
Phone: (516) 334-1300 EXT. 2374 24 Hr. Phone: (800) 424-9300 CHEMTREC
Name: Title:
Phone: ( ) 24 Hr. Phone: ( )

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19 91

☐ Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7440-02-0 Trade Secret ☐ Chem. Name: Nickel Powder Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 04 Avg. Daily Amount (code): 04 No. of Days On-site (days): 365	Container Type / Pressure / Temperature D 1 4 Warehouse N 1 4 Production Lines R 1 4 Production Lines - Hardened Steel Hoppers	☐
CAS 7440-47-3 Trade Secret ☐ Chem. Name: Chromium Powder Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire X Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 03 Avg. Daily Amount (code): 03 No. of Days On-site (days): 365	D 1 4 Warehouse N 1 4 Production Lines R 1 4 Production Lines - Hardened Steel Hoppers	☐
CAS 7440-48-4 Trade Secret ☐ Chem. Name: Cobalt Powder Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire X Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 04 Avg. Daily Amount (code): 04 No. of Days On-site (days): 365	D 1 4 Warehouse N 1 4 Production Lines R 1 4 Production Lines - Hardened Steel Hoppers	☐

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 2 and that based on my inquiry of those individuals responsible for obtaining the information I believe that the submitted information is true, accurate, and complete.

JOSEPH MACRI MANAGER FACILITIES
Name and official title of owner/operator OR owner/operator's authorized representative

Signature: Joseph Macri Date Signed: 2/28/92

Optional Attachments

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

Form Approved OMB No. 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: PERKIN-ELMER CORPORATION METCO DIVISION
Street: 220 MILLER PLACE
City: HICKSVILLE County: NASSAU State: NY Zip: 11801
SIC Code: 3399 Dun & Bradstreet Number: 05-773-1663

FOR OFFICIAL USE ONLY
ID #:
Date Received:

Owner/Operator Name

Name: JOSEPH MACRI Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact

Name: JOSEPH MACRI Title: MANAGER FACILITIES
Phone: (516) 334-1300 EXT 2374 24 Hr. Phone: (800) 424-9300 CHEMTREC
Name: Title:
Phone: ( ) 24 Hr. Phone: ( )

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19 91

☐ Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) — Container Type / Pressure / Temperature	Storage Locations	Optional
CAS 7429090 Trade Secret ☐ Chem. Name: Aluminum Powder Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	X Fire Sudden Release of Pressure X Reactivity X Immediate (acute) X Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 N 1 4 R 1 4	Warehouse Production Lines Production Lines - Hardened Steel Hoppers	☐
CAS 13444251 Trade Secret ☐ Chem. Name: Aluminum Oxide Powder Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire Sudden Release of Pressure Reactivity X Immediate (acute) X Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 N 1 4 R 1 4	Warehouse Production Lines Production Lines - Hardened Steel Hoppers	☐
CAS 13144234 Trade Secret ☐ Chem. Name: Zirconium Oxide Powder Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire Sudden Release of Pressure Reactivity X Immediate (acute) Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 N 1 4 R 1 4	Warehouse Production Lines Production Lines - Hardened Steel Hoppers	☐

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 2 and that based on my inquiry of those individuals responsible for obtaining the information I believe that the submitted information is true, accurate, and complete.

JOSEPH MACRI MANAGER FACILITIES
Name and official title (owner, operator, or authorized representative)

Signature: Joseph Macri Date signed: 2/28/92

Optional Attachments

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

Form Approved OMB No. 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: PERKIN-ELMER CORPORATION METCO DIVISION
Street: 1101 PROSPECT AVENUE
City: WESTBURY County: NASSAU State: NY Zip: 11590
SIC Code: 3542 Dun & Brad Number: 05-773-1663

FOR OFFICIAL USE ONLY
ID #:
Date Received:

Owner/Operator Name

Name: JOSEPH MACRI Phone: (516)334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact

Name: JOSEPH MACRI Title: MANAGER FACILITIES
Phone: (516) 334-1300 EXT. 2374 24 Hr. Phone: (800)424-9300 CHEMTREC
Name: Title:
Phone: ( ) 24 Hr. Phone: ( )

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19 91

☐ Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7440-50-8 Trade Secret ☐ Chem. Name: Copper Powder Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 Stock Warehouse	☐
CAS 7440-02-0 Trade Secret ☐ Chem. Name: Nickel Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 Stock Warehouse	☐
CAS 7440-48-4 Trade Secret ☐ Chem. Name: Cobalt Powder Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	X Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 Stock Warehouse	☐

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3 and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate and complete.

JOSEPH MACRI — MANAGER FACILITIES — Joseph Macri — 2/28/92

Name and official title of owner/operator OR owner/operator's authorized representative — Signature — Date Signed

Optional Attachments

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

Form Approved OMB No. 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: PERKIN-ELMER CORPORATION METCO DIVISION
Street: 1101 PROSPECT AVENUE
City: WESTBURY County: NASSAU State: NY Zip: 11590
SIC Code: 3542 Dun & Brad Number: 05-773-1663

FOR OFFICIAL USE ONLY ID #: Date Received:

Owner/Operator Name

Name: JOSEPH MACRI Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact

Name: JOSEPH MACRI Title: MANAGER FACILITIES
Phone: (516) 334-1300 EXT. 2374 24 Hr. Phone: (800) 424-9300 CHEMTREC
Name: Title:
Phone: ( ) 24 Hr. Phone: ( )

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19 91

☐ Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7440473 Trade Secret ☐ Chem Name: Chromium Powder Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire X Sudden Release of Pressure Reactivity Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 03 Avg. Daily Amount (code): 03 No. of Days On-site (days): 365	Container Type: N Pressure: 1 Temperature: 4 Stock Warehouse	☐
CAS 7429905 Trade Secret ☐ Chem Name: Aluminum Powder Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire X Sudden Release of Pressure Reactivity X Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 04 Avg. Daily Amount (code): 04 No. of Days On-site (days): 365	N 1 4 Stock Warehouse	☐
CAS 1344281 Trade Secret ☐ Chem Name: Aluminum Oxide Powder Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire Sudden Release of Pressure Reactivity Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 04 Avg. Daily Amount (code): 04 No. of Days On-site (days): 365	N 1 4 Stock Warehouse	☐

Certification *(Read and sign after completing all sections)*

I hereby certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

JOSEPH MACRI — MANAGER FACILITIES — Signature: Joseph Macri — 2/28/92 Date Signed

Name and Official Title of owner, operator or authorized representative

Optional Attachments

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

Form Approved OMB No. 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: PERKIN-ELMER CORPORATION METCO DIVISION
Street: 1101 PROSPECT AVENUE
City: WESTBURY County: NASSAU State: NY Zip: 11590
SIC Code: 3542 Dun & Brad Number: 05-773-1663

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name

Name: JOSEPH MACRI Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact

Name: JOSEPH MACRI Title: MANAGER FACILITIES
Phone: (516) 334-1300 EXT. 2374 24 Hr. Phone: (800) 424-9300 CHEMTREC
Name: Title:
Phone: ( ) 24 Hr. Phone: ( )

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19 91

☐ Check if information below is identical to the information submitted last year

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) — Storage Locations	Optional
CAS: 108952 Trade Secret ☐ Chem Name: Phenol Check all that apply: Pure [X] Mix [X] Solid [ ] Liquid [X] Gas [ ] EHS [X] EHS Name: Phenol	Fire [X] Sudden Release of Pressure [ ] Reactivity [ ] Immediate (acute) [X] Delayed (chronic) [X]	Max. Daily Amount (code): 02 Avg. Daily Amount (code): 02 No. of Days On-site (days): 365	Container Type: F Pressure: 1 Temperature: 4 Stock Warehouse	☐
CAS: Trade Secret ☐ Chem Name: Check all that apply: Pure [ ] Mix [ ] Solid [ ] Liquid [ ] Gas [ ] EHS [ ] EHS Name:	Fire [ ] Sudden Release of Pressure [ ] Reactivity [ ] Immediate (acute) [ ] Delayed (chronic) [ ]	Max. Daily Amount (code): Avg. Daily Amount (code): No. of Days On-site (days):		☐
CAS: Trade Secret ☐ Chem Name: Check all that apply: Pure [ ] Mix [ ] Solid [ ] Liquid [ ] Gas [ ] EHS [ ] EHS Name:	Fire [ ] Sudden Release of Pressure [ ] Reactivity [ ] Immediate (acute) [ ] Delayed (chronic) [ ]	Max. Daily Amount (code): Avg. Daily Amount (code): No. of Days On-site (days):		☐

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted on pages one through 3 and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

JOSEPH MACRI — MANAGER FACILITIES
Name and official title of owner/operator OR owner/operator's authorized representative

Signature: Joseph Macri

Date signed: 2/28/92

Optional Attachments

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

(IMPORTANT: Type or print; read instructions before completing form)

Form Approved OMB Number: 2070-0093
Approval Expires: 11/92

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FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER: 11590PRKNL1101P

Toxic Chemical, Category, or Generic Name: Chromium Powder

WHERE TO SEND COMPLETED FORMS:
1. EPCRA Reporting Center, P.O. Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

For EPA use only

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 94

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?
[ ] Yes (Answer question 2.2; Attach substantiation forms)
[X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [X] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official: Joseph D. Reardon, Global Quality

Signature: Joseph D Reardon

Date Signed: July 20, 1995

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: Sulzer Metco (US) Inc.

TRI Facility ID Number: 11590PRKNL1101P

Street Address: 1101 Prospect Avenue

City: Westbury

County: Nassau

State: New York

Zip Code: 11590

Mailing Address (if different from street address):

City:

State:

Zip Code:

PUT LABEL HERE

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PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Chromium Powder

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check a or b; check c if applicable)	a. ☐ An entire facility	b. ☒ Part of a facility	c. ☐ A Federal facility			
4.3	Technical Contact	Name: Joseph D. Reardon	Telephone Number (include area code): (516) 334-1300				
4.4	Public Contact	Name: Joseph D. Reardon	Telephone Number (include area code): (516) 334-1300				
4.5	SIC Code (4-digit)	a. 3542	b.	c.	d.	e.	f.
4.6	Latitude and Longitude	Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		075	09	50	027	53	16
4.7	Dun & Bradstreet Number(s) (9 digits)	a. 15-208-4398	b.				
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. NYD131318651	b.				
4.9	Facility NPDES Permit Number(s) (9 characters)	a. N/A	b.				
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. N/A	b.				

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	☐ NA Sulzer Inc.
5.2	Parent Company's Dun & Bradstreet Number	☐ NA (9 digits) 00-182-6957

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PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Chromium Powder

SECTION 1. TOXIC CHEMICAL IDENTITY

(Important: DO NOT complete this section if you complete Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	7440-47-3
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	Chromium
1.3	Generic Chemical Name (Important: Complete **only** if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)
	N/A

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
	N/A

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1	**Manufacture the toxic chemical:**	a. ☐ Produce b. ☐ Import	If produce or import: c. ☐ For on-site use/processing d. ☐ For sale/distribution e. ☐ As a byproduct f. ☐ As an impurity
3.2	**Process the toxic chemical:**	a. ☐ As a reactant b. ☐ As a formulation component	c. ☐ As an article component d. ☐ Repackaging
3.3	**Otherwise use the toxic chemical:**	a. ☐ As a chemical processing aid b. ☐ As a manufacturing aid	c. ☒ Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	03 (Enter two-digit code from instruction package.)	

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Chromium Powder

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X] NA			
5.2	Stack or point air emissions	[ ] NA	A	C	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name: N/A				
5.3.2	Stream or Water Body Name: N/A				
5.3.3	Stream or Water Body Name: N/A				
5.4	Underground injections on-site	[X] NA			
5.5	Releases to land on-site				
5.5.1	Landfill	[X] NA			
5.5.2	Land treatment/ application farming	[X] NA			
5.5.3	Surface impoundment	[X] NA			
5.5.4	Other disposal	[X] NA			

[ ] Check here only if additional Section 5.3 information is provided on page 5 of this form.

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Chromium Powder

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3	Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__	Stream or Water Body Name			
	N/A			
5.3.__	Stream or Water Body Name			
	N/A			
5.3.__	Stream or Water Body Name			
	N/A			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)
N/A	

6.1.B POTW Name and Location Information

6.1.B.__ POTW Name		6.1.B.__ POTW Name	
N/A			
Street Address		Street Address	
City	County	City	County
State	Zip Code	State	Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ]
(example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 11590PRKNL1101P

Toxic Chemical, Category, or Generic Name: Chromium Powder

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): NJD089216790

Off-Site Location Name: Chemical Waste Management of New Jersey, Inc.

Street Address: 100 Lister Avenue

City: Newark

County:

State: New Jersey

Zip Code: 07105

Is location under control of reporting facility or parent company? [X] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. C	1. M	1. M 72
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: N/A

Street Address:

City:

County:

State:

Zip Code:

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Section 6.2 page this is, here. [ ] (example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Chromium Powder

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] **Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.**

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b 1 2 3 4 5 6 7 8	7A.1c	7A.1d %	7A.1e Yes No
7A.2a	7A.2b 1 2 3 4 5 6 7 8	7A.2c	7A.2d %	7A.2e Yes No
7A.3a	7A.3b 1 2 3 4 5 6 7 8	7A.3c	7A.3d %	7A.3e Yes No
7A.4a	7A.4b 1 2 3 4 5 6 7 8	7A.4c	7A.4d %	7A.4e Yes No
7A.5a	7A.5b 1 2 3 4 5 6 7 8	7A.5c	7A.5d %	7A.5e Yes No

If additional copies of page 7 are attached, indicate the total number of pages in this box [ ] and indicate which page 7 this is, here. [ ] (example: 1, 2, 3, etc.)

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Chromium Powder

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Chemical, Category, or Generic Name
Chromium Powder

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

All quantity estimates can be reported using up to two significant figures.		Column A Prior Year (pounds/year)	Column B Current Reporting Year (pounds/year)	Column C Following Year (pounds/year)	Column D Second Following Year (pounds/year)
8.1	Quantity released *	3	3	3	3
8.2	Quantity used for energy recovery on-site	0	0	0	0
8.3	Quantity used for energy recovery off-site	0	0	0	0
8.4	Quantity recycled on-site	0	0	0	0
8.5	Quantity recycled off-site	1000	940	950	950
8.6	Quantity treated on-site	0	0	0	0
8.7	Quantity treated off-site	0	0	0	0
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	N/A			
8.9	Production ratio or activity index	.90			

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	N/A	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

		YES	NO
8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)		X

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

HAZARD NOTICE: This material is for the thermal spraying process. Consult the METCO Instruction Manual, the Material Safety Data Sheet, and applicable Federal and local jurisdiction safety and health regulations before utilizing this product. This product should not be ingested; inhalation and skin contact should be avoided. Local ventilation, skin and respiratory protection should be used during handling. Good housekeeping and personal hygiene should be practiced. Some individuals may show unusual sensitivity to exposure. Failure to observe proper practices may result in health hazards.

WARNING FLAMMABLE. HARMFUL IF INHALED. HARMFUL OR FATAL IF SWALLOWED. USE ONLY WITH ADEQUATE VENTILATION. FOR INDUSTRIAL USE ONLY.

Specific Effects Of Overexposure:
Isobutyl Acetate: Hazard by inhalation, skin and eye contact. Inhalation, skin and eye contact may cause irritation of the respiratory tract, skin and eyes.
Ethyl Benzene: Hazard by inhalation, skin and eye contact. Inhalation, skin and eye contact may cause severe irritation of the upper respiratory tract, skin and eyes.
Toluene: Hazard by inhalation, skin absorption and eye contact. Inhalation may cause fatigue, weakness, confusion, euphoria, dizziness, headache, dilated pupils, lacrimation and insomnia. Chronic exposure may cause leukopenia/enlarged liver. Skin contact may cause dermatitis and contribute to overall exposure. Eye contact may cause irritation.
2 Butoxyethanol: Hazard by inhalation, skin and eye contact. Inhalation may cause upper respiratory tract irritation, reproductive effects and anemia. Skin and eye contact may cause irritation.
Denatured Ethyl Alcohol: Hazard by inhalation, ingestion, skin absorption/contact, eye contact. Acute/chronic inhalation may cause irritation of the upper respiratory tract/coughing, central nervous system depression resulting in headache, dizziness and drowsiness. Skin contact may result in redness, burning and defatting. Ingestion may result in severe narcosis and chronic ingestion may result in degenerative changes in the liver, kidney, brain. Eye contact may cause burning and stinging.
Isopropyl Alcohol: Hazard by inhalation, skin and eye contact. Eye/skin contact may cause mild irritation of the eyes/skin. Inhalation may cause mucous membrane irritation, drowsiness, dizziness, headache.
Aluminum: Hazard by inhalation, skin and eye contact. Pulmonary, skin and eye irritant due to abrasive action.
Petroleum Solvent: Hazard by inhalation, skin and eye contact. Inhalation may cause headache, intoxication and nausea. Skin and eye contact may cause irritation and dermatitis.
Xylene: Hazard by inhalation, skin absorption, eye contact and ingestion. Inhalation may cause dizziness, excitement, drowsiness, incoherence, irritated eyes and mucous membranes. Eye contact may cause corneal damage and irritation. Skin contact may cause dermatitis and irritation. Chronic inhalation exposure may cause liver or kidney dysfunction.
Methyl Ethyl Ketone: Hazard by inhalation, skin and eye contact. Inhalation may cause dizziness, headache, narcosis and drowsiness. Eye/skin contact may be strongly irritating.
Diacetone Alcohol: Hazard by inhalation, skin and eye contact. Inhalation may cause intoxication, headache, nausea and nose/throat irritation. Skin and eye contact may cause irritation.
Target Organs: Respiratory tract, Central nervous system, Peripheral nervous system, blood forming organs, reproductive organs, liver, kidney, skin and eyes.

In Case of Fire:
Extinguishing Media: Use National Fire Protection Association (NFPA) Class B extinguishers (carbon dioxide, dry chemical or foam) designed to extinguish NFPA Class 1B flammable liquid fires.
Unusual Fire and Explosion Hazards: Keep containers tightly closed. Isolate from heat, electrical equipment, sparks, open flames, or other sources of ignition. Closed container may explode if exposed to extreme heat. Do not apply to hot surfaces.
Special Fire Fighting Procedures: Water spray may be ineffective. Water may be used to cool containers to prevent pressure buildup and possible auto-ignition or explosion when exposed to extreme heat. If water is used, fog nozzles are preferable.
In Case of Spill or Leak:
Remove all sources of ignition (flames, hot surfaces, electrical static or frictional sparks). Avoid breathing vapors. Ventilate area. Remove with inert absorbent and non-sparking tools. IMPORTANT: Hazardous product residue may be present after contents have been removed. Do not reuse empty package without commercial cleaning or reconditioning.

IN CASE OF SPILL
CALL CHEMTREC - DAY OR NIGHT
1- 800-424-9300

Special Protection Information:
Adequate local/general ventilation should be provided when using this product. Appropriate respiratory, skin, eye and hand protection should be utilized when using this product.

Special Precautions:
Precautions to be Taken in Handling and Storing: Do not store above 120°F.
Other Precautions: Do not take internally. Containers should be grounded when pouring. Avoid free fall of liquid in excess of a few inches. DO NOT FLAME CUT, BRAZE OR WELD EMPTY CONTAINERS. KEEP CONTAINERS CLOSED WHEN NOT IN USE.
Waste Disposal Method: Dispose of in accordance with local, State and Federal regulations.

USING THE NATIONAL PAINT AND COATINGS ASSOCIATION'S HAZARDOUS MATERIALS IDENTIFICATION SYSTEM, THIS PRODUCT'S HAZARD CLASSIFICATION IS:

HEALTH**	3
	** Note: If an asterisk is present, see section 2 and 8 of the MSDS for further information.
FLAMMABILITY	3
REACTIVITY	0
PERSONAL PROTECTION	See the MSDS for proper personal protective equipment.

Flash Point: 36°F
UN1263 PAINT
WARNING: This product contains a chemical known to the STATE OF CALIFORNIA to cause cancer and/or reproductive harm.

HAZARD NOTICE: This material is for the thermal spraying process. Consult the METCO Instruction Manual, the Material Safety Data Sheet, and applicable Federal and local jurisdiction safety and health regulations before utilizing this product. This product should not be ingested; inhalation and skin contact should be avoided. Local ventilation, skin and respiratory protection should be used during handling. Good housekeeping and personal hygiene should be practiced. Some individuals may show unusual sensitivity to exposure. Failure to observe proper practices may result in health hazards.

WARNING FLAMMABLE. HARMFUL IF INHALED. HARMFUL OR FATAL IF SWALLOWED. USE ONLY WITH ADEQUATE VENTILATION. FOR INDUSTRIAL USE ONLY.

Specific Effects Of Overexposure:
Isobutyl Acetate: Hazard by inhalation, skin and eye contact. Inhalation, skin and eye contact may cause irritation of the respiratory tract, skin and eyes.
Ethyl Benzene: Hazard by inhalation, skin and eye contact. Inhalation, skin and eye contact may cause severe irritation of the upper respiratory tract, skin and eyes.
Toluene: Hazard by inhalation, skin absorption and eye contact. Inhalation may cause fatigue, weakness, confusion, euphoria, dizziness, headache, dilated pupils, lacrimation and insomnia. Chronic exposure may cause leukopenia/enlarged liver. Skin contact may cause dermatitis and contribute to overall exposure. Eye contact may cause irritation.
2 Butoxyethanol: Hazard by inhalation, skin and eye contact. Inhalation may cause upper respiratory tract irritation, reproductive effects and anemia. Skin and eye contact may cause irritation.
Denatured Ethyl Alcohol: Hazard by inhalation, ingestion, skin absorption/contact, eye contact. Acute/chronic inhalation may cause irritation of the upper respiratory tract/coughing, central nervous system depression resulting in headache, dizziness and drowsiness. Skin contact may result in redness, burning and defatting. Ingestion may result in severe narcosis and chronic ingestion may result in degenerative changes in the liver, kidney, brain. Eye contact may cause burning and stinging.
Isopropyl Alcohol: Hazard by inhalation, skin and eye contact. Eye/skin contact may cause mild irritation of the eyes/skin. Inhalation may cause mucous membrane irritation, drowsiness, dizziness, headache.
Aluminum: Hazard by inhalation, skin and eye contact. Pulmonary, skin and eye irritant due to abrasive action.
Petroleum Solvent: Hazard by inhalation, skin and eye contact. Inhalation may cause headache, intoxication and nausea. Skin and eye contact may cause irritation and dermatitis.
Xylene: Hazard by inhalation, skin absorption, eye contact and ingestion. Inhalation may cause dizziness, excitement, drowsiness, incoherence, irritated eyes and mucous membranes. Eye contact may cause corneal damage and irritation. Skin contact may cause dermatitis and irritation. Chronic inhalation exposure may cause liver or kidney dysfunction.
Methyl Ethyl Ketone: Hazard by inhalation, skin and eye contact. Inhalation may cause dizziness, headache, narcosis and drowsiness. Eye/skin contact may be strongly irritating.
Diacetone Alcohol: Hazard by inhalation, skin and eye contact. Inhalation may cause intoxication, headache, nausea and nose/throat irritation. Skin and eye contact may cause irritation.
Target Organs: Respiratory tract, Central nervous system, Peripheral nervous system, blood forming organs, reproductive organs, liver, kidney, skin and eyes.

In Case of Fire:
Extinguishing Media: Use National Fire Protection Association (NFPA) Class B extinguishers (carbon dioxide, dry chemical or foam) designed to extinguish NFPA Class 1B flammable liquid fires.
Unusual Fire and Explosion Hazards: Keep containers tightly closed. Isolate from heat, electrical equipment, sparks, open flames, or other sources of ignition. Closed container may explode if exposed to extreme heat. Do not apply to hot surfaces.
Special Fire Fighting Procedures: Water spray may be ineffective. Water may be used to cool containers to prevent pressure buildup and possible auto-ignition or explosion when exposed to extreme heat. If water is used, fog nozzles are preferable.
In Case of Spill or Leak:
Remove all sources of ignition (flames, hot surfaces, electrical static or frictional sparks). Avoid breathing vapors. Ventilate area. Remove with inert absorbent and non-sparking tools. IMPORTANT: Hazardous product residue may be present after contents have been removed. Do not reuse empty package without commercial cleaning or reconditioning.

IN CASE OF SPILL
CALL CHEMTREC - DAY OR NIGHT
1-800-424-9300

Special Protection Information:
Adequate local/general ventilation should be provided when using this product. Appropriate respiratory, skin, eye and hand protection should be utilized when using this product.

Special Precautions:
Precautions to be Taken in Handling and Storing: Do not store above 120°F.
Other Precautions: Do not take internally. Containers should be grounded when pouring. Avoid free fall of liquid in excess of a few inches. DO NOT FLAME CUT, BRAZE OR WELD EMPTY CONTAINERS. KEEP CONTAINERS CLOSED WHEN NOT IN USE.
Waste Disposal Method: Dispose of in accordance with local, State and Federal regulations.

USING THE NATIONAL PAINT AND COATINGS ASSOCIATION'S HAZARDOUS MATERIALS IDENTIFICATION SYSTEM, THIS PRODUCT'S HAZARD CLASSIFICATION IS:

HEALTH**		3
	** Note: If an asterisk is present, see section 2 and 8 of the MSDS for further information.	
FLAMMABILITY		3
REACTIVITY		0
PERSONAL PROTECTION	See the MSDS for proper personal protective equipment.	

Flash Point: 36°F
UN1263 PAINT
WARNING: This product contains a chemical known to the STATE OF CALIFORNIA to cause cancer and/or reproductive harm.

EXAMPLE

(Continued)

SITE NAME Waste Disposal, Inc.

EPA ID NO. A B D 5 8 6 8 1 0 3 4 9

FORM **PS**

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

1993 HAZARDOUS WASTE

WASTE TREATMENT, DISPOSAL OR RECYCLING PROCESS SYSTEMS

INSTRUCTIONS: Read the detailed instructions beginning on page 33 of the Hazardous Waste Report booklet before completing this form.

Sec. I

A. Waste treatment, disposal or recycling system description - Instructions, Page 38

Incineration of sludges in three rotary kiln incinerators

B. System type Instructions, Page 38	C. Regulatory status Instructions, Page 39	D. Operational status Instructions, Page 39	E. Unit types Instructions, Page 39
M 0 4 2	0 1	0 1	0 3

Sec. II

A. 1993 influent quantity - Instuctions Page 40

		UOM	Density
Total	1.0	2	
RCRA	1.0	☐ 1. lbs/gal. ☐ 2. Sg.	
GM Pages			

B. Maximum operational capacity Instuctions Page 41

Total 4.0

RCRA 4.0

C. 1993 liquid effluent quantity Instuctions Page 42

		UOM	Density
Total			
RCRA		☐ 1. lbs/gal. ☐ 2. Sg.	
GM Pages			

D. 1993 solid/sludge quantity Instuctions Page 43

		UOM	Density
Total	80.0	1	
RCRA	80.0	☐ 1. lbs/gal. ☐ 2. Sg.	
GM Pages	4		

E. Limitation on maximum operational capacity: Instructions on Page 43

1. 0 6 2. 0 9 3.

F. Commercial capacity availability code: Instruction Page 44

4

G. Percent of capacity commercially available. Instructions Page 44

1 0 0 %

Sec. III

A. Do you Plan a change in maximum operational capacity? Instuctions Page 44

☒ 1. Yes (continue to Box "B")

☐ 2. No (This form is now complete)

B. New maximum operational capacity Instuctions on Page 45

Total 8.0 UOM 2

RCRA 8.0

C. Planned year of change Instructions Page 45

1 9 9 4

D. Future commercial capacity availability code: Instructions Page 45

4

E. Percent of future capacity will be commercially available? Instructions Page 45

1 0 0 %

Comments:

Page 10 of 12

NYC 6492374

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 12/00)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No.
Manifest Document No.
2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address
4. Generator's Telephone (516)

A. State Manifest Document Number NYC 6492374
B. Generator's ID

5. Transporter 1 (Company Name)
6. US EPA ID Number
C. State Transporter's ID
D. Transporter's Telephone ( )

7. Transporter 2 (Company Name)
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
10. US EPA ID Number
G. State Facility ID
H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
a. c.
b. d.

K. Handling Codes for Wastes Listed Above
a. c.
b. d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

COPY 5-Generator-Mailed by TSD facility

K54474-R5732 SAFETY-KLEEN 09/01/01 PAGE: 1
LOCATION: 211808 LDR NOTIFICATION FORM 09:36:39

GENERATOR NAME: SULZER METCO INC MANIFEST NO.: NYC6492374
OR SALES SERVICE NO.: 18797255

CUST#: 0002-1604-17

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01A SK PROFILE NO.: 0000
SKDOT#: 0000704

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 LQ LIQUID >= 10% TOC
D018
D039
D040

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSITITUENT NOTIFICATION:
100 O-CRESOL
229 TETRACHLOROETHYLENE
237 TRICHLOROETHYLENE
247 ARSENIC
250 CADMIUM
255 LEAD
257 MERCURY - ALL OTHERS
260 SILVER
67 BENZENE

LDR FORM LINE NO.: 2 MANIFEST PAGE/LINE# 01B SK PROFILE NO.: 0000
SKDOT#: 0000801

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 LQ LIQUID >= 10% TOC
D018
D039
D040

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSITITUENT NOTIFICATION:
100 O-CRESOL
229 TETRACHLOROETHYLENE
237 TRICHLOROETHYLENE
247 ARSENIC
250 CADMIUM
255 LEAD
257 MERCURY - ALL OTHERS
260 SILVER
67 BENZENE

N O T E S

EXP NOTICE: THIS LDR EXPIRES ON 12/31/2001.

GENERATOR/AUTHORIZED SIGNATURE — NAME & TITLE (PRINTED OR TYPED): J Stephen Leggio — DATE: 09/05/01

SEQ#: 241 LOC: 211808 TERR: 21 REF#: 18797255 SW: 0139

TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFE

U.S. ENVIRONMENTAL PROTECTION AGENCY
MACHINERY MANUFACTURING AND REBUILDING SURVEY

Company Name METCO INC
Site Name Duffy Ave

31. Provide applicable information in the following table on residues (oil and grease, sludge, etc.) generated during wastewater treatment. Use additional copies of this page as necessary.

Block Diagram Identification	Stream Identification	Volume for Continuous Flows (gph)	Batch Flows		Residue			Disposal Cost ($/gal in ~~1989~~ 1990)
			Volume (gal)	Frequency	Composition by Weight % Dry Solids	% Oil	Disposition (landfill, impoundment, or other (specify))	
1 Barrel Finishing	CN	N/A	5 gallons/day	25 Days per day	100		INCINERATION	4.60/gallon

This page can be photocopied as needed.

NYG 3506094
TRCH 526388
Please type or print. Do not staple

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

MXI 5143

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

D3995149
PPW 06/30/2006 (Waste Manifest 1/5/99)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD131318651
Manifest Doc. No.: 06094
2. Page 1 of: 1
Information within heavy bold line is not required by Federal Law.

3. Generator's Name and Mailing Address
Sulzer Metco US Inc.
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Telephone Number (516) 338-2337

5. Transporter 1 (Company Name): Clean Harbors Env Services Inc
6. US EPA ID Number: MAD039322250

7. Transporter 2 (Company Name): Maurice Express Inc
8. US EPA ID Number: NJD986607380

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4879 Spring Grove Avenue
Cincinnati, OH, 45232
10. US EPA ID Number: OHD000816629

A. NYG 3506094
B. Generator's ID: SAME
C. State Transporter's ID
D. Transporter's Telephone (781) 849-1800
E. State Transporter's ID: 500 59
F. Transporter's Telephone (800) 742-5542
G. State Facility ID
H. Facility Telephone (513) 681-5738

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II	XX1	DF	XX459	P	EPA D002 / STATE
b. HAZARDOUS WASTE, SOLID, N.O.S., (CERAMIC OXIDE, CHROMIUM), 9, NA3077, PG III	XX1	DM	XX107	P	EPA D007 / STATE
c					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
a. ERG#154 (S),(C,E) COPPER CLEANER/CHROMIC ACID
b. ERG#171 (S),(E) RCRA METAL & CERAMIC POWDER

K. Handling Codes for Wastes Listed Above
a. T
b. Z
c.
d.

EMERGENCY PHONE # (800) 483-3718

11a. OH169142 D008 D007 D008 11b. OH169108 NJDEPW07259 DECAL# 582844
1X55 1X55
MXI decal # 085862

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
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GENERATOR — Printed/Typed Name: DAVID WALZAK — Signature: David Walzak — Mo. 07 Day 21 Year 05

TRANSPORTER
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Richard Engel — Signature: Richard Engel — Mo. 07 Day 21 Year 05
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: TERRENCE MUIR — Signature: [illegible] — Mo. 07 Day 22 Year 05

FACILITY
19. Discrepancy Indication Space
Line 11a: Hazardous waste, liquid, n.o.s. (Lead, Chromium), 9, NA3082, PG III with a D008, D007, D008 fr section I.
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: [illegible] — Signature: [illegible] — Mo. 7 Day [illegible] Year 2005

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

COPY 1—Disposer State—Mailed by TSD Facility

NYG 3506094

TRC#526388

Please type or print. Do not staple

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

D3995149
PPW 06/30/2005 (Waste Manifest 1/5/99)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD131318651
Manifest Doc. No.: 06094
2. Page 1 of: 1

Information within heavy bold line is not required by Federal Law.

3. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Telephone Number (516) 338-2337

A. NYG 3506094
B. Generator's ID: SAME

5. Transporter 1 (Company Name): Clean Harbors Env Services Inc
6. US EPA ID Number: MAD039322250
C. State Transporter's ID
D. Transporter's Telephone (781) 848-1800

7. Transporter 2 (Company Name)
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4879 Spring Grove Avenue
Cincinnati, OH, 45232
10. US EPA ID Number: OHD000816629
G. State Facility ID
H. Facility Telephone (513) 681-5738

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II	XX1	DF	XX459	P	EPA D002
					STATE
b. HAZARDOUS WASTE, SOLID, N.O.S., (CERAMIC OXIDE, CHROMIUM), 9, NA3077, PG III	XX1	DM	XX107	P	EPA D007
					STATE
c					EPA
					STATE
d.					EPA
					STATE

J. Additional Descriptions for Materials listed Above
a. ERG#154 (L),(C),(E) COPPER CLEANER/CHROMIC ACID
b. ERG#171 (S),(E) RCRA METAL & CERAMIC POWDER
c
d

K. Handling Codes for Wastes Listed Above
a. T
b. T
c
d

EMERGENCY PHONE # (800) 435-371

11a. CH189140 D008 D007 D008 11b. CH189108 NJDEP#07259 DECAL# 58294X
1X55 1X55

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
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Printed/Typed Name: DAVID WALZAK
Signature:
Mo. 07 Day 12 Year 05

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Richard Engel
Signature:
Mo. 07 Day 12 Year 05

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name
Signature
Mo. Day Year

GENERATOR

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

NYG 3506094

Please type or print. Do not staple

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

D3995149
PPW 08/30/2000 (Waste Manifest 1/5/99)

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD131318651
Manifest Doc. No.:
2. Page 1 of 1

Information within heavy bold line is not required by Federal Law.

A. NYG 3506094

3. Generator's Name and Mailing Address
Super Metals US Inc
1101 Prospect Avenue
Westbury, NY 11590

B. Generator's ID: SAME

4. Generator's Telephone Number (516) 338-2337

5. Transporter 1 (Company Name): Clean Harbors Env Services Inc
6. US EPA ID Number: MAD039322250

C. State Transporter's ID
D. Transporter's Telephone (781) 849-1800

7. Transporter 2 (Company Name):
8. US EPA ID Number:

E. State Transporter's ID
F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4679 Spring Grove Avenue
Cincinnati, OH, 45232

10. US EPA ID Number: OHD000816829

G. State Facility ID
H. Facility Telephone (513) 681-5738

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers' Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II	XX	DF	XXXX	P	EPA D002 / STATE
b. HAZARDOUS WASTE, SOLID, N.O.S., (CERAMIC OXIDE, CHROMIUM), 9, NA3077, PG III	XX	DF	XXXX	P	EPA D007 / STATE
c					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
a. COPPER CLEANER/CHROMIC ACID
b. ERG#171 (8)(E) RCRA METAL & CERAMIC POWDER

K. Handling Codes for Wastes Listed Above
a. T
b. L
c.
d.

EMERGENCY PHONE #: (800) 483-3348

15. Special Handling Instructions and Additional Information
11a. OH1180142 D008 D007 D009 11b. OH1180108 NJDEP#07259 DECAL# 5234x

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
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GENERATOR

Printed/Typed Name	Signature	Mo.	Day	Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Mo.	Day	Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Mo.	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Mo.	Day	Year

COPY 5—Generator—Mailed by TSD Facility

P28UL007466

NYG 3506094

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple

(Hazardous Waste Manifest 1/5/99)

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.	Manifest Doc. No.	2. Page 1 of 1	Information within heavy bold line is not required by Federal Law.
	NJD 0 1 3 1 3 1 8 8 5 1			

3. Generator's Name and Mailing Address
Sanofi Aventis US Inc
1041 Mosquito Avenue
Westfield, NJ 11550

4. Generator's Telephone Number (516) 338-2331

A. NYG 3506094

B. Generator's ID

5. Transporter 1 (Company Name): Clean Harbors Env Services Inc
6. US EPA ID Number: MAD 0 3 9 3 2 2 2 5 0

C. State Transporter's ID

D. Transporter's Telephone (781) 849-1800

7. Transporter 2 (Company Name)
8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4979 Spring Grove Avenue
Cincinnati, OH, 45232

10. US EPA ID Number: O H D 0 0 8 5 1 6 6 2 9

G. State Facility ID

H. Facility Telephone (513) 681-6738

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CORROSIVE, ACID INORGANIC, N.O.S., RQ, PG III					EPA D002; STATE
b. HAZARDOUS WASTE, SOLID, N.O.S., (CHROMIC OXIDE, CHROMIUM), 9, NA3077, PG III					EPA D007; STATE
c					EPA; STATE
d.					EPA; STATE

J. Additional Descriptions for Materials listed Above
a. LOWER CLEAN RECLAIMED ACID
b. BRIGHTT (SILE) FROM METAL & CERAMIC POWDER

K. Handling Codes for Wastes Listed Above
a. c.
b. d.

15. Special Handling Instructions and Additional Information: NJ ES 07/20 DECLAR

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
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Printed/Typed Name	Signature	Mo.	Day	Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Mo.	Day	Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Mo.	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Mo.	Day	Year

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

COPY 8 - Generator Retained Copy

Land Disposal Restriction Notification Form

Date: 07 / 08 / 2005

CleanHarbors ENVIRONMENTAL SERVICES, INC.

MANIFEST INFORMATION

Generator: Sulzer Metco US Inc
Address: 1101 Prospect Avenue
Westbury, NY 11590
EPA ID#: N Y D 1 3 1 3 1 8 6 5 1

Manifest No
NYG3506094
Sales Order No: D3995149
Manifest Document No:

LINE ITEM INFORMATION

Line Item:	Page No:	Profile No:	Treatability Group:	LDR Disposal Category:
11a	1	CH189142	NON- WASTEWATER	2 : This is subject to LDR.

EPA Waste Codes	EPA Waste Subcategory
D002	Corrosive Characteristic
D006	Toxicity characteristic for Cadmium
D007	Toxicity Characteristic for Chromium
D008	Toxicity Characteristic for Lead

LDR Chemical Data

Chemical	Underlying Hazardous Constituents	Constituents of Concern	Contaminants Subject to Treatment
CADMIUM	Y	N	N
Chromium	Y	N	N
LEAD	Y	N	N

Line Item:	Page No:	Profile No:	Treatability Group:	LDR Disposal Category:
11b	1	CH189108	NON- WASTEWATER	2 : This is subject to LDR.

EPA Waste Codes	EPA Waste Subcategory
D007	Toxicity Characteristic for Chromium

Certification — **Applies to Manifest Line Items**

Pursuant to 40 CFR 268.7(a), I hereby notify that this shipment contains waste restricted under 40 CFR Part 268. **11a 11b**

CleanHarbors
ENVIRONMENTAL SERVICES, INC.

Land Disposal Restriction Notification Form

Date: 07 / 08 / 2005

MANIFEST INFORMATION

Generator: Sulzer Metco US Inc
Address: 1101 Prospect Avenue
Westbury, NY 11590
EPA ID#: N Y D 1 3 1 3 1 8 6 5 1

Manifest No
NYG3506094
Sales Order No: D3995149
Manifest Document No:

Waste analysis data, where available, is attached

Signature: [illegible]
Print Name: DAVID WALZDA
Title: Business Tech
Date: 7/12/05

CleanHarbors®
ENVIRONMENTAL SERVICES, INC.
4879 SPRING GROVE AVENUE • CINCINNATI, OH 45232
(513) 681-5738 • FAX (513) 681-7523
Visit our Website at www.cleanharbors.com

August 2, 2005

Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590
Attn: Compliance Officer

Please be advised of the following manifest changes per your request:

Manifest #: NYG3506094
Manifest Date: 07/12/05

Change/Discrepancy:

Line 11a: Hazardous waste, liquid, n.o.s., (Lead, Chromium), 9, NA3082, PG III with a D006, D007, D008 in section I.

Attached is a corrected copy for your files. Should you have any questions regarding this notification, please contact me at 513-681-5738.

Sincerely,

Tim J. Daly
Facility Compliance Specialist

Cc:
File
State

EXAMPLE
(Continued)

SITE NAME ABC Painting Company

EPA ID NO. NYD 910 848 737

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
1993 HAZARDOUS WASTE REPORT

FORM GM

WASTE GENERATION AND MANAGEMENT

INSTRUCTIONS: Read the detailed instructions beginning on page 13 of the Hazardous Waste Report booklet before completing this form.

Sec I

A. Waste description - Instructions, Page 15
Ignitable spent solvent from line flushing operation; mixture of xylene and acetone.

B. EPA hazardous waste code Instructions, Page 16: F003

C. New York State hazardous waste code: Instructions, Page 16

D. SIC code: Page 16	E. Origin Code: Page 16 System type	F. Source code: Page 17	G. Point of measuement: Page 17	H. Form code: Page 17	I. RCRA Radioactive- mixed: Page 17
7532	1 / M	A21	1	B203	2

J. Reported TRI constituent: Page 18: 1

K. CAS numbers: Page 18
1. ____-__-__ 2. ____-__-__
3. ____-__-__ 4. ____-__-__ 5. ____-__-__

Sec II

A. Quantity of Hazardous Waste generated in 1992: Instructions on Page 18: 10500.0

B. Quantity of Hazardous Waste generated in 1993 - Instructions on Page 18: 12500.0

C. UOM: Instr Page 19: 5 Density: 8.00
[X] 1. lbs/gal. [ ] 2. sg

D. Did this site treat on site,dispose of on site, recycle on site or discharge to a sewer/POTW? Instr. Page 19
[ ] 1. Yes (continue to system 1)
[X] 2. No (Skip to Sec. III)

ON-SITE SYSTEM 1 — PS Page Number
On-site system type Instr., Page 19: M
Quantity treated, disposed of, or recycled on site in 1993: ____.__

ON-SITE SYSTEM 2 — PS Page Number
On-site system type Instr., Page 19: M
Quantity treated, disposed of, or recycled on site in 1993: ____.__

Sec III

A. Was any of this waste shipped off site in 1993? Instructions on Page 20
[X] 1. Yes (continue to Box "B")
[ ] 2. No (Skip to Sec. IV)

	B. EPA ID Number of facility to which waste was shipped: Instr., Page 20	C. System type shipped to Instr., Page 20	D. Off- site availability code Instr., Page 21	E. Total quantity shipped in 1993 Instr., Page 21
Site 1	ABD 586 810 349	M041	1	7500.0
Site 2	PQD 124 671 902	M021	1	3750.0

Sec IV

A. Did any new activities in 1993 result in reduction of this waste? Instructions on Page 22
[ ] 1. Yes (continue to Box "B")
[X] 2. No (This form is now complete)

B. Activity - Instr., Page 22	C. Other effects ? Instr., Page 22	D. Quantity recycled in 1993 due to new activities Instr., Page 22	E. Activity/production index Instr., Page 22	F. 1993 source reduction quantity Instr., Page 24
W / W / W / W	[ ] 1. Yes [ ] 2. No	____.__	__.__	____.__

Comments:

Page 3 of 3

SULZER

Sulzer Metco

Waste Disposal Form

Department: Materials Operations Date: 1/20/05

Name of Submitter: Mike Mueller

Waste Description:

Quantity of waste: 1000-2000 gallons

List all constituents known to be present and the approximate percent of each. If the waste is a mixture of Sulzer Metco products, list the approximate percent of each:

1.	Water	90 %	6.		%
2.	Ceramic (Zr)	7 %	7.		%
3.	Nickel/Tungsten	1 %	8.		%
4.	Other	2 %	9.		%
5.		%	10.		%

Properties:

Circle those that apply:

Powder	Liquid	Flammable	Combustible
Oxidizer	Corrosive	Highly Acidic	Highly Alkaline

Please submit this form to the Facilities Department. Do not take the material to anyone. Someone will be assigned to remove the material for storage prior to disposal.

Facilities Use Only:

Waste Profile Code: CH83772B Internal Tracking Number: N/a

Labels Required: N/a

WasteDisposalForm0303

1.20.05

tanker left before Finance could witness the loading process. P.D. 1/20/05

NYG 4060188

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple

031214110
PPW 06/08/2006 (Waste Manifest 1/23/03)

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD131318651
Manifest Doc. No.:
2. Page 1 of: 1
Information within heavy bold line is not required by Federal Law.

3. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590
4. Generator's Telephone Number (516) 338-2337

A. NYG 4060188
B. Generator's ID: SAME

5. Transporter 1 (Company Name): Clean Harbors Env Services Inc
6. US EPA ID Number: MAD039322250
C. State Transporter's ID:
D. Transporter's Telephone (781) 849-1800

7. Transporter 2 (Company Name):
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4579 Spring Grove Avenue
Cincinnati, OH, 45232
10. US EPA ID Number: OHD000816629
G. State Facility ID:
H. Facility Telephone (513) 681-5738

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CORROSIVE LIQUID, ACIDIC, INORGANIC, N.O.S., (HYDROCHLORIC ACID, NITRIC ACID), 8, UN1264, PG II				P	EPA D002 / STATE
b. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II					EPA D002 / STATE
c. HAZARDOUS WASTE, SOLID, N.O.S., (FILTERS, CHROMIUM), 9, NA3077, PG III				P	EPA D007 / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
a. ERG#154 (L),(C,E) MIXED SPENT ACIDS
ERG#171 (S),(E) FILTERS WITH RCRA METALS
b. ERG#154 (L),(C,E) COPPER CLEANER/CHROMIC ACID
d.

K. Handling Codes for Wastes Listed Above
a. T
c. T
b. T
d.

15. Special Handling Instructions and Additional Information
EMERGENCY PHONE #: (800) 483-3718
11a. CH189112 D008 D007 D008 11b. CH189142 D008 D007 D008 11c. CH189135

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Mo. | Day | Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Mo. | Day | Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Tony L Richard | Signature | Mo. | Day | Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Mo. | Day | Year

COPY 5—Generator—Mailed by TSD Facility

P2SOL007582

NYG 3893211

Please type or print. Do not staple

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

D3004242
(Hazardous Waste Manifest 1/23/03)
PPW 11/19/2004

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD131186511
Manifest Doc. No. 932111
2. Page 1 of 1

Information within heavy bold line is not required by Federal Law.

3. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Telephone Number (516 338-2337

A. NYG 3893211
B. Generator's ID SAME

5. Transporter 1 (Company Name) Clean Harbors Env Services Inc
6. US EPA ID Number MAD039322250
C. State Transporter's ID NYMA006
D. Transporter's Telephone (781 849-1800

7. Transporter 2 (Company Name)
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4979 Spring Grove Avenue
Cincinnati, OH, 45232
10. US EPA ID Number OHD000816629
G. State Facility ID
H. Facility Telephone (513 681-6738

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II	001	DF	00492	P	EPA D002 / STATE
b. HAZARDOUS WASTE, SOLID, N.O.S., (CERAMIC OXIDE, ALUMINUM OXIDE), 9, NA3077, PG III	001	DM	00250	P	EPA D007 / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
a. ERG#154 (L),(C,E) COPPER CLEANER/CHROMIC ACID
c.
b. ERG#171 (S),(E) RCRA METAL & CERAMIC POWDER
d.

K. Handling Codes for Wastes Listed Above
a. T
c.
b. T
d.

15. Special Handling Instructions and Additional Information
11a: CH189142 D006 D007 D008 11b: CH189108
EMERGENCY PHONE #: (800) 483-3718
NJDEP#07259 DECAL# 090408
Lic plate AH 516 V (NJ)

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: X Peter DiPietrantonio X
Signature:
Mo. 01 Day 07 Year 05

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Louis Irizarry
Signature: Louis Irizarry
Mo. 01 Day 07 Year 05

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Raul Guzman
Signature: Raul Guzman
Mo. 01 Day 10 Year 05

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name
Signature
Mo. Day Year

GENERATOR

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

COPY 5—Generator—Mailed by TSD Facility

INSTRUCTIONS FOR THE NEW YORK STATE UNIFORM HAZARDOUS WASTE MANIFI

General Information

New York State regulation requires proper completion of all information on a manifest. Omissions, false coding or illegibility is considered a violation. An are responsible under New York State and Federal Law for the proper identification, labeling, manifesting and ultimate disposal of all hazardous waste generate. The manifest system is designed to track hazardous waste from the point of generation until its final disposal (cradle to grave). In order to accomplis this goal, it is essential that all **items on a manifest be properly completed.**

Distribution

Distribution of each copy of the manifest is indicated on the bottom of the form. Copies of the manifest must be mailed promptly. New York State regulations provide five (5) working days for generator and two (2) for a TSDF. The disposer's state is the state in which the designated TSD facility is located. Generator's state is the state in which the installation generating the hazardous waste is located. TSD facility is a treatment, storage or disposal facility.

Generator Section

Item 1-Enter the US EPA ID number (twelve digit number issued by the federal government). The generator must assign a sequential unique, five digit number different for each manifest, as the manifest document number.

Item 2-If a continuation sheet is used, please enter the total number of sheets here. Any EPA approved continuation sheet may be used, but distribution and completion must meet New York manifest requirements. The document number in Item A must be placed in Item L of each continuation sheet.

Items 3-and **4**-Self explanatory. These must correspond to the generator's US EPA ID number.

Items 5, 6, 7 and **8**- These are self-explanatory. These numbers must be secured from the transporter. If more than one transporter is used, the generator must supply additional copies of this manifest for each transporter copy (#5).

Items 9 and **10**-The designated TSD facility, name, address and ID number should appear here.

NOTE: All US EPA ID numbers are a twelve digit code starting off with the letters corresponding to the state in which the facility or transporter is located.

NOTE: Only New York State authorized transporters and TSD facilities are allowed to transport or receive hazardous waste in New York State. The generator shall check for authorization.

Item 11-USDOT requires the word "waste" before or in the shipping name for all hazardous waste. See 49 CFR 171 thru 177. Contact USDOT office for description assistance. Any waste in this box is considered a hazardous waste.

Item 12-

Number-indicate number of containers (use whole numbers).

Containers/Type

DM-Metal drums, barrels, kegs	DT-Dump trucks
DW-Wooden drums, barrels, kegs	CY-Cylinders
DF-Fiberboard or plastic drums, kegs	CM-Metal boxes, cartons, cases, roll-offs
TP-Tanks, portable	CW-Wooden boxes, cartons, cases
TT-Cargo tank, tank trucks	CF-Fiber or plastic boxes, cartons, cases
TC-Tank cars	BA-Burlap, cloth, paper or plastic bags

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to: Chief Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street S.W., Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503

Item 13-Actual number of units indicated in box 14. (Do not use fractions or decimals).

Item 14-Units (wt/vol)

G-Gallons (liquids only)	L-Liters (liquids only)
P-Pounds	K-Kilograms
T-Tons (2,000 pounds)	M-Metric Tons (1,000 kilograms)
Y-Cubic Yards	N-Cubic Meters

Item 15-Use this space to indicate special transportation, treatment, storage or disposal or Bill of Lading information. If an alternate facility is designated, note it here. For international shipments, enter point of departure. Emergency response telephone numbers, or similar information may be included here.

Item 16-The authorized agent of the generator must read and then sign (by hand) and date this certification. The date is the date of receipt by transporter.

NEW YORK STATE REQUIRES THIS ADDITIONAL INFORMATION

Item A-Number preprinted by New York State Department of Environmental Conservation (NYSDEC).

Item B-Generator site address if different from mailing address. If same, write in same.

Item C and **E**-State of registration and motor vehicle license plate number of waste carrying portion of vehicle used to transport.

Item D and **F**-Telephone number of authorized agent.

Item G-No entry required by NYSDEC

Item H-Telephone number at site of TSD facility.

Item I-Hazardous waste numbers (letter and three digits) as assigned by 6 NYCRR Part 371 or 40 CFR 261 must be used to identify hazardous waste. Enter in top box by EPA. If waste is not hazardous in New York but regulated by another state, enter that state's waste code in bottom box.

Item J-If description in Item 11 (a,b,c,d) contains NOS or other general term, the hazardous waste constituent must be provided here for each. The specific gravity assumed to be one (1.00) unless indicated in lower right of each box.

Item K-Each material **must** be assigned an ultimate disposal method code as follows: L=Landfill, B=Incineration, heat recovery, burning, T=Chemical, physical, or biological treatment, R=Material recovery of more than 75 percent of the total material. Both the generator and the TSDF should agree on codes assigned in this item.

Transporter Section

Items 17 and **18**-Print or type the full name of person accepting responsibility and acknowledging receipt of material as listed on manifest for transport. Enter date of receipt and signature.

TSDF Section

Item 19-The authorized representative of the TSDF must note in the space any discrepancy between waste described on manifest and waste actually received. Any rejected materials should be listed and destination of those materials provided.

Item 20-The signature (by hand) of the authorized TSDF agent indicates acceptance (except for Item 19) and agreement with statements on this manifest. The date is the date of signature and receipt of shipment. A TSDF not providing ultimate disposal agrees to transfer waste to a TSDF authorized to provide ultimate disposal as indicated in Item K.

Additional Information

1. If the disposer state supplies a manifest, that state's form must be used. In any case, New York requires that both the generator and TSDF mail copies to the generator's state and the disposer's state, with the ultimate disposal method indicated in Item K.
2. There may be variations in the requirements between various states regarding Items A thru K, therefore, the generator should contact the disposer's state for specific details.
3. If assistance is needed in completion of this manifest, please contact NYSDEC Data Management Section at 518/402-8738 weekdays from 9:00 a.m. to 4:00 p.m.

IEM
Integrated Environmental Management, Inc.

302 Westfield Road
Knoxville, TN 37919
Phone:(865) 588-9180
Fax: (865) 588-9661

8 Brookes Avenue, Suite 205
Gaithersburg, MD 20877
Phone:(240) 631-8990
Fax:(240) 631-8991

2705 N. Main Street, Suite 202
Findlay, OH 45840
Phone:(419) 423-4701
Fax:(419) 423-7462

http://www.iem-inc.com

September 10, 2003

Peter DiPietrantonio
Environmental Health & Safety Specialist
Sulzer Metco (US) Inc.
1101 Prospect Avenue
Westbury, NY 11590

Re: Screening Criteria for Conventional Disposal of Spent Filters

Dear Mr. DiPietrantonio:

In recent telephone conversations, you inquired about regulatory issues associated with the disposal of spent filters in a conventional landfill. Because Sulzer Metco Inc. (Sulzer) processes zirconium feed that contains low but detectable concentrations of naturally-occurring radioactivity (NORM), the issue was raised as to whether the spent filters from the process air handling systems would need to be disposed of as radioactive waste. Because Sulzer's current waste broker disposes of non-hazardous materials in landfills within the State of Pennsylvania, this letter contains a brief summary of the radiological issues at hand, a review of the applicable Pennsylvania regulations, and radiological screening criteria that will ensure compliance with the Pennsylvania regulations during conventional (i.e., non-radioactive) disposal of the spent filters. My qualifications to perform this assessment are included herein as Attachment 1.

Background Information

As you are already aware, radioactivity is ubiquitous. It is in the air we breathe, the food we eat, the water that we drink, and in a host of consumer items and products that we come in contact with every day of our lives. Only one example is the naturally-occurring radioactivity is that found in all ores and earth-borne sands, including zircon sands, which contain uranium and thorium plus their radioactive progeny.

Although the concentrations of uranium and thorium in Sulzer's zirconium feed materials are low, any dust that is generated during processing may indeed contain these radioactive elements. Therefore, when the dust is removed from the air stream using high-efficiency filters, there will be a build-up of uranium and thorium on the filters.[1]

[1] The magnitude of the build-up depends upon how long the filters are in use and the collection efficiency of the filtration system. However, it is not unusual for build-ups to occur to the point where they are detectable using conventional radiation detection methods (i.e., hand-held survey instruments such as Geiger counters and MicroR meters).

Previously you forwarded to me some analytical records showing the general concentrations of uranium and thorium in baghouse dust from your processing operation. These results show that the ratio of uranium to thorium in the dust is about 25 to one (1) on an activity basis.

You also shared with me some preliminary survey information that was acquired by your waste broker on filters that were packaged for shipment (i.e., shrink-wrapped on pallets or in cardboard boxes). The survey results show that the contact exposure rate on the packages ranged from being indistinguishable from background to levels that are slightly in excess of background (i.e., less than three times the ambient background). While these results imply that the spent filters contain relatively little uranium and thorium, it is important to evaluate your measurement information in light of applicable Pennsylvania Department of Environmental Protection (PaDEP) regulations on disposal of radioactivity at conventional landfills, since this is where the spent filters are destined.

Summary of Relevant PaDEP Requirements

In September of 2000, the PaDEP issued Document No. 250-3100-001, "Final Guidance Document on Radioactivity Monitoring at Solid Waste Processing the Disposal Facilities". While the requirements therein are applicable only to owners and operators of solid waste disposal facilities, the landfill that accepts Sulzer's spent filters for disposal must be able to demonstrate compliance with the Final Guidance Document. This means that they would be well-within their rights to reject any shipments that might result in non-compliance. The Final Guidance Document gives disposal approval for any shipments that exhibit an ambient exposure rate on the outside of the shipping container or vehicle of less than 10 microR per hour above the ambient background exposure rate.[2]

In October of 2002, the PaDEP contemplated the issue of a "TENORM Blanket Authorization for Disposal". In that document, technologically-enhanced naturally-occurring radioactive materials would be authorized for disposal if the "average dose rate as measured on the outside of the vehicle is less than or equal to 30 microR per hour and the number of TENORM vehicles with dose rates of 30 microR per hour or more do not exceed 1 truck in 50 (2% of the total trucks)" disposed of at the landfill. The Blanket Authorization would be applicable to the disposal of Sulzer's spent filters.

Screening of the Spent Filters

From the preliminary survey information from your spent filters, it appears that the Sulzer filters in a sole-use transport vehicle will meet the screening criterion of 10 microR per hour listed in the Final Guidance Document. As shown in Attachment 2, the ambient exposure rate at a distance of 30 cm. from the outside of a vehicle that is completely filled with pallets and boxes of spent filters having an average radionuclide concentration of 1.2×10^{-6} microcurie of Thorium-232 (plus progeny in equilibrium) per cubic centimeter and 2.9×10^{-5} microcurie of Uranium-238 (plus progeny in equilibrium) per cubic centimeter, with a total density of the contents of the vehicle (filters and void

---

[2] Most industrial landfills in Pennsylvania are equipped with truck monitors (gate monitors) that measure the radiation exposure rate on the outside of each vehicle before it enters the disposal area. If an exposure rate in excess of 10 microR per hour above background occurs, the truck monitor will alarm, and the landfill operator will implement the requirements of its own "Radiation Protection Action Plan".

spaces) of one (1) gram per cubic centimeter is less than three (3) microR per hour.[3] This estimate is only a third of the PaDEP criterion.

In summary, Sulzer's spent filters are clearly eligible, from the standpoint of radioactivity content, for conventional disposal at a solid waste facility within the State of Pennsylvania. However, to ensure the landfill operator does not reject a shipment of spent filters unnecessarily, I recommend each pallet and box that has been staged for pickup by your waste broker be screened, using a hand-held radiation detection instrument, to confirm that each exhibits an ambient exposure rate of less than 30 microR per hour at a distance of 30 centimeters from any surface.[4] The results of your surveys should be documented and maintained by Sulzer in the event of inquiries into this waste stream. You may also wish to provide a copy of the survey records associated with each shipment to your waste broker and/or the landfill operator.[5]

Thank you for the opportunity of assisting you in this interesting assessment. If you have any questions or if I can provide you with additional information, please do not hesitate to call me at (240) 631-8990.

Sincerely,

Carol D. Berger, C.H.P.

File 2003006.01

---

[3] This calculation has arbitrarily assumed a total uranium/thorium concentration of 30 pCi per gram, and a uranium-to-thorium ratio of 25 to one (1), with each 8-foot by 6-foot by 6-foot wide container (vehicle) having walls equivalent to 1/8--inch steel.

[4] As shown in Attachment 3, if the same radionuclide concentration (i.e., 2.9×10^{-5} microcurie of Uranium-238 and 1.2×10^{-6} microcurie of Thorium-232, plus progeny) from Attachment 2 is evenly distributed throughout a single shrink-wrapped pallet of spent filters, the exposure rate at 30 centimeters from any surface would be approximately 66 microR per hour. Therefore, a screening level of 30 microR per hour for each pallet or box will insure the PaDEP requirement of 10 microR per hour per vehicle-load is met.

[5] I will provide you with a survey procedure and a form for documenting your results in a separate submission.

ATTACHMENT 1

Carol D. Berger

Professional Qualifications

Ms. Berger has over 25 years experience in nuclear and radiological activities with emphasis in strategic planning, radiation dosimetry, instrumentation, and applied health physics. As a co-founder of **IEM**, Inc., Ms. Berger is actively involved in performance of radiological dose assessments, regulatory interactions, site decommissioning, program evaluations, program development, pathway analyses, risk assessments, dosimetry evaluations, assessment and control of sources of non-ionizing radiations, waste management programs, environmental monitoring programs, and detection and quantification of low-levels of radioactivity.

Education

M.S., Health Physics, San Diego State University, San Diego, California; 1979
M.S., Radiation Physics, San Diego State University, San Diego, California; 1977
B.S., Physics/Chemistry, San Diego State University, San Diego, California; 1972

Certifications

Certified Health Physicist (Comprehensive), American Board of Health Physics, 1983 (Re-certified: 1987, 1991, 1995, 1999)
Alternate Radiation Safety Officer - Maryland Department of the Environment Radioactive Materials License No. MD-31-281-01.
Authorized User - - Maryland Department of the Environment Radioactive Materials License No. MD-31-281-01.

Experience and Background

1994 - *Present* — *President and Founder, Integrated Environmental Management, Inc., Gaithersburg, Maryland.* Provides high-quality strategic environmental management services to commercial and government clients. As a member of the client's response team, works with clients to promote an understanding of what is required to achieve and/or maintain compliance in the eyes of all pertinent regulatory agencies, individually or jointly; develop an overall strategy for achieving compliance and reduce liabilities in a technically-sound, legally-defensible, and fiscally-conservative business manner; recommend specific solutions that are compatible with the client's operating philosophy; and provide insights into future regulatory issues and their impact as input to the client's long-range business planning and cost forecasting process.

1989 - 1994 *Senior Technical Consultant, IT Corporation/Nuclear Sciences, Washington, D.C.* Performed health physics consulting for government and commercial facilities in Internal and External Dosimetry; Radiation Monitoring; Environmental Monitoring; Instrumentation; Emergency Response and Preparedness; Site Decommissioning; Radioactive Waste Management; Radiation Risk Assessment; Training; Licensing and Regulatory Negotiations; and Non-ionizing Radiation

1986 - 1989 *Senior Health Physicist, IT Radiological Sciences Laboratory, Knoxville, Tennessee* - Performed health physics consulting for government and commercial facilities in Internal and External Dosimetry; Radiation Monitoring; Environmental Monitoring; Applied Health Physics; Instrumentation; Radioactive Waste Management; Training; and Non-ionizing Radiation.

1983 - 1986 *Radiation Dosimetry Group Leader, Oak Ridge National Laboratory, Oak Ridge, Tennessee.* Responsible for internal and external dose assessment and programs for ORNL employees, visitors and contractors. Experience included Internal and External Dose Assessment; Monitoring Program Design and Implementation; Instrumentation Development; Site Characterizations; Personnel Management; and Training.

1978 - 1983 *Internal Dose Group Leader, Oak Ridge National Laboratory, Oak Ridge, Tennessee.* Responsible for development of the ORNL Whole Body Counter Facility for detection and quantification of the actinides in-vivo. Experience included: Internal Dose Assessment; Monitoring Program Design and Implementation; Instrumentation Development; Special Studies; Personnel Management; and Training.

1978 - 1986 *Adjunct Faculty, Oak Ridge Associated Universities, Oak Ridge, Tennessee.* Professional training courses and general classes in the following health physics and radiation protection areas: Internal Dose Assessment; In-vivo Monitoring and Bioassay Methodologies; Instrumentation, and Applied Health Physics.

1979 - 1980 *Health Physics and Dosimetry Task Group Member, President's Commission on the Accident at Three Mile Island, Washington, D.C.* Tasks included: Internal Dose Assessment from Whole Body Counting Results; Estimates of Source Term from in-plant Monitoring Systems; Atmospheric Dispersion Modeling and Population Dose Assessment; and Development of Health Physics Sequence of Events.

Professional Society Membership

American Academy of Health Physics (President, 1995; Executive Committee, 1995-1997; Chair of Strategic Planning Committee, 1997; Chair of Professional Standards and Ethics Committee, 2003)

Health Physics Society (Plenary Member; Publications Committee, 1999-2001)

Baltimore-Washington Chapter, Health Physics Society (Treasurer, 1993-1994, Board of Directors, 1998-2000)
American Bar Association (Natural Resources, Energy, and Environmental Law)
Environmental Law Institute

Publications

Over 30 professional publications; over 40 oral presentations; over 100 technical reports; over 25 training courses taught.

Other Appointments/Awards

East Tennessee Chapter - Health Physics Society (President, 1986; President-Elect, 1985; Secretary, 1981-1982)

San Diego Chapter - Health Physics Society (Charter member)

American Board of Health Physics, Comprehensive Panel of Examiners, (1989-1993)

ASTM Task Group E-10.04.27 "Transuranic Wound Analysis"; (1986 to 1000)

ANSI Standards Committee (ANSI N13.41) on Multiple Badging; 1986 to 1996 (Chairman, PlanCo-59 Working Group, 1990 to 1996)

ANSI Standards Committee (ANSI N13.39) on Internal Dosimetry Programs (1994 to 2001)

National Council on Radiation Protection and Measurements (NCRP) Scientific Committee 46-10, "Assessment of Occupational Exposures from Internal Emitters" (1989-present)

Purdue University, Health Sciences Advisory Council for the School of Health Sciences (1995-1998)

DOE/IAEA Whole Body Counter Intercalibration Committee (1980-1986)

Consultant to Knoxville Academy of Medicine, Mass Casualty Simulation (1984-1985)

Consultant to the National Cancer Institute to Evaluate Devices and Techniques to Determine Previous Radiation Exposure under Public Law 98-54 (Award for participation presented by Oak Ridge Associated Universities in April, 1988.)

Steering Committee Member, U. S. Department of Energy Task Group on the Education of Future Health Physicists (1989-1991)

Technical reviewer and referee for *Health Physics*, *Nuclear Technology*, and *Radiation Protection Management*

IT Corporation *Distinguished Technical Associate* - June, 1992.

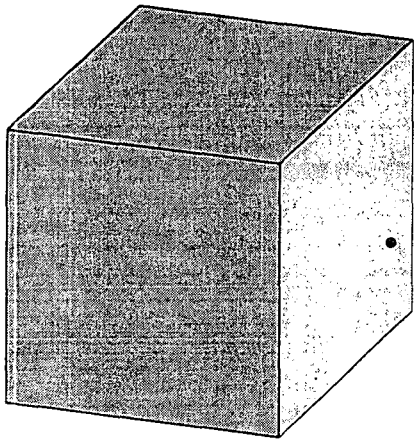
ATTACHMENT 2

MicroShield v5.01 (5.01-00996)
Integrated Environmental Management, Inc.

Page : 1
DOS File: SULZER.MS5
Run Date: September 10, 2003
Run Time: 3:16:00 PM
Duration: 00:00:08

File Ref: 2003006.01
Date: 9/10/03
By: [illegible]
Checked: [illegible]

Case Title: Sulzer Metco
Description: Outside of Shipping Container at d = 30 cm. (1 foot)
Geometry: 13 - Rectangular Volume



Source Dimensions

Length	182.88 cm	6 ft
Width	243.84 cm	8 ft
Height	182.88 cm	6 ft

Dose Points

	X	Y	Z
# 1	213.6648 cm	91.44 cm	121.92 cm
	7 ft 0.1 in	3 ft	4 ft

Shields

Shield Name	Dimension	Material	Density
Source	288.0 ft³	Carbon	1
Shield 1	.01 ft	Iron	7.86
Air Gap		Air	0.00122

Source Input
Grouping Method : Standard Indices
Number of Groups : 25
Lower Energy Cutoff : 0.015
Photons < 0.015 : Excluded
Library : ICRP-38

Nuclide	curies	becquerels	μCi/cm³	Bq/cm³
Ac-228	2.6051e-007	9.6391e+003	3.1944e-008	1.1819e-003
Bi-210	6.5469e-006	2.4223e+005	8.0278e-007	2.9703e-002
Bi-212	2.6051e-007	9.6391e+003	3.1944e-008	1.1819e-003
Bi-214	6.5469e-006	2.4223e+005	8.0278e-007	2.9703e-002
Pa-234	6.5469e-006	2.4223e+005	8.0278e-007	2.9703e-002
Pa-234m	6.5469e-006	2.4223e+005	8.0278e-007	2.9703e-002
Pb-210	6.5469e-006	2.4223e+005	8.0278e-007	2.9703e-002
Pb-212	2.6051e-007	9.6391e+003	3.1944e-008	1.1819e-003
Pb-214	6.5469e-006	2.4223e+005	8.0278e-007	2.9703e-002
Po-210	6.5469e-006	2.4223e+005	8.0278e-007	2.9703e-002
Po-212	1.6673e-007	6.1690e+003	2.0444e-008	7.5644e-004
Po-214	6.5469e-006	2.4223e+005	8.0278e-007	2.9703e-002
Po-216	6.5469e-006	2.4223e+005	8.0278e-007	2.9703e-002
Ra-224	2.6051e-007	9.6391e+003	3.1944e-008	1.1819e-003
Ra-226	6.5469e-006	2.4223e+005	8.0278e-007	2.9703e-002
Ra-228	2.6051e-007	9.6391e+003	3.1944e-008	1.1819e-003
Rn-220	2.6051e-007	9.6391e+003	3.1944e-008	1.1819e-003
Rn-222	6.5469e-006	2.4223e+005	8.0278e-007	2.9703e-002
Th-228	2.6051e-007	9.6391e+003	3.1944e-008	1.1819e-003
Th-230	6.5469e-006	2.4223e+005	8.0278e-007	2.9703e-002
Th-232	2.6051e-007	9.6391e+003	3.1944e-008	1.1819e-003
Th-234	6.5469e-006	2.4223e+005	8.0278e-007	2.9703e-002
Tl-208	9.3785e-008	3.4701e+003	1.1500e-008	4.2550e-004
U-234	6.5469e-006	2.4223e+005	8.0278e-007	2.9703e-002
U-238	6.5469e-006	2.4223e+005	8.0278e-007	2.9703e-002

DOS File: SULZER.MS5
Run Date: September 10, 2003
Run Time: 3:16:00 PM
Duration: 00:00:08

Buildup
The material reference is : Source

Integration Parameters

X Direction	10
Y Direction	20
Z Direction	20

Results

Energy MeV	Activity photons/sec	Fluence Rate MeV/cm²/sec No Buildup	Fluence Rate MeV/cm²/sec With Buildup	Exposure Rate mR/hr No Buildup	Exposure Rate mR/hr With Buildup
0.015	1.977e+05	8.855e-68	5.197e-28	7.595e-69	4.458e-29
0.02	4.370e+04	8.772e-34	7.312e-28	3.039e-35	2.533e-29
0.03	1.162e+01	1.045e-17	1.183e-15	1.036e-19	1.173e-17
0.04	3.922e+02	7.856e-11	1.589e-08	3.474e-13	7.027e-11
0.05	1.296e+04	3.368e-07	5.705e-05	8.973e-10	1.520e-07
0.06	1.880e+04	5.342e-06	6.113e-04	1.061e-08	1.214e-06
0.08	6.382e+04	1.697e-04	9.102e-03	2.685e-07	1.440e-05
0.1	1.590e+05	1.171e-03	3.635e-02	1.792e-06	5.561e-05
0.15	7.467e+04	1.696e-03	2.397e-02	2.793e-06	3.948e-05
0.2	8.236e+04	3.267e-03	3.100e-02	5.767e-06	5.471e-05
0.3	7.067e+04	5.515e-03	3.420e-02	1.046e-05	6.487e-05
0.4	1.073e+05	1.320e-02	6.395e-02	2.573e-05	1.246e-04
0.5	2.728e+04	4.769e-03	1.952e-02	9.360e-06	3.832e-05
0.6	2.091e+05	4.867e-02	1.768e-01	9.499e-05	3.450e-04
0.8	2.142e+05	7.842e-02	2.357e-01	1.492e-04	4.484e-04
1.0	2.170e+05	1.132e-01	3.016e-01	2.086e-04	5.560e-04
1.5	8.115e+04	8.064e-02	1.797e-01	1.357e-04	3.024e-04
2.0	7.227e+04	1.129e-01	2.268e-01	1.747e-04	3.508e-04
3.0	3.875e+03	1.134e-02	2.003e-02	1.539e-05	2.718e-05
TOTALS:	1.656e+06	4.750e-01	1.360e+00	8.347e-04	2.423e-03

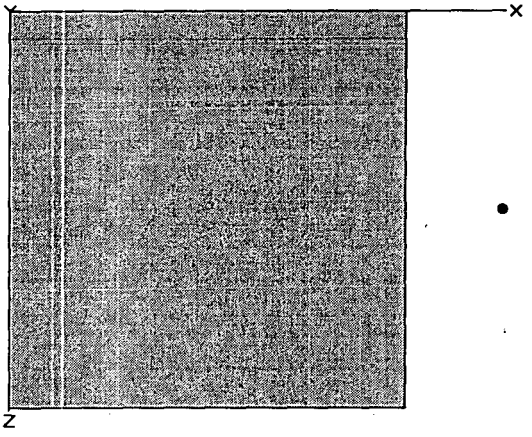
ATTACHMENT 3

MicroShield v5.01 (5.01-00996)
Integrated Environmental Management, Inc.

Page : 1
DOS File: Case1
Run Date: September 10, 2003
Run Time: 2:08:44 PM
Duration: 00:00:08

File Ref: 2003006.01
Date: 9/10/03
By: [illegible]
Checked: [illegible]

Case Title: Sulzer Metco
Description: 30 pCi/g in pallet at 30 cm
Geometry: 13 - Rectangular Volume



Source Dimensions

Length	121.92 cm	4 ft
Width	121.92 cm	4 ft
Height	121.92 cm	4 ft

Dose Points

	X	Y	Z
# 1	151.92 cm	60.96 cm	60.96 cm
	4 ft 11.8 in	2 ft	2 ft

Shields

Shield Name	Dimension	Material	Density
Source	1.81e+06 cm³	Carbon	1
Air Gap		Air	0.00122

Source Input
Grouping Method : Standard Indices
Number of Groups : 25
Lower Energy Cutoff : 0.015
Photons < 0.015 : Excluded
Library : ICRP-38

Nuclide	curies	becquerels	µCi/cm³	Bq/cm³
Ac-228	2.0841e-006	7.7112e+004	1.1500e-006	4.2550e-002
Bi-210	5.2375e-005	1.9379e+006	2.8900e-005	1.0693e+000
Bi-212	2.0841e-006	7.7112e+004	1.1500e-006	4.2550e-002
Bi-214	5.2375e-005	1.9379e+006	2.8900e-005	1.0693e+000
Pa-234	5.2375e-005	1.9379e+006	2.8900e-005	1.0693e+000
Pa-234m	5.2375e-005	1.9379e+006	2.8900e-005	1.0693e+000
Pb-210	5.2375e-005	1.9379e+006	2.8900e-005	1.0693e+000
Pb-212	2.0841e-006	7.7112e+004	1.1500e-006	4.2550e-002
Pb-214	5.2375e-005	1.9379e+006	2.8900e-005	1.0693e+000
Po-210	5.2375e-005	1.9379e+006	2.8900e-005	1.0693e+000
Po-212	1.3338e-006	4.9352e+004	7.3600e-007	2.7232e-002
Po-214	5.2375e-005	1.9379e+006	2.8900e-005	1.0693e+000
Po-216	5.2375e-005	1.9379e+006	2.8900e-005	1.0693e+000
Ra-224	2.0841e-006	7.7112e+004	1.1500e-006	4.2550e-002
Ra-226	5.2375e-005	1.9379e+006	2.8900e-005	1.0693e+000
Ra-228	2.0841e-006	7.7112e+004	1.1500e-006	4.2550e-002
Rn-220	2.0841e-006	7.7112e+004	1.1500e-006	4.2550e-002
Rn-222	5.2375e-005	1.9379e+006	2.8900e-005	1.0693e+000
Th-228	2.0841e-006	7.7112e+004	1.1500e-006	4.2550e-002
Th-230	5.2375e-005	1.9379e+006	2.8900e-005	1.0693e+000
Th-232	2.0841e-006	7.7112e+004	1.1500e-006	4.2550e-002
Th-234	5.2375e-005	1.9379e+006	2.8900e-005	1.0693e+000
Tl-208	7.5028e-007	2.7760e+004	4.1400e-007	1.5318e-002
U-234	5.2375e-005	1.9379e+006	2.8900e-005	1.0693e+000
U-238	5.2375e-005	1.9379e+006	2.8900e-005	1.0693e+000

Buildup

DOS File: Case1
Run Date: September 10, 2003
Run Time: 2:08:44 PM
Duration: 00:00:08

The material reference is : Source

Integration Parameters

X Direction	10
Y Direction	20
Z Direction	20

Results

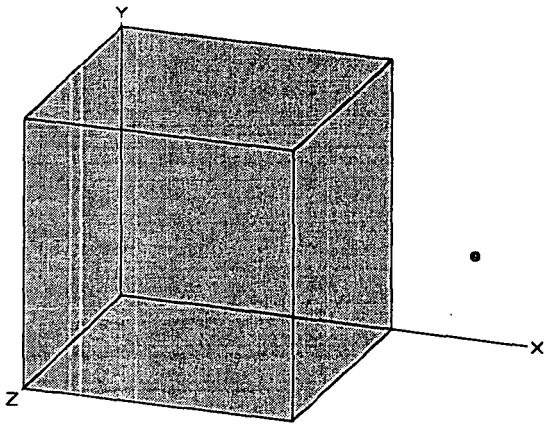
Energy MeV	Activity photons/sec	Fluence Rate MeV/cm²/sec No Buildup	Fluence Rate MeV/cm²/sec With Buildup	Exposure Rate mR/hr No Buildup	Exposure Rate mR/hr With Buildup
0.015	1.581e+06	3.563e-03	5.546e-03	3.056e-04	4.757e-04
0.02	3.496e+05	2.565e-03	5.051e-03	8.884e-05	1.750e-04
0.03	9.295e+01	1.826e-06	6.602e-06	1.809e-08	6.543e-08
0.04	3.137e+03	9.930e-05	6.163e-04	4.392e-07	2.726e-06
0.05	1.037e+05	4.474e-03	3.925e-02	1.192e-05	1.046e-04
0.06	1.504e+05	8.214e-03	8.432e-02	1.631e-05	1.675e-04
0.08	5.105e+05	3.990e-02	4.171e-01	6.313e-05	6.601e-04
0.1	1.272e+06	1.309e-01	1.220e+00	2.003e-04	1.866e-03
0.15	5.973e+05	1.023e-01	6.823e-01	1.685e-04	1.124e-03
0.2	6.589e+05	1.636e-01	8.621e-01	2.888e-04	1.522e-03
0.3	5.654e+05	2.396e-01	9.421e-01	4.545e-04	1.787e-03
0.4	8.582e+05	5.355e-01	1.760e+00	1.043e-03	3.429e-03
0.5	2.183e+05	1.846e-01	5.358e-01	3.624e-04	1.052e-03
0.6	1.673e+06	1.819e+00	4.835e+00	3.551e-03	9.437e-03
0.8	1.714e+06	2.780e+00	6.390e+00	5.287e-03	1.215e-02
1.0	1.736e+06	3.853e+00	8.095e+00	7.103e-03	1.492e-02
1.5	6.492e+05	2.560e+00	4.708e+00	4.308e-03	7.921e-03
2.0	5.782e+05	3.427e+00	5.816e+00	5.300e-03	8.994e-03
3.0	3.100e+04	3.247e-01	4.974e-01	4.406e-04	6.749e-04
TOTALS:	1.325e+07	1.618e+01	3.689e+01	2.899e-02	6.647e-02

MicroShield v5.01 (5.01-00996)
Integrated Environmental Management, Inc.

Page : 1
DOS File: SULZER.MS5
Run Date: September 10, 2003
Run Time: 2:12:40 PM
Duration: 00:00:07

File Ref: 2003006.01
Date: 9/10/03
By: [illegible]
Checked: [illegible]

Case Title: Sulzer Metco
Description: 30 pCi/g in box at 30 cm
Geometry: 13 - Rectangular Volume



Source Dimensions

Length	60.96 cm	2 ft
Width	60.96 cm	2 ft
Height	60.96 cm	2 ft

Dose Points

	X	Y	Z
# 1	90.96 cm	30.48 cm	30.48 cm
	2 ft 11.8 in	1 ft	1 ft

Shields

Shield Name	Dimension	Material	Density
Source	2.27e+05 cm³	Carbon	1
Air Gap		Air	0.00122

Source Input
Grouping Method : Standard Indices
Number of Groups : 25
Lower Energy Cutoff : 0.015
Photons < 0.015 : Excluded
Library : ICRP-38

Nuclide	curies	becquerels	µCi/cm³	Bq/cm³
Ac-228	2.6051e-007	9.6391e+003	1.1500e-006	4.2550e-002
Bi-210	6.5469e-006	2.4223e+005	2.8900e-005	1.0693e+000
Bi-212	2.6051e-007	9.6391e+003	1.1500e-006	4.2550e-002
Bi-214	6.5469e-006	2.4223e+005	2.8900e-005	1.0693e+000
Pa-234	6.5469e-006	2.4223e+005	2.8900e-005	1.0693e+000
Pa-234m	6.5469e-006	2.4223e+005	2.8900e-005	1.0693e+000
Pb-210	6.5469e-006	2.4223e+005	2.8900e-005	1.0693e+000
Pb-212	2.6051e-007	9.6391e+003	1.1500e-006	4.2550e-002
Pb-214	6.5469e-006	2.4223e+005	2.8900e-005	1.0693e+000
Po-210	6.5469e-006	2.4223e+005	2.8900e-005	1.0693e+000
Po-212	1.6673e-007	6.1690e+003	7.3600e-007	2.7232e-002
Po-214	6.5469e-006	2.4223e+005	2.8900e-005	1.0693e+000
Po-216	6.5469e-006	2.4223e+005	2.8900e-005	1.0693e+000
Ra-224	2.6051e-007	9.6391e+003	1.1500e-006	4.2550e-002
Ra-226	6.5469e-006	2.4223e+005	2.8900e-005	1.0693e+000
Ra-228	2.6051e-007	9.6391e+003	1.1500e-006	4.2550e-002
Rn-220	2.6051e-007	9.6391e+003	1.1500e-006	4.2550e-002
Rn-222	6.5469e-006	2.4223e+005	2.8900e-005	1.0693e+000
Th-228	2.6051e-007	9.6391e+003	1.1500e-006	4.2550e-002
Th-230	6.5469e-006	2.4223e+005	2.8900e-005	1.0693e+000
Th-232	2.6051e-007	9.6391e+003	1.1500e-006	4.2550e-002
Th-234	6.5469e-006	2.4223e+005	2.8900e-005	1.0693e+000
Tl-208	9.3785e-008	3.4701e+003	4.1400e-007	1.5318e-002
U-234	6.5469e-006	2.4223e+005	2.8900e-005	1.0693e+000
U-238	6.5469e-006	2.4223e+005	2.8900e-005	1.0693e+000

Buildup

DOS File: SULZER.MS5
Run Date: September 10, 2003
Run Time: 2:12:40 PM
Duration: 00:00:07

The material reference is : Source

Integration Parameters

X Direction	10
Y Direction	20
Z Direction	20

Results

Energy MeV	Activity photons/sec	Fluence Rate MeV/cm²/sec No Buildup	Fluence Rate MeV/cm²/sec With Buildup	Exposure Rate mR/hr No Buildup	Exposure Rate mR/hr With Buildup
0.015	1.977e+05	2.664e-03	3.692e-03	2.285e-04	3.166e-04
0.02	4.370e+04	1.479e-03	2.650e-03	5.123e-05	9.180e-05
0.03	1.162e+01	9.811e-07	3.284e-06	9.723e-09	3.255e-08
0.04	3.922e+02	5.246e-05	2.934e-04	2.320e-07	1.297e-06
0.05	1.296e+04	2.345e-03	1.810e-02	6.247e-06	4.822e-05
0.06	1.880e+04	4.284e-03	3.790e-02	8.509e-06	7.527e-05
0.08	6.382e+04	2.067e-02	1.822e-01	3.271e-05	2.883e-04
0.1	1.590e+05	6.749e-02	5.246e-01	1.033e-04	8.026e-04
0.15	7.467e+04	5.217e-02	2.888e-01	8.592e-05	4.756e-04
0.2	8.236e+04	8.268e-02	3.636e-01	1.459e-04	6.417e-04
0.3	7.067e+04	1.192e-01	3.970e-01	2.262e-04	7.530e-04
0.4	1.073e+05	2.631e-01	7.388e-01	5.127e-04	1.439e-03
0.5	2.728e+04	8.973e-02	2.243e-01	1.761e-04	4.403e-04
0.6	2.091e+05	8.752e-01	2.017e+00	1.708e-03	3.938e-03
0.8	2.142e+05	1.314e+00	2.637e+00	2.499e-03	5.017e-03
1.0	2.170e+05	1.794e+00	3.310e+00	3.306e-03	6.102e-03
1.5	8.115e+04	1.154e+00	1.884e+00	1.941e-03	3.170e-03
2.0	7.227e+04	1.505e+00	2.283e+00	2.327e-03	3.530e-03
3.0	3.875e+03	1.370e-01	1.893e-01	1.858e-04	2.569e-04
TOTALS:	1.656e+06	7.485e+00	1.510e+01	1.355e-02	2.739e-02

Feldhusen, Marian

From: TrackingUpdates@fedex.com
Sent: Monday, March 05, 2007 9:10 AM
To: Feldhusen, Marian
Subject: FedEx Shipment 798619638106 Delivered

This tracking update has been requested by:

Company Name: SULZER METCO US INC

Name: Marian Feldhusen

E-mail: marian.feldhusen@sulzer.com

Our records indicate that the following shipment has been delivered:

Tracking number:	798619638106
Ship (P/U) date:	Mar 2, 2007
Delivery date:	Mar 5, 2007 9:06 AM
Sign for by:	A.LABARR
Delivered to:	Mailroom
Service type:	FedEx Standard Overnight
Packaging type:	FedEx Envelope
Number of pieces:	1
Weight:	0.50 lb.

Shipper Information
Marian Feldhusen
SULZER METCO US INC
1101 PROSPECT AVENUE
WESTBURY
NY
US
11590

Recipient Information
Ms. Alyse Peterson Radioactive
Waste Policy & Nuclear Coordination
NYSERDA
17 Columbia Circle
Albany
NY
US
122036399

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(Printed - 2/28/07)
Low Level Radioactive Waste
Annual Report Regulation

NEW YORK
CODES, RULES AND REGULATIONS
21 NYCRR — Part 502

CODE OF FEDERAL REGULATIONS
10 CFR — Section 61.55

NEW YORK STATE
Public Authorities Law
Section 1854-d (1)

New York State Energy Research and Development Authority

21 NYCRR
PART 502
REPORTS BY GENERATORS OF LOW-LEVEL RADIOACTIVE WASTE

Section 502.1. Purpose. Ch. 673, L. 1986, the Low-Level Radioactive Waste Management Act, provides that the New York State Energy Research and Development Authority has responsibility for the construction and operation by 1993 of facilities in New York for permanent disposal of low-level radioactive waste generated within New York. The Act establishes the Commission for Siting Low-Level Radioactive Waste Disposal Facilities and empowers the Commission to make site and disposal method selections, sufficient to accommodate low-level radioactive waste generated in New York over at least thirty years. The Act also provides related responsibilities for the New York State Department of Environmental Conservation ("DEC") and the New York State Department of Health ("DOH"). The Act provides that the Authority shall establish by regulation and collect rates, charges, and other fees upon the disposal of low-level radioactive waste sufficient to recover from generators costs of the State associated with low-level radioactive waste management facilities, and authorizes the Authority to establish terms and conditions for receipt, acceptance, and disposal of low-level radioactive waste at the permanent disposal facilities. The Act requires the Authority to submit annually to the Governor and the Legislature a report summarizing low-level radioactive waste generated within New York during the previous calendar year. In addition, the Act requires each generator of low-level radioactive waste within New York to submit to the Authority no less frequently than annually a report detailing low-level radioactive waste generated, stored for decay or later transfer, or transferred by the generator. The purpose of these rules is to set forth the requirements for reports to be submitted by generators to the Authority. The purpose of the reporting requirements is to assist the Authority in constructing low-level radioactive waste management facilities, establishing rates, charges, and other fees for disposal of low-level radioactive waste, and terms and conditions for its receipt, acceptance, and disposal at permanent disposal facilities, and preparing the reports to be submitted annually by the Authority to the Governor and the Legislature. In addition, the reports are intended to provide information useful to the DEC, the Commission for Siting Low-Level Radioactive Waste Disposal Facilities, and the Advisory Committee on Permanent Disposal Facilities Siting and Disposal Method Selection in meeting their responsibilities under the Act.

Section 502.2. Definitions. For purposes of this Part:

(a) "Act" means the Low-Level Radioactive Waste Management Act (Ch.673, L. 1986).

(b) "Authority" means the New York State Energy Research and Development Authority, and any successor thereto.

(c) "Class" means the classes of low-level radioactive waste, Class A, Class B, and Class C, as described in sections 61.55 and 61.56 of Title 10, Code of Federal Regulations, as in effect on January 26, 1983.

(d) "Director" means the Program Director, Radioactive Waste Management Program, or his designee, New York State Energy Research and Development Authority, Two Rockefeller Plaza, Albany, N.Y. 12223.

(e) "Generate" means to produce or cause the production of, or to engage in an activity which otherwise results in the creation or increase in the volume, of low-level radioactive waste.

(f) "Generator" means a person who by his actions within New York, or through the actions within New York of any agent, employee, or independent contractor, generates low-level radioactive waste. For purposes of this Part, a person who only provides a service by arranging for the collection, transportation, treatment, storage, or disposal of lowlevel radioactive waste generated by others within or outside of New York is a generator only if and to the extent that such person himself generates low-level radioactive waste as a result of such activities. In such event, such person shall submit a report, pursuant to section 502.3, only for the low-level radioactive waste such person himself generates.

(g) "Licensed LLRW disposal facility" means any of the three disposal facilities existing upon the effective date of these regulations at Barnwell, South Carolina, Richland, State of Washington, and Beatty, Nevada.

(h) "Low-level radioactive waste" and "LLRW" means radioactive waste:

(i) (A) that is not high-level radioactive waste, transuranic waste, spent nuclear fuel, or the tailings or wastes produced by the extraction or concentration of uranium or thorium from any ore processed primarily for its source material content; and

(B) which consists of or contains Class A, B, or C radioactive waste as described in sections 61.55 and 61.56 of Title 10, Code of Federal Regulations, as in effect on January 26, 1983.

(ii) provided that, for purposes of this Part, low-level radioactive waste does not include radioactive waste:

(A) owned or generated by the United States Department of Energy;

(B) owned or generated by the United States Navy as a result of the decommissioning of vessels of the United States Navy; or

(C) owned or generated by the Federal Government as a result of any research, development, testing, or production of any atomic weapons.

(i) "Person" means an individual, partnership, corporation, or other legal entity, including any state, interstate, federal, or municipal governmental entity.

(j) "Waste" means material which is not in use and is no longer useful.

Section 502.3. Reports. (a) No later than April 27, 1987, and no later than March 1 of each year thereafter, each generator shall submit to the Director a report (one copy), containing the information set forth in paragraph (c) of this section, for the preceding calendar year; provided, that if a generator generated low-level radioactive waste at facilities located more than twenty-five miles apart, or at facilities located twenty-five miles or less apart for which separate authorizations are held, issued by the operator of a licensed LLRW disposal facility (e.g., site use permit) or the host state in which a licensed LLRW disposal facility is located, which authorize transfer of LLRW to a licensed LLRW disposal facility, the generator shall submit a separate report (one copy) for each such facility.

(b) In the event two or more persons are generators with respect to the same low-level radioactive waste (for instance, because of their relationship as employer and employee or principal and agent, those persons shall designate between or among themselves one person who shall submit the report required by this section. The designee shall indicate on the report required by this section the identities of each of the other generators who are not submitting the report, and the nature of the relationships between or among the designee and such other generators. Notwithstanding the foregoing provisions of this paragraph (b), an employer may submit the report on behalf of its employees, and a medical institution or university may submit the report on behalf of its physicians, interns, staff, or students who generate LLRW as independent contractors to such medical institution or university, without identifying the employees, physicians, interns, staff, or students on behalf of whom the report is submitted.

(c) Each report shall contain the following information:

(i) calendar year reporting period;

(ii) name, principal office address (and, if different, address of the facility at which LLRW was generated), and telephone number of the generator;

(iii) type of generator (e.g., medical, university, industial, electric utility, or governmental) and a description of the activity, process, or use of radioactive material which results in the generation of LLRW;

(iv) the information with respect to other generators, if applicable, described in paragraph (b) of this section;

(v) name, title, and telephone number of the individual who prepared the report;

(vi) identification of any and all radioactive material and nuclear facility licenses issued by the United States Nuclear Regulatory Commission, the New York State Department of Health, the New York State Department of Labor, or the New York City Department of Health under which LLRW is generated, including identification of the respective licensing agency;

(vii) identification of any and all authorizations held by the generator, issued by the operator of a licensed LLRW disposal facility (e.g., site use permit) or the host state in which a licensed LLRW disposal facility is

located, which authorize transfer of LLRW to a licensed LLRW disposal facility;

(viii) details regarding LLRW transferred, either directly or through a broker or agent, for disposal at a licensed LLRW disposal facility during the reporting period, including:

(A) the total volume, volume by class, and activity by radionuclide and class;

(B) the types and specifications of individual containers used and the number of each type transferred for disposal;

(C) the maximum surface radiation exposure level on any single container of LLRW transferred, the number of disposal containers with surface radiation exposure levels that exceed 200 mR/hour, and the identification of the contents of each such container by volume, class, and activity by radionuclide;

(D) the volume of Class A LLRW that meets the United States Nuclear Regulatory Commission stability requirements, as set forth in section 61.56(b) of Title 10, Code of Federal Regulations;

(E) the identification of each licensed LLRW disposal facility to which LLRW was transferred, either directly or through a broker or agent, and the volume and activity by class of LLRW transferred to each licensed LLRW disposal facility;

(F) the identification of all brokers or agents to which LLRW was transferred, the volume and activity by class of LLRW transferred to each, and the volume and activity by class of the generator's LLRW transferred by each such broker or agent to each licensed LLRW disposal facility;

(G) the weight of source material by type (e.g., natural uranium, depleted uranium, or thorium);

(H) the total number of grams of special nuclear material by radionuclide, and the maximum number of grams of special nuclear material in any single shipment by radionuclide;

(I) as complete a description as practicable of the principal chemical and physical form of the LLRW by volume and radionuclide, including the identification of any known hazardous properties, other than its radioactive property;

(J) for solidified or sorbed liquids, the nature of the liquid, the solidifying or sorbing agent used, and the final volume;

(K) for LLRW containing more than 0.1 percent by weight chelating agents, the identification of the chelating agent, the volume and weight of the LLRW and the weight percentage of chelating agent; and

(L) where LLRW identified in this subparagraph (viii) was treated, either by the generator or its agent or independent contractor, in preparation for transfer to a licensed LLRW disposal facility, to reduce its volume or activity (including reduction by storage for decay) or to change its physical or chemical characteristics (other than by solidification or sorption of liquids as addressed in clause (J)), a description of the treatment process and the generator's best estimate of the effectiveness in terms of the quantitative volume or activity reduction, or in quantitative or other relevant terms for changes in physical or chemical characteristics, as applicable;

(ix) the radionuclides originally contained in any LLRW generated during the reporting period which was held for decay and disposed of as non-radioactive waste;

(x) a description, including the capacity in terms of volume of LLRW, of any facilities or parts thereof which the generator has dedicated to the storage of LLRW for periods in excess of 90 days prior to transfer, either directly or through a broker or agent, to a licensed LLRW disposal facility, and the volume of LLRW stored by the generator in such facilities at the end of the reporting period;

(xi) the volume, volume by class, and activity by radionuclide and class of that LLRW, if any, which the generator is holding at the end of the reporting period because the generator knows or has reason to believe that LLRW will not be accepted for disposal at any of the licensed LLRW disposal facilities, and a description of the LLRW and the reason it is known or believed to be unacceptable for disposal at any of the licensed LLRW disposal facilities; and

(xii) an estimate of the period of time the generator could store its LLRW at its facilities without disruption of its LLRW generating activities, should the generator be unable to transfer LLRW, either directly or through a broker or agent, to a licensed LLRW disposal facility.

(d) In addition to the information required by paragraph (c) of this section, each report shall contain the generator's best estimate in terms of total volume, and volume and activity by class and radionuclide, of LLRW that the generator expects to transfer to licensed LLRW disposal facilities in each of the next five calendar years.

Section 502.4. Registry and Forms. Commencing September 1, 1987, the Director shall maintain and update annually a registry of generators which have submitted reports for the preceding calendar year. Commencing November 1, 1987 and by November 1 of each year thereafter, the Director shall forward a blank reporting form to each generator listed on the most recent registry, at the address indicated on the registry. The foregoing notwithstanding, each generator, including new generators, shall be responsible for obtaining blank reporting forms from the Director.

Section 502.5. Trade Secrets. In the event a generator submitting a report required by section 502.3 makes a request pursuant to section 89(5) of the Public Officers Law that information in the report be excepted from disclosure, the generator shall clearly identify that specific information in the report for which the request is made by labeling that specific information as "trade secret" or "proprietary data." Pending a final determination of the request pursuant to section 89(5) of the Public Officers Law, the Director shall maintain the report or relevant portion thereof in a separate and secure file, and shall deny access to the report or relevant portion thereof to all persons other than employees of the Authority who require access in order to use the report or relevant portion thereof to carry out responsibilities under the Act. Nothing contained in this section shall prohibit the Authority from using or disclosing information which is the subject of the request, without detail which identifies the generator, for the purpose of carrying out its responsibilities under the Act or enabling other State governmental entities to carry out their responsibilities under the Act.

Section 502.6. Materials Incorporated by Reference. (a) The term "low-level radioactive waste" is defined in section 502.2 hereof, in part, by federal descriptions of Class A, B, or C radioactive waste as set forth in sections 61.55 and 61.56 of Title 10, Code of Federal Regulations, as in effect on January 26, 1983 ("federal provisions"). In summary, the federal provisions are as follows. Of the three classes, Class A is the least and Class C the greatest potential hazard to the public and the environment. Classification is determined by concentration of long- and short-lived radionuclides. All three classes must meet minimum waste form and packaging characteristics to facilitate handling and worker protection. Class B and C radioactive wastes must also meet stability requirements intended to minimize water infiltration and leachability of radionuclides from the waste. Disposal of Class C radioactive waste requires measures to protect against inadvertent intrusion.

(b) The federal provisions are set forth in Subpart D, entitled "Technical Requirement for Land Disposal Facilities," of Part 61, entitled "Licensing Requirements for Land Disposal of Radioactive Waste," of the rules of the United States Nuclear Regulatory Commission, published in the first volume of Title 10, entitled "Energy," of the Code of Federal Regulations, containing Parts 0 to 199, revised as of January 1, 1986, on pages 645-647 of such volume. The publisher of the volume is the Office of the Federal Register, National Archives and Records Administration. A copy of the volume may be obtained by writing to the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402. A copy of the volume is available for public inspection and copying at the offices of the Authority, located at Two Rockefeller Plaza, Albany, New York 12223.

NOTE: Since promulgation of these regulations, NYSERDA has moved and the program name has been changed. Inquiries should be addressed to:

Radioactive Waste Policy and Nuclear Coordination
New York State Energy Research and
Development Authority
17 Columbia Circle
Albany, New York 12203-6399

Materials Incorporated by Reference - Excerpts from Title 10, Code of Federal Regulations, Part 61

Section 61.55. Waste Classification

(a) Classification of waste for near surface disposal.

(1) Considerations. Determination of the classification of radioactive waste involves two considerations. First, consideration must be given to the concentration of long-lived radionuclides (and their shorter-lived precursors) whose potential hazard will persist long after such precautions as institutional controls, improved waste form, and deeper disposal have ceased to be effective. These precautions delay the time when long-lived radionuclides could cause exposures. In addition, the magnitude of the potential dose is limited by the concentration and availability of the radionuclide at the time of exposure. Second, consideration must be given to the concentration of shorter-lived radionuclides for which requirements on institutional controls, waste form, and disposal methods are effective.

(2) Classes of waste.

(i) Class A waste is waste that is usually segregated from other waste classes at the disposal site. The physical form and characteristics of Class A waste must meet the minimum requirements set forth in section 61.56(a). If Class A waste also meets the stability requirements set forth in section 61.56(b), it is not necessary to segregate the waste for disposal.

(ii) Class B waste is waste that must meet more rigorous requirements on waste form to ensure stability after disposal. The physical form and characteristics of Class B waste must meet both the minimum and stability requirements set forth in section 61.56.

(iii) Class C waste is waste that not only must meet more rigorous requirements on waste form to ensure stability but also requires additional measures at the disposal facility to protect against inadvertent intrusion. The physical form and characteristics of Class C waste must meet both the minimum and stability requirements set forth in section 61.56.

(iv) Waste that is not generally acceptable for near-surface disposal is waste for which waste form and disposal methods must be different, and in general more stringent, than those specified for Class C waste. In the absence of specific requirements in this part, proposals for disposal of this waste may be submitted to the [Nuclear Regulatory] Commission for approval, pursuant to section 61.58 of this part.

(3) Classification determined by long-lived radionuclides. If radioactive waste contains only radionuclides listed in Table 1, classification shall be determined as follows:

(i) If the concentration does not exceed 0.1 times the value in Table 1, the waste is Class A.

(ii) If the concentration exceeds 0.1 times the value in Table 1 but does not exceed the value in Table 1, the waste is Class C.

(iii) If the concentration exceeds the value in Table 1, the waste is not generally acceptable for near-surface disposal.

(iv) For wastes containing mixtures of radionuclides listed in Table 1, the total concentration shall be determined by the sum of fractions rule described in paragraph (a)(7) of this section.

TABLE 1

Radionuclide	Concentration, curies per cubic meter
C-14	8
C-14 in activated metal	80
Ni-59 in activated metal	220
Nb-94 in activated metal	0.2
Tc-99	3
I-129	0.08
Alpha emitting transuranic nuclides with half-life greater than five years	[1]100
Pu-241	[1]3,500
Cm-242	[1]20,000

[1]Units are nanocuries per gram.

(4) Classification determined by short-lived radionuclides. If radioactive waste does not contain any of the radionuclides listed in Table 1, classification shall be determined based on the concentrations shown in Table 2. However, as specified in paragraph (a)(6) of this section, if radioactive waste does not contain any nuclides listed in either Table 1 or 2, it is Class A.

(i) If the concentration does not exceed the value in Column 1, the waste is Class A.

(ii) If the concentration exceeds the value in Column 1, but does not exceed the value in Column 2, the waste is Class B.

(iii) If the concentration exceeds the value in Column 2, but does not exceed the value in Column 3, the waste is Class C.

(iv) If the concentration exceeds the value in Column 3, the waste is not generally acceptable for near-surface disposal.

(v) For wastes containing mixtures of the nuclides listed in Table 2, the total concentration shall be determined by the sum of fractions rule described in paragraph (a)(7) of this section.

TABLE 2

Radionuclide	Concentration, curies per cubic meter Col. 1	Col. 2	Col. 3
Total of all nuclides with less than 5 year half life	700	([1])	([1])
H-3	40	([1])	([1])
Co-60	700	([1])	([1])
Ni-63	3.5	70	700
Ni-63 in activated metal	35	700	7000
Sr-90	0.04	150	7000
Cs-137	1	44	4600

[1]There are no limits established for these radionuclides in Class B or C wastes. Practical considerations such as the effects of external radiation and internal heat generation on transportation, handling, and disposal will limit the concentrations for these wastes. These wastes shall be Class B unless the concentrations of other nuclides in Table 2 determine the waste to the Class C independent of these nuclides.

(5) Classification determined by both long- and short-lived radionuclides. If radioactive waste contains a mixture of radionuclides, some of which are listed in Table 1, and some of which are listed in Table 2, classification shall be determined as follows:

(i) If the concentration of a nuclide listed in Table 1 does not exceed 0.1 times the value listed in Table 1, the class shall be that determined by the concentration of nuclides listed in Table 2.

(ii) If the concentration of a nuclide listed in Table 1 exceeds 0.1 times the value listed in Table 1 but does not exceed the value in Table 1, the waste shall be Class C, provided the concentration of nuclides listed in Table 2 does not exceed the value shown in Column 3 of Table 2.

(6) Classification of wastes with radionuclides other than those listed in Tables 1 and 2. If radioactive waste does not contain any nuclides listed in either Table 1 or 2, it is Class A.

(7) The sum of the fractions rule for mixtures of radionuclides. For determining classification for waste that contains a mixture of radionuclides, it is necessary to determine the sum of fractions by dividing each nuclide's concentration by the appropriate limit and adding the resulting values. The appropriate limits must all be taken from the same column of the same table. The sum of the fractions for the column must be less than 1.0 if the waste class is to be determined by that column. Example: A waste contains Sr-90 in a concentration of 50 Ci/m^3 and Cs-137 in a concentration of 22 Ci/m^3. Since the concentrations both exceed the values in Column 1, Table 2, they must be compared to Column 2 values. For Sr-90 fraction 50/150 = 0.33; for Cs-137 fraction, 22/44 = 0.5; the sum of the fractions = 0.83. Since the sum is less than 1.0, the waste is Class B.

(8) Determination of concentrations in wastes. The concentration of a radionuclide may be determined by indirect methods such as use of scaling factors which relate the inferred concentration of one radionuclide to

another that is measured, or radionuclide material accountability, if there is reasonable assurance that the indirect methods can be correlated with actual measurements.

The concentration of a radionuclide may be averaged over the volume of the waste, or weight of the waste if the units are expressed as nanocuries per gram.

Section 61.56 Waste characteristics.

(a) The following requirements are minimum requirements for all classes of waste and are intended to facilitate handling at the disposal site and provide protection of health and safety of personnel at the disposal site.

(1) Waste must not be packaged for disposal in cardboard or fiberboard boxes.

(2) Liquid waste must be solidified or packaged in sufficient absorbent material to absorb twice the volume of the liquid.

(3) Solid waste containing liquid shall contain as little free standing and noncorrosive liquid as is reasonably achievable, but in no case shall the liquid exceed 1% of the volume.

(4) Waste must not be readily capable of detonation or of explosive decomposition or reaction at normal pressures and temperatures, or of explosive reaction with water.

(5) Waste must not contain, or be capable of generating, quantities of toxic gases, vapors, or fumes harmful to persons transporting, handling, or disposing of the waste. This does not apply to radioactive gaseous waste packaged in accordance with paragraph (a)(7) of this section.

(6) Waste must not be pyrophoric. Pyrophoric materials contained in waste shall be treated, prepared, and packaged to be nonflammable.

(7) Waste in a gaseous form must be packaged at a pressure that does not exceed 1.5 atmospheres at 20°C. Total activity must not exceed 100 curies per container.

(8) Waste containing hazardous, biological, pathogenic, or infectious material must be treated to reduce to the maximum extent practicable the potential hazard from the non-radiological materials.

(b) The requirements in this section are intended to provide stability of the waste. Stability is intended to ensure that the waste does not structurally degrade and affect overall stability of the site through slumping, collapse, or other failure of the disposal unit and thereby lead to water infiltration. Stability is also a factor in limiting exposure to an inadvertent intruder, since it provides a recognizable and nondispersible waste.

(1) Waste must have structural stability. A structurally stable waste form will generally maintain its physical dimensions and its form, under the expected disposal conditions such as weight of overburden and compaction equipment, the presence of moisture, and microbial activity, and internal factors such as radiation effects and chemical changes. Structural stability can be provided by the waste form itself, processing the waste to a stable form, or placing the waste in a disposal container or structure that provides stability after disposal.

(2) Notwithstanding the provisions in Section 61.56(a) (2) and (3), liquid wastes, or wastes containing liquid, must be converted into a form that contains as little free standing and noncorrosive liquid as is reasonably achievable, but in no case shall the liquid exceed 1% of the volume of the waste when the waste is in a disposal container designed to ensure stability, or 0.5% of the volume of the waste for waste processed to a stable form.

(3) Void spaces within the waste and between the waste and its package must be reduced to the extent practicable.

(Source of Regulatory Authority: Public Authorities Law, Section 1854-d (1)

Section 1854-d. Generator reporting and fees.

(1) Reports.(a) Any person who generates low-level radioactive waste in New York shall submit to the authority, on dates specified by the authority, but in no event later than nine months after the effective date of the low-level radioactive waste management act and, thereafter, no less frequently than annually, reports detailing the classes and quantities of low-level radioactive waste generated, stored by the generator for decay or for later transfer to other facilities, or transferred by the generator to other facilities, the general type of generator (e.g., medical, university, industry, electric utility, government), and such additional information as the authority may reasonably require on the nature and characteristics (including, without limitation, chemical and physical characteristics, properties, or constituents, radionuclides present, curie content or concentration of radioactivity) of such waste and the extent of reduction in quantity and the nature and extent of reduction or other change in the nature or characteristics of such waste as a result of treatment or interim storage after generation and before delivery to facilities for permanent disposal of such waste. The authority shall provide by regulation appropriate procedures for the preparation and submission of such reports, including procedures to designate a person or persons responsible for such filing when more than one person is the generator of the same waste. Such reports shall be subject to the provisions of article six of the public officers law.

(b) Commencing no later than the first day of July nineteen hundred eighty-seven, the authority shall submit annually to the governor, the temporary president of the senate, the speaker of the assembly, the minority leader of the senate, and the minority leader of the assembly, and thereafter, not later than one hundred eighty days after the end of each calendar year, a report summarizing and categorizing, by type of generator and region of generation, the nature, characteristics, and quantities of low-level radioactive waste generated in New York during such calendar year.

DRAFT (2/07)

* For 2006 Calendar Year *

IMPORTANT c PLEASE READ

If your facility generates LLRW that
requires disposal in a licensed LLRW disposal facility
or stores LLRW pending disposal,
you must use this complete
Low-Level Radioactive Waste Report Form.

However, if your facility manages LLRW by
DECAY IN STORAGE ONLY
(i.e., short-lived radionuclides)
you must instead use the
Condensed Form for Decay in Storage Only.

If you have any questions about
which form to complete, contact Alyse Peterson at
NYSERDA c (518) 862-1090, ext. 3274 or
llrwadmin@nyserda.org

Filing Deadline: March 1st - Annually

ABOUT THE REGULATORY AGENCIES

In general, the receipt, possession and use or processing of radioactive material, including low-level radioactive waste (LLRW), requires a radioactive material license from the appropriate New York regulatory agency or the U.S. Nuclear Regulatory Commission. Normally, a single license from a single licensing agency is all that is required for most institutions, corporations, utilities, etc. If an institution or corporation holds multiple licenses under which LLRW was generated, or if people in the organization hold individual licenses under which LLRW was generated, then all of those licenses and the respective licensing agencies must be identified. In that case, append a list of the license numbers and the licensing agencies to the Report Form. The licensing agencies and their respective jurisdictions are:

New York State Department of Health

$ Regulates radioactive material users (e.g., hospitals and universities) in New York State outside of New York City, plus industrial users in New York City.

New York City Department of Health

$ Regulates non-industrial radioactive material users in New York City.

U.S. Nuclear Regulatory Commission

$ Regulates federal radioactive material users (e.g., Veterans Administration hospitals) and major nuclear facilities (e.g., nuclear power plants) in New York State.

GUIDELINES TO THE GENERATOR REPORT FORM

Waste Management Method	Description	Sections to Complete
Storage for Decay C On Site	LLRW containing radionuclides with half-lives up to 90 days stored on site for decay and eventual disposal as non-radioactive waste.	Sections I, II-A, II-G, IV, V **NOTE: If managing LLRW by Storage for Decay only, use the condensed form**
Storage for Decay C Off Site	Same as above. The LLRW being reported has been transferred to an off-site facility.	Sections I, II-A, II-D, II-G, IV, V **See note directly above.**
Interim Storage C On or Off Site	LLRW containing radionuclides with half-lives greater than 90 days being held in long-term storage pending disposal. **THIS DOES NOT REFER TO ROUTINE ACCUMULATION OF LLRW FOR SUBSEQUENT TRANSFER TO A LICENSED DISPOSAL FACILITY.**	Sections I, II-A through C, II-F through I, III, IV, V, VI
Interim Storage C On or Off Site after Processing	Same as above.	All
Ship for Disposal C Direct	LLRW received by a licensed disposal facility via direct transfer from generator.	Sections I, II-A through C, II-F through I, III, IV, V, VI
Ship for Disposal via Broker/Processor	Some LLRW may undergo additional treatment prior to disposal. Please consider this when reporting LLRW volume in Section II-E. If you use a broker to transport your LLRW, he/she can supply this information.	All

RETURN ANNUALLY BY MARCH 1st TO:

NEW YORK STATE ENERGY RESEARCH AND DEVELOPMENT AUTHORITY
Radioactive Waste Policy and Nuclear Coordination Program
17 Columbia Circle
Albany, NY 12203-6399
llrwadmin@NYSERDA.ORG

CODE (official use only)
| | | | | | |

NOTE: Please refer to the **Instructions** before completing this form.

FOR THE PERIOD: JANUARY 1st THROUGH DECEMBER 31st

LOW-LEVEL RADIOACTIVE WASTE
REPORT FORM

PLEASE TYPE OR PRINT LEGIBLY

SECTION I. GENERATOR INFORMATION

A **Updated Generator Information**			
ENTER 4-DIGIT GENERATOR ID (can be found on the mailing label on annual postcard): 0960		ENTER REPORTING YEAR: 2006	
Licensing Agency/ies	**License No(s).**		
New York State Department of Health			
New York City Department of Health			
U.S. Nuclear Regulatory Commission			
Your Facility Phone No.: (516) 334 1300	Ext:	Email Address: greg.wuest@sulzer.com	
Contact: Greg Wuest		Title: Director, QESH	
Facility Name: Sulzer Metco (US) Inc.			
Street Address: 1101 Prospect Avenue			
City: Westbury	County: Nassau	State: NY	Zip Code: 11590
B Name and principal office of facility where LLRW is generated **if** different from A (above)			
Street Address:			
City:	County:	State:	Zip Code:
C Preparer's Name: Greg Wuest	Title: Director, QESH	Telephone and Extension: (516) 338 2217	

D	Identify, by issuing authority and number, permits that authorize transfer of your LLRW to a licensed LLRW disposal facility:		
	Issuing Authority	**Disposal Site Location**	**Disposal Site Use Permit Number**
	N/A	N/A	N/A
	N/A	N/A	N/A

E	**FACILITY TYPE CODE** Type in the appropriate letter and number for the appropriate code **OR** choose one from **EACH DROP-DOWN MENU** BELOW. Refer to the instructions to determine the facility type code that best describes your facility. **Choose only one code consisting of a letter and number.**
	Choose a Letter: H. (Manufacturing) **Choose a Number:** 7 (Analysis) or _____

F	Briefly describe the activities, processes, or uses of radioactive material that result in LLRW generation at your facility.

Machining of thoriated (1-2%) tungsten (98-99%) electrodes.

This Report Form has been submitted by the preparer listed in item I(C) above. In submitting this form, preparer hereby certifies that the information set forth is true to the best of the preparer's knowledge.	DATE: 3/1/07

SECTION II. INFORMATION ON LLRW

A. LLRW AS GENERATED				
	Waste Description Code	Waste Management Method	Chemical Form Code	Other Hazard Code
	1	2	3	4
1	59	W5	C3	H8
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				

CODES for SECTION II of the LOW-LEVEL RADIOACTIVE WASTE REPORT FORM

Note: If you respond "other" to any item, please provide an explanation on the Attachment Sheet provided in Section VII.

A. LLRW AS GENERATED

1 WASTE DESCRIPTION CODE

Choose the category that best describes the waste.

- 20 Charcoal
- 21 Incinerator Ash
- 22 Soil
- 23 Gas
- 24 Oil
- 25 Aqueous Liquid
- 26 Filter Media
- 27 Mechanical Filter
- 29 Demolition Rubble
- 30 Cation Ion-exchange Media
- 31 Anion Ion-exchange Media
- 32 Mixed Bed Ion-exchange Media
- 33 Contaminated Equipment
- 34 Organic Liquid (except oil)
- 35 Glassware or Labware
- 36 Sealed Source/Device
- 37 Paint or Plating
- 38 Evaporator Bottoms/ Sludges/Concentrates
- 39 Dry or Compactible Trash (paper, plastic, glass, etc.)
- 40 Noncompactible Trash (metal components, etc.)
- 41 Animal Carcass
- 42 Biological Material (except animal carcass)
- 43 Activated Material
- 44 Material that will be Incinerated
- 59 Other (describe)

2 WASTE MANAGEMENT METHOD

Transfer to Authorized Recipient

- W1 Transfer to Disposal Site via Broker
- W2 Transfer to Disposal Site Directly
- W3 Transfer - Other (describe)

Interim Storage

- W4 Placed in Storage before current reporting year
- W5 Placed in Storage during current reporting year
- W6 Shipped for Treatment prior to Storage

Storage for Decay

- W7 Storage for Decay (Only limited information required. See instructions.)

3 CHEMICAL FORM CODE

- C1 Paper and Plastic
- C2 Glass
- C3 Metals
- C4 Metal Oxides
- C5 Inorganic Salts
- C6 Organic Salts
- C7 Nucleic Acids
- C8 Amino Acids, Proteins, Enzymes
- C9 Carbohydrates, Sugars
- C10 Lipids, Fatty Acids
- C11 Other (describe)

4 OTHER HAZARD CODE

- H1 Ignitable
- H2 Corrosive
- H3 Toxic
- H4 Reactive
- H5 Pathogenic
- H6 Carcinogenic
- H7 Other (describe)
- H8 None

B. ON-SITE WASTE TREATMENT

	Treatment Code	Sorption or Solidification Code	Effect of Treatment	Post-Treatment Volume (m^3)
	5	6	7	8
1	T21	N/A	N/A	N/A
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				

B. ON-SITE WASTE TREATMENT

5 TREATMENT CODE

T1 Compaction
T2 Supercompaction
T3 Evaporation/ Crystallization
T4 Fluid Bed Drying/ Calcination
T5 Wet Oxidation
T6 Membrane Separation (ultrafiltration, reverse osmosis)
T7 Incineration
T8 Solidification
T9 Adsorption
T10 Sorting/Segregation
T11 Macroencapsulation
T12 Absorption
T13 Decontamination
T14 Surface Removal (scabbing, abrasive cleaning)
T15 Dry Chemical Packing (lime)
T16 Size Reduction (sectioning, shredding, cutting)
T17 Steam Reform
T18 Catalytic Extraction Process
T19 Dewatered
T20 Other (describe)
T21 None

6 SOLIDIFICATION OR SORPTION CODE

Sorption
60 Speedi Dri
61 Celetom
62 Floor Dry/Superfine
63 Hi Dri
64 Safe T Sorb
65 Safe N Dri
66 Florco
67 Florco X
68 Solid A Sorb
69 Chemsil 30
70 Chemsil 50
72 Dicaperl HP200
73 Dicaperl HP500
74 Petroset
75 Petroset II
76 Aquaset
77 Aquaset II
89 Other (describe)

Solidification
90 Cement
91 Concrete (encapsulation)
92 Bitumen
93 Vinyl Chloride
94 Vinyl Ester Styrene
99 Other (describe)
100 None Required

7 EFFECT OF TREATMENT

Impact of treatment on volume may be shown in percent or ratio. Note increase or decrease by 8 or 9, and describe change in chemical and physical form.

8 POST-TREATMENT VOLUME

Volume must be noted in cubic meters (m^3).

SECTION II. INFORMATION ON LLRW (cont.)

C. ON-SITE CONTAINER INFORMATION					D. BROKER/PROCESSOR INFORMATION		
	Container Description Code	Container Volume (m^3)	Maximum Surface Radiation Level (mSv/hr)	Number of Containers	Broker Code	Processor Code	Treatment Code
	9	10	11	12	13	14	15
1	3	.019	.001	25	BC10	N/A	N/A
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							

C. ON-SITE CONTAINER INFORMATION

9 CONTAINER DESCRIPTION CODE
- 1 Wooden Box or Crate
- 2 Metal Box
- 3 Plastic Drum or Pail
- 4 Metal Drum or Pail
- 5 Metal Tank or Liner
- 6 Concrete Tank or Liner
- 7 Polyethylene Tank or Liner
- 8 Fiberglass Tank or Liner
- 9 Demineralizer
- 10 Gas Cylinder
- 11 Bulk, Unpackaged Waste
- 12 Unpackaged Components
- 13 High-Integrity Container
- 14 Fiberboard Drum
- 19 Other (describe)

10 CONTAINER VOLUME
Volume must be noted in cubic meters (m^3).

11 MAXIMUM SURFACE RADIATION LEVEL
Surface radiation must be noted in mSv/hr.

12 NUMBER OF CONTAINERS
This information is required for each waste form.

D. BROKER/PROCESSOR INFORMATION

13 BROKER CODE
- BC1 NDL
- BC2 Radiac
- BC3 Adco
- BC4 Teledyne
- BC5 US Ecology
- BC6 Chem-Nuclear
- BC7 SEG
- BC8 Bionomics
- BC9 Direct transfer
- BC10 Other (describe)
- BC11 None

14 PROCESSOR CODE
- P1 GTS Duratek
- P2 NSSI
- P3 DSSI
- P4 Chem Nuclear, IL
- P5 Alaron
- P6 Quadrex, TN
- P7 Permafix, FL
- P8 ATG, TN
- P9 ATG, WA
- P10 Other (describe)

15 TREATMENT CODE
See codes B-5.

SECTION II. INFORMATION ON LLRW (cont.)

E. POST-PROCESSOR TREATMENT INFORMATION		F. OTHER CHARACTERISTICS				
		Source Material		SNM		
Effect of Treatment	Total Post-Treatment Volume (m^3)	Source Material Code	Weight of Source Material (grams)	SNM Code	Total SNM (grams)	Maximum grams SNM in any shipment (grams)
16	17	18	19	20	21	22
1 N/A	N/A	NT	774	N/A	N/A	N/A
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						

E. POST-PROCESSOR TREATMENT INFORMATION

16 EFFECT OF TREATMENT
See instructions for B-7.

17 TOTAL POST-TREATMENT VOLUME
Volume must be noted in cubic meters (m^3).

F. OTHER CHARACTERISTICS

18 SOURCE MATERIAL CODE
Source Material C Enter one code per line. Use a separate line for each type of source material transferred.

NU Natural Uranium
DU Depleted Uranium
UO Uranium Ores
NT Natural Thorium
TO Thorium Ores

19 WEIGHT OF SOURCE MATERIAL
Weight must be noted in grams (g).

20 SNM CODE
Special Nuclear Material means one of the following:

SNM1 Plutonium
SNM2 Uranium-233

SNM3 Uranium enriched in the isotope 233 or in the isotope 235
SNM4 Any material artificially enriched by any of the foregoing

21 TOTAL SNM
Weight must be noted in grams(g).

22 MAXIMUM GRAMS SNM IN ANY SHIPMENT
Self-explanatory.

SECTION II. INFORMATION ON LLRW (cont.)

F. OTHER CHARACTERISTICS (cont.)					G. DISPOSAL AND STORAGE INFORMATION			
Waste With Chelating Agents								
Chelate Code		Volume and Weight of LLRW		Weight % Chelates	LLRW Class	Disposition Code	Disposal Site Code	Storage Site Code
		Volume (m^3)	Weight (kg)					
23		24	25	26	27	28	29	30
1	N/A	N/A	N/A	N/A	AU	D5	N/A	S1
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								

23 CHELATE CODE
- CA1 EDTA
- CA2 DTPA
- CA3 Carbolic Acid
- CA4 Hydroxy-carbolic Acids
- CA5 Citric Acid
- CA6 Glucinic Acid
- CA7 Other (describe)

24 VOLUME OF LLRW
Volume of LLRW containing chelating agents (m^3).

25 WEIGHT OF LLRW
Weight of LLRW containing chelating agents (kg).

26 WEIGHT % CHELATES
Weights less than 1% need not be reported.

G. DISPOSAL AND STORAGE

27 LLRW CLASS
Class of radioactive waste as described in sections 61.55 and 61.56 of Title 10, Code of Federal Regulations, as in effect on January 26, 1983, attached following instructions.
- AS Class A stable
- AU Class A unstable
- B Class B
- C Class C

28 DISPOSITION CODE
- D1 Directly to disposal
- D2 Treatment prior to disposal
- D3 Treatment/returned for storage
- D4 Treatment/no disposal (decontamination and reuse)
- D5 Storage/no treatment
- D6 Hold for decay on site and dispose as non-radioactive
- D7 Hold for decay off site and dispose as non-radioactive
- D8 Treatment/off-site storage
- D9 Other (describe)

29 DISPOSAL SITE
- DS1 Barnwell, SC
- DS2 Clive, UT
- DS3 Richland, WA
- DS4 Other (describe)

30 STORAGE SITE
- S1 On site
- S2 Radiac
- S3 NDL
- S4 Adco
- S5 Other (describe)

H. LLRW NOT MEETING DISPOSAL FACILITY ACCEPTANCE CRITERIA				
LLRW Class	Hazard Code	Volume (m^3)	Activity (MBq)	Radionuclides
31	32	33	34	35
N/A	N/A	N/A	N/A	N/A

H. **LLRW WITH UNACCEPTABLE DISPOSAL CRITERIA**

31 **LLRW CLASS**
See codes G-27.

32 **HAZARD CODE**
See codes B-4.

33 **VOLUME**
Volume must be noted in cubic meters (m^3).

34 **ACTIVITY**
Activity must be reported in MegaBecquerels (MBq).

35 **RADIONUCLIDES**
As applicable to H-3.

I. CONTAINERS WITH SURFACE RADIATION LEVELS GREATER THAN 2mSv/hr (200mR/hr)			
LLRW Class		Volume (m^3)	Activity by Radionuclide (MBq)
36		37	38
N/A	N/A	N/A	N/A

SECTION III. LLRW SUMMARY (In order for information to total correctly, press the TAB key to navigate between cells)

A. DISPOSAL TOTALS FOR THIS YEAR								
Classes	**Disposed at: Barnwell, SC**		**Disposed at: Clive, UT**		**Disposed at: Richland, WA**		**SUBTOTALS BY CLASS**	
Class A	**Volume (m^3)**	**Activity (MBq)**	**Volume (m^3)**	**Activity (MBq)**	**Volume (m^3)**	**Activity (MBq)**	**Volume –A**	**Activity –A**
Via Broker/ Processor	0.000	0.000	0.000	0.000	0.000	0.000	00000.00000	00000.00000
Direct Transfer							00000.00000	00000.00000
Class B							**Volume –B**	**Activity –B**
Via Broker/ Processor							00000.00000	00000.00000
Direct Transfer							00000.00000	00000.00000
Class C							**Volume –C**	**Activity –C**
Via Broker/ Processor							00000.00000	00000.00000
Direct Transfer							00000.00000	00000.00000
TOTALS	00000.00000	00000.00000	00000.00000	00000.00000	00000.00000	00000.00000		
					TOTAL ALL CLASSES		**VOLUME**	**ACTIVITY**
							00000.00000	00000.00000

(In order for information to total correctly, press the TAB key to navigate between cells)

B. INTERIM STORAGE TOTALS

Classes	Placed in Interim Storage during this year		Placed in Interim Storage before this year		SUBTOTALS BY CLASS	
Class A	**Volume (m³)**	**Activity (MBq)**	**Volume (m³)**	**Activity (MBq)**	**Volume - A**	**Activity - A**
On Site	0.475	138.750	0.000	0.000	0.475 ~~00000.00000~~	138.750 ~~00000.00000~~
Off Site					00000.00000	00000.00000
Class B					**Volume - B**	**Activity - B**
On Site					00000.00000	00000.00000
Off Site					00000.00000	00000.00000
Class C					**Volume - C**	**Activity - C**
On Site					00000.00000	00000.00000
Off Site					00000.00000	00000.00000
TOTALS	00000.00000	00000.00000	00000.00000	00000.00000		
			TOTAL ALL CLASSES		0.475 ~~00000.00000~~	138.750 ~~00000.00000~~

SECTION IV. RADIONUCLIDE INFORMATION FOR WASTE DISPOSED, HELD FOR DECAY, AND STORED

NOTE: Radionuclides mean each individual radionuclide if known, or, at a minimum, all radionuclides that have been or would have to be identified on disposal site manifests. H-3, C-14, Tc-99, and I-129 **must be identified** where present.

A.1	List the radionuclides contained in the **LLRW disposed of** during this year (see response to Section III-A). **Use additional sheets** as necessary. (In order for information to total correctly, press the TAB key to navigate between cells)				
Radionuclide	**Activity (MBq)**	**Radionuclide**	**Activity (MBq)**	**Radionuclide**	**Activity (MBq)**
N/A	N/A				
					Total Activity in MBq 00000.00000

Total activity for all radionuclides listed above:
Total activity should equal total for LLRW **disposed** of, as reported in Section III-A.

A.2	If any of the radionuclides listed in Table A-1 have half-lives of less than 90 days, please explain why these are not being held for decay and eventual disposal as non-radioactive waste.
N/A	

B.1	List the radionuclides contained in the LLRW **being held in storage for decay on site** as of December 31. **Use additional sheets as necessary.**				
Radionuclide	**Radionuclide**	**Radionuclide**	**Radionuclide**	**Radionuclide**	**Radionuclide**
N/A					

B.2	List the radionuclides contained in the LLRW **being held in storage for decay off site** as of December 31. **Use additional sheets as necessary.**				
Radionuclide	**Radionuclide**	**Radionuclide**	**Radionuclide**	**Radionuclide**	**Radionuclide**
N/A					

C.1	**On site** B List radionuclides contained in LLRW in **interim storage on site** as of December 31. **Use additional sheets as necessary.** (In order for information to total correctly, press the TAB key to navigate between cells)				
Radionuclide	**Activity (MBq)**	**Radionuclide**	**Activity (MBq)**	**Radionuclide**	**Activity (MBq)**
Natural Thorium	138.750				
					Total Activity in MBq ~~00000.00000~~ 138.750

Total activity for all radionuclides listed above:
Total activity should equal total for LLRW **stored on site**, as reported.

C.2	**Off site B** List radionuclides contained in LLRW in **interim storage off site** as of December 31. **Use additional sheets as necessary.** (In order for information to total correctly, press the TAB key to navigate between cells)

Radionuclide	Activity (MBq)	Radionuclide	Activity (MBq)	Radionuclide	Activity (MBq)
N/A					
					Total Activity in MBq 00000.00000

Total activity for all radionuclides listed above:
Total activity should equal total for LLRW being **stored off site**, as reported.

C.3	If any of the radionuclides listed in Table C-1 or C-2 have half-lives of less than 90 days, please explain why these are not being held for decay and eventual disposal as non-radioactive waste.
N/A	

SECTION V. STORAGE FACILITY INFORMATION

NOTE: If your facility manages LLRW by storage for decay only, you only need to complete the Condensed Form for Decay in Storage Only.

ON-SITE STORAGE FACILITIES		
A.1	Briefly describe your on-site LLRW storage facilities. Include facilities you have for storage of special LLRW forms such as freezers, shielded areas for high-radiation-level wastes, or bermed storage areas for liquid wastes, and estimate the storage capacity for each.	
	Isolated room for storage.	
A.2	Total Storage Capacity: 5 m^3	
A.3	Estimated maximum volume of LLRW held in storage for decay at any one time: 0.5 m^3	
B	Do you have any plans for increasing your on-site storage capacity?	☒ No. Skip to C. ☐ Yes. Complete this section.
Describe such plans and indicate your expected new storage capacity.		

OFF-SITE STORAGE FACILITIES	
C	Off-site storage facility information. Use additional pages if necessary.
Please indicate if off-site storage is for storage for decay or interim storage.	☐ Storage for decay ☐ Interim storage
Name of facility:	
Address:	
Contact and phone number:	

NOTE: Please answer the following question based on LLRW requiring disposal at licensed LLRW disposal facilities, *not* LLRW held in storage for decay. DO NOT USE DESCRIPTIVE TERMS SUCH AS UNLIMITED, CONTINUOUS, OR INDEFINITE.

ESTIMATED STORAGE TIME FOR LLRW REQUIRING DISPOSAL		
D	Based on your anticipated LLRW generation rate and your anticipated capacity to store waste as of December 31, HOW MANY MONTHS could you continue to produce and store LLRW on site if access to licensed LLRW disposal facilities were no longer available?	**NOTE: Answer *must* be in months.** 12 months

SECTION VI. FUTURE LLRW GENERATION

0 FUTURE LLRW GENERATION THAT WILL REQUIRE DISPOSAL
(In order for information to total correctly, press the TAB key to navigate between cells)

Year	Class	Activity (MBq)	Volume (m^3)		Radionuclides
1	A	~~130~~ 150.000 ~~23.000~~	0.57 ~~0.114~~		NT
2007	B				
	C				
	Total	150.000 ~~23.000~~ ~~0.000~~	0.57 ~~0.114~~ ~~0.000~~		
2	A	23.000	0.114	Same	NT
2008	B				
	C				
	Total	23.000 ~~0.000~~	0.114 ~~0.000~~		
3	A	23.000	0.114		NT
2009	B				
	C				
	Total	23.000 ~~0.000~~	0.114 ~~0.000~~		
4	A	23.000	0.114		NT
2010	B				
	C				
	Total	23.000 ~~0.000~~	0.114 ~~0.000~~		
5	A	23.000	0.114		NT
2011	B				
	C				
	Total	23.000 ~~0.000~~	0.114 ~~0.000~~		

SECTION VII. ATTACHMENT SHEET
FOR ANY ADDITIONAL INFORMATION

Section I, Box E – Manufacturing operation that generates this material as a by-product.

Section II, Line 1 refers to material generated and held in on-site storage as of 12/31/06. This material will be shipped off site for treatment and disposal.

Section II A, Box 1.1 – Turnings from machining operations.

Section IV, Box D – Ecology Services Inc. Columbia MD

DiPietrantonio, Peter

From: llrwadmin@nyserda.org
Sent: Tuesday, March 13, 2007 7:44 AM
To: DiPietrantonio, Peter
Subject: Re: 2006 LLRW Annual Report

This confirms receipt of your 2006 LLRW Report Form submission. Your report is currently under review. If we have any questions, we will contact you.

Sincerely,
Alyse Peterson
Senior Project Manager

"DiPietrantonio, Peter"
<Peter.DiPietrantonio@sulzer.com>

03/01/2007 06:09 PM

To <llrwadmin@nyserda.org>

cc "Wuest, Gregory" <Gregory.Wuest@sulzer.com>

Subject 2006 LLRW Annual Report

Attn: Alyse Peterson

Attached please find the Low Level Radioactive Waste Report for calendar year 2006 for Sulzer Metco (US) Inc. We will also send a hard copy by mail. Please do not hesitate to contact us should you have any questions or comments.

Sincerely,

Richard A. Marx
(on behalf of Greg Wuest, Director, QESH)

Sulzer Metco (US) Inc.

CONFIDENTIALITY NOTICE
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2/26/07 Sulzer Metco

T.C. w/ Brett Daniels (Ecology Services)
Paul Marshall will be at the meeting on Thursday

2/28/07 T.C. w/ Brett Daniels - meeting confirmed for 3/1/07 at Sulzer Metco for 10:00 AM (earlier if possible)

* Brett also indicated that the LLRW Reports should be pretty straight-forward - he already pulled together the manifests etc... and it will not be difficult to complete the reports and get them submitted.

3/1/07

Mtg. w/ Ecology Services (Brett Daniels, Paul Marshall)
Greg Wuest, Rick Maux

Shipment issue – total amount of source material (uranium and thorium)

* 27 pCi/gram (or less of natural uranium – exempt from DOT requirements

*if greater than 27 pCi/gram then DOT shipping requirements kick in

Disposal cost – controlling costs

- Drums need to be full!
- ? super sacks/gaylord boxes?
- stockpile so shipments are more economical 50-60 containers vs. 15±

---

* Why didn't we report the zirconium oxide waste stream?

thorium is a Class A waste and the zirconium is not -- the zirconium is NORM

Low-Level Radioactive Waste Annual Report Forms Frequently Asked Questions

Q: Can I submit my form electronically?
A: Yes, We have two electronic submission options; Email and Online Submission.

Email Submission is available for both the Long Form and the Short Form using Microsoft Word. The Microsoft \ of both the Long Form and the Short Form can be downloaded, filled in, saved and submitted via email to LLRWADMIN@nyserda.org.

Online Submission is new this year and is available only for Short Form filers. Online submission for the Long F under construction, with completion expected in January 2008. For instructions on how to submit your Short For click here.

If you do not have Microsoft Word, and do not wish to submit your Short Form online, you can still access the .p the forms online, but will have to file paper copies. Unfortunately, the .pdf versions cannot be saved or emailed.

If you do not have internet access, you may obtain a paper copy of the forms by contacting Alyse Peterson at LLRWADMIN@nyserda.org or (518) 862-1090 ext. 3274.

Q: I used the Microsoft Word version of the report form last year and I still have the electronic file. May I last year's form, or do I have to download a new form this year?
A: Yes, you may simply revise last year's form. Please be sure to enter the new reporting year on the first page Doing so should automatically change the years listed in the "Future Generation" section at the end of the form

Q: I can't open and/or print the forms, can you mail me paper copies?
A: Of course. Please contact Alyse Peterson at LLRWADMIN@nyserda.org or (518) 862-1090 ext. 3274.

Q: I am not filing electronically and have my form ready to submit. Should I fax it?
A: No, faxes often come through garbled. Please send your form via regular mail.

Q: I manage my waste by Decay in Storage only (e.g., store the waste until it is no longer radioactive an dispose as non-radioactive waste). Do I have to fill out the Long Form?
A: No, please use the Short Form for Decay in Storage Only.

Q: I am using the Long Form, but I do have some waste that I manage by Decay in Storage. Do I need to every question on the form for this waste?
A: No. Only limited information is required for waste managed by Decay in Storage (waste management code W waste, please respond only to the following section items:
- Section I;
- Section II, items A1, A2 and G30;
- Section IV, items B1 and B2; and
- Section V, items A.3 and C.

Q: I shipped out waste for disposal during the reporting year, but it did not arrive at the disposal facility December 31st. Do I report the waste as disposed during the reporting year?
A: No. Waste should be reported as disposed in the year that it arrives at the disposal facility, not the year that i shipped.

Q: My waste undergoes treatment and/or processing off-site prior to arriving at the final disposal facility the Section III disposal information I submit represent the waste as it left my facility or its condition as it the disposal facility?
A: Please submit information that is representative of the waste as it arrived at the disposal facility. Your broker should be able to provide the information.

Q: I'm not sure what information to enter into the form.
A: Please just do the best you can to be accurate and complete. Attach explanations if you feel it is necessary. I the services of a LLRW broker or processor, that firm should be able to assist you in compiling the data.

Q: I use sealed sources that I return to the manufacturer or distributor. Do I need to report these as wast
A: No. The manufacturer or distributor is responsible for determining whether these sources are actually waste (recycled.

Q: I dispose of my waste by diluting it and pouring it down the drain. Do I need to report this waste to N
A: No. That is considered an environmental discharge and should not be included on the report forms you subm NYSERDA. Please check with your state and local regulatory agencies (e.g., New York State Department of En Conservation, New York State Department of Health, New York City Department of Health, etc.) to determine ar reporting requirements relating to discharge of this material.

Q: I generate organic liquid scintillation fluids with trace quantities of radioactivity that are recycled for t content. Do I need to report these as waste?
A: No. Material that is recycled or beneficially used is not considered waste and does not need to be reported to If you are unsure whether your organic liquid scintillation fluids are eligible for recycling, please contact your radi materials licensing agency.

LLRW Annual Report Instructions (2/28/07)

ABOUT THE REGULATORY AGENCIES

In general, the receipt, possession and use or processing of radioactive material, including low-level radioactive waste (LLRW), requires a radioactive material license from the appropriate New York regulatory agency or the U.S. Nuclear Regulatory Commission. Normally, a single license from a single licensing agency is all that is required for most institutions, corporations, utilities, etc. If an institution or corporation holds multiple licenses under which LLRW was generated, or if people in the organization hold individual licenses under which LLRW was generated, then all of those licenses and the respective licensing agencies must be identified. In that case, append a list of the license numbers and the licensing agencies to the Report Form. The licensing agencies and their respective jurisdictions are:

New York State Department of Health

- Regulates radioactive material users (e.g., hospitals and universities) in New York State outside of New York City, plus industrial users in New York City.

New York City Department of Health

- Regulates non-industrial radioactive material users in New York City.

U.S. Nuclear Regulatory Commission

- Regulates federal radioactive material users (e.g., Veterans Administration hospitals) and major nuclear facilities (e.g., nuclear power plants) in New York State.

GUIDELINES TO THE GENERATOR REPORT FORM

Waste Management Method	Description	Sections to Complete
Storage for Decay — On Site	LLRW containing radionuclides with half-lives up to 90 days stored on site for decay and eventual disposal as non-radioactive waste.	Sections I, II-A, II-G, IV, V **NOTE: If managing LLRW by Storage for Decay only, use the condensed form**
Storage for Decay — Off Site	Same as above. The LLRW being reported has been transferred to an off-site facility.	Sections I, II-A, II-D, II-G, IV, V **See note directly above.**
Interim Storage — On or Off Site	LLRW containing radionuclides with half-lives greater than 90 days being held in long-term storage pending disposal. **THIS DOES NOT REFER TO ROUTINE ACCUMULATION OF LLRW FOR SUBSEQUENT TRANSFER TO A LICENSED DISPOSAL FACILITY.**	Sections I, II-A through C, II-F through I, III, IV, V, VI
Interim Storage — On or Off Site after Processing	Same as above.	All
Ship for Disposal — Direct	LLRW received by a licensed disposal facility via direct transfer from generator.	Sections I, II-A through C, II-F through I, III, IV, V, VI
Ship for Disposal via Broker/Processor	Some LLRW may undergo additional treatment prior to disposal. Please consider this when reporting LLRW volume in Section II-E. If you use a broker to transport your LLRW, he/she can supply this information.	All

ANNUAL LOW-LEVEL RADIOACTIVE WASTE REPORT FORM

NEW YORK STATE ENERGY RESEARCH AND DEVELOPMENT AUTHORITY
Radioactive Waste Policy and Nuclear Coordination Program

INSTRUCTIONS
(Filing Deadline - March 1st Annually)

GENERAL INSTRUCTIONS

1. Please read these Instructions and the Reporting Regulations before completing the Report Form.

2. Pursuant to Public Authorities Law, Section 1854-d(1) (attached), as enacted by Ch. 673 L. 1986, any person who generates low-level radioactive waste (LLRW) in New York State is required to submit a report on such waste to NYSERDA annually.

3. Regulations governing the reporting of low-level radioactive waste have been promulgated as Part 502 of Chapter XI of Title 21 NYCRR, referred to herein as the "Reporting Regulations" (attached). You should note especially Sections 502.2 through 502.4 of the Reporting Regulations in preparing the Report Form. Terms defined in the Reporting Regulations (e.g., "LLRW," "generator") have the same meaning in the Report Form and these instructions. In the case of any perceived inconsistencies in information required by the Reporting Form and by the Reporting Regulations, the Regulations take precedence.

4. All quantitative data entered on the Report Form must be the total for the entire calendar year being reported, unless otherwise specified.

5. The Report Form is designed to allow you to skip over any questions that don't apply to you. Therefore, you should follow its numerical order from beginning to end. Please complete all applicable items.

6. For LLRW managed by storage for decay, only limited information is required in Sections II, IV and V.

7. Please be sure to mark all "☐ NO ☐ YES" choices clearly with an X (e.g., "☒YES")

8. The Report Form for each calendar year must be completed and submitted no later than March 1st of the following year.

9. Only one report should be submitted for each facility. However, please note that pursuant to Section 502.3(a) of the Reporting Regulations, any generator who generates LLRW at facilities in New York State located more than 25 miles apart is required to submit a separate Report Form for each such facility. If a generator generates LLRW at facilities in the State located 25 miles or less apart for which separate disposal-site use permits or similar authorizations are held, the generator must submit a separate Report Form for each such facility.

10. If any response exceeds the space available for it in the Report Form, please type or print the response on the "Attachment Sheet" at the end of the Report Form. Write "See attachment" on the Report Form near the question, and note the question number on the attachment. Explanatory notes on attachments are welcome.

11. The Report Form or any of its pages may be reproduced.

12. Please retain these Instructions and a copy of your completed Report Form, attachments and worksheets in the office of the contact person identified in Section I A.

13. If you require assistance, please contact Alyse Peterson at (518) 862-1090, ext. 3274; e-mail llrwadmin@nyserda.org.

14. Please return the completed Report Form and attachments to:
    Alyse Peterson, Project Manager
    Radioactive Waste Policy and Nuclear Coordination
    New York State Energy Research and Development Authority
    17 Columbia Circle
    Albany, NY 12203-6399
    llrwadmin@nyserda.org

SPECIFIC INSTRUCTIONS

The Report Form is largely self-explanatory, but for some questions and terms, explanations may be helpful. Wherever possible, coded lists of answers have been established to simplify responses. Note: whenever the answer "Other" is used, it must be accompanied by an explanation. The explanation may be entered in Section VII of the Report Form.

These specific instructions are numbered to correspond to the Report Form questions. Please read the specific instruction for each question before responding. Where no instruction is considered necessary, the statement "self-explanatory" is used.

SECTION I. Generator Information

A Please enter your 4-digit generator ID, which can be found on the mailing label of your annual postcard. If you are a new generator, please contact NYSERDA and you will be assigned an ID.

Please enter the reporting year.

The "Contact Person" is the person you prefer we contact with any questions regarding your completed Report Form.

B Self-explanatory.

C Self-explanatory.

D Please review Section 502.3(c)(vii) of the Reporting Regulations for a description of authorization. An example is the State of South Carolina's permit for use of the Barnwell licensed LLRW disposal facility.

E Use the following "Facility Type Codes" table to determine the letter and number codes that describe your facility. Choose one letter from the left column and one number from the right column within the selected category.

Examples:

- Gauge manufacturer: H 2
- City-owned hospital: C 2
- Private medical research facility: D 5

Facility Type Codes			
ELECTRIC UTILITY			
A	Nuclear Power Plant	1	Boiling Water Reactor
B	Other*	2	Pressurized Water Reactor
		3	Other*
MEDICAL			
C	Governmental	1	Medical School
D	Private	2	Hospital
E	College or University	3	Office
F	Other*	4	Laboratory, non-research
		5	Research
		6	Nuclear Pharmacy
		7	Other*
INDUSTRIAL			
G	Research and Development	1	Radiopharmaceuticals
H	Manufacturing	2	Devices and Gauges
I	Other*	3	Non-destructive Testing
		4	Nuclear Laundry
		5	Waste Broker/Processor
		6	Radiotracers
		7	Analysis
		8	Other*
ACADEMIC (NON-MEDICAL)			
J	College or University	1	Research, non-medical
K	Other*	2	Education and Training
		3	Other*
GOVERNMENTAL (NON-MEDICAL)			
L	New York State	1	Research
M	Other*	2	Laboratory, non-research
		3	Other*

*If you used any of the codes for "Other," an explanation must be provided in Section VII "Attachment Sheet".

F Self-explanatory.

SECTION II. Information on LLRW

This section of the report is a tabular or spreadsheet format, and is largely self-explanatory. Each entry is followed across the entire spreadsheet of SECTION II. General guidelines follow:

- Categorize the waste. A waste category is defined by several fundamental features such as (see waste codes):
  - — same waste type;
  - — similar isotopic content;
  - — same disposal class; or
  - — presence of chelating agents.
- Determine the management method for each waste category. See the list of waste management codes (II A-2).
- Complete the form. Enter each waste category on a separate line of the report form. **If the same type of waste was managed by two different methods, you must complete two lines on the form, one for each method.**
- Continuation Sheets are available if you need more lines.
- For LLRW managed only by storage for decay (waste management code W7), you need only complete items A-1, A-2 and G-30.
- Explain "other." If you choose a code number corresponding to "other," please use Section VII "Attachment Sheet" at the end of the form to explain.

A LLRW AS GENERATED

A-1 Select waste description code that best describes LLRW as generated.

A-2 Select a waste management method code for each category of LLRW generated.

A-3 Select chemical form code that best describes waste.

A-4 Select hazard code, if any, that best describes waste.

B ON-SITE WASTE TREATMENT

B-5 Select code for each category of LLRW treated on site.

B-6 Select sorption or solidification code, if applicable.

B-7 Enter best estimate of the effectiveness of treatment in terms of volume. Note increase or decrease by ↑ or ↓ (e.g., 5:1↓ or 20%↑).

B-8 Enter post-treatment volume for each waste category in cubic meters (m^3).

C ON-SITE CONTAINER INFORMATION

C-9 Select code for container used to package LLRW.

C-10 Enter volume of container noted in C-9 in m^3.

C-11 Note maximum surface-radiation level in (milli-Sieverts per hour) mSv/hr.

C-12 Enter number of containers described in C-9.

D BROKER/PROCESSOR INFORMATION

D-13 Select code that identifies LLRW broker used.

D-14 Select code that identifies LLRW processor used.

D-15 Select code for each category of LLRW processed. Use B-5 codes.

E POST-PROCESSOR TREATMENT INFORMATION

E-16 See instructions for B-7, above.

E-17 Enter post-treatment volume of LLRW in m^3.

F OTHER CHARACTERISTICS

This section asks for information on source and special nuclear material and chelating agents that may be present in your LLRW. If this section does not apply, please draw a line through each applicable cell and skip to Section G — Disposal and Storage.

F-18 Select applicable source material code.

F-19 Source material weight must be noted in grams.

F-20 Select applicable special nuclear material (SNM) code.

F-21 Total weight in grams for SNM reported in F-20.

F-22 Enter maximum weight of SNM in any single shipment in grams.

F-23 Select applicable chelate code.

F-24 Enter volume (m^3) of LLRW containing chelating agents.

F-25 Enter weight (kg) of LLRW containing chelating agents.

F-26 Enter weight percent for each chelating agent.

G DISPOSAL AND STORAGE

G-27 Enter class of LLRW.

G-28 Select code that describes how waste was disposed of.

G-29 Choose appropriate disposal site code, if applicable.

G-30 Choose appropriate storage site code, if applicable.

H LLRW NOT MEETING DISPOSAL FACILITY ACCEPTANCE CRITERIA

H-31 Enter waste class of any LLRW you are holding because it does not meet waste acceptance criteria at any of the operating disposal facilities. Use G-27 codes.

H-32 Select hazard code, if any, that best describes waste. Use B-4 codes.

H-33 Enter volume of LLRW identified in H-31 in m^3.

H-34 Enter activity of LLRW identified in H-31 in Megabecquerels (MBq).

H-35 Enter radionuclides in waste identified in H-31.

I CONTAINERS WITH SURFACE RADIATION LEVELS GREATER THAN 2mSv/hr (200 mR/hr)

NOTE: Complete this section for each container noted in C-11 with a maximum surface radiation level greater than 2mSv/hr (200 mR/hr). Use continuation sheets if necessary.

I-36 Enter class of LLRW for each container.

I-37 Enter volume of each container in m^3.

I-38 Enter activity of waste in I-36 by radionuclides (Mbq).

SECTION III. LLRW Summary

A Enter volume (m^3) and activity (MBq) of LLRW received by a licensed LLRW disposal facility by class and via broker or direct transfer.

B Enter volume (m^3) and activity (MBq) of LLRW in interim storage on and off site by class, as indicated.

SECTION IV. Radionuclide Information for Waste Disposed, Held for Decay, and Stored

- For LLRW managed only by storage for decay (waste management code W7), you need only complete items B-1 and B-2.

A-1 List radionuclides contained in LLRW received by a licensed LLRW disposal facility during the reporting year as reported in Section III-A. For each radionuclide, identify total activity (MBq) contained in such LLRW.

A-2 Self-explanatory.

B-1 Self-explanatory.

B-2 Self-explanatory.

C-1 Self-explanatory.

C-2 Self-explanatory.

C-3 Self-explanatory.

SECTION V. Storage Facility Information

- For LLRW managed only by storage for decay (waste management code W7), you need only complete item A-3.

A-1 Self-explanatory.

A-2 Note total on-site storage capacity in m^3.

A-3 Note maximum volume of LLRW held for storage for decay at any one time in m^3.

B Self-explanatory.

C Self-explanatory.

D Self-explanatory.

SECTION VI. Future LLRW Generation

Provide your best estimate for future generation of LLRW requiring disposal. Provide activity (MBq) and volume (m^3).

CONVERSIONS FOR UNITS				
Quantity	**SI* Unit**	**Conventional Unit**	**Value of Conventional Unit in SI Units**	**To Convert from Conventional Unit to SI Units**
Activity	Becquerel (Bq)	Curie (Ci)	3.7×10^{10} Bq	Ci x 3.7×10^4 = Megabecquerels
Dose Equivalent	Sievert (Sv)	Rem	0.01 Sv	Rem x 0.01 = Sieverts
Volume	cubic meters (m^3)	cubic feet (ft^3)	0.028 m^3	ft^3 x 0.028 = m^3
Weight	kilograms (kg)	pounds (lb)	0.455 kg	lb x 0.455 = kg

* SI — International System

Activity conversions.				**Dose-equivalent conversions.**		**Volume conversions.**	
mCi	**MBq**	**µCi**	**MBq**	**Rems**	**Sieverts**	**ft^3**	**m^3**
500	18,500	1,000	37	500	5	11.9 (89 gal. drum)	0.33
200	7,400	500	18.5	100	1	11.1 (83 gal. drum)	0.31
100	3,700	100	3.7	10	100 mSv	7.5 (55 gal. drum)	0.21
50	1,850	50	1.85	1	10 mSv	4.01 (30 gal. drum)	0.11
20	740	20	0.74	100 mrem	1 mSv	0.67 (5 gal. pail)	0.019
10	370	10	0.37	10 mrem	10^{-1} mSv		
5	185	5	0.185	1 mrem	10^{-2} mSv		
2	74	2	0.074	100 µrem	10^{-3} mSv		
1	37	1	0.037	10 µrem	10^{-4} mSv		

DEFINITIONS

- **Transfer** by itself or in phrases such as **"transfer for disposal"** means transfer either directly by the generator or by its broker.
- **Disposal** by itself or in phrases such as **"transfer for disposal"** means disposal at a licensed LLRW disposal facility.
- **Volume** means container or waste package volume, as typically reported on disposal site manifests.
- **Radionuclides** mean each individual radionuclide if known, or, at a minimum, all radionuclides that have been or would have to be identified on disposal site manifests. H-3, C-14, Tc-99, and I-129 must be identified where present
- **Direct transfer** means transfer of LLRW directly from the facility where it was generated to a licensed LLRW disposal facility.
- **Transfer via broker** means transfer from the facility where the LLRW was generated to one or more collection or treatment facility/ies, and then from such facility/ies to a licensed LLRW disposal facility.
- **Interim storage** means long-term storage of LLRW containing long-lived radionuclides (half-lives > 90 days) pending the availability of a licensed LLRW disposal facility. This does not refer to normal accumulation of LLRW for disposal (staging) or storage for decay.
- **Storage for Decay** means storage of LLRW containing short-lived radionuclides (half-lives < 90 days) until the radioactivity has diminished to levels that will permit disposal as non-radioactive waste.

Also see the inside front cover for waste management descriptions.

DiPietrantonio, Peter

From: DiPietrantonio, Peter
Sent: Friday, January 12, 2007 12:21 PM
To: 'adean@wcstexas.com'
Subject: Request for Manifests & Certificates of Disposal

Hi Anne,

Thank you for your assistance this morning addressing Sulzer Metco's waste manifest and certificate of disposal questions. As you requested, the following summarizes the information that is missing from our records/files and ask that you provide us with copies as noted. Please let me know if you have any questions after you have a chance to review this request (phone 516-338-2337). Also as discussed, I am working from Peter's desk during his medical leave and that is why this is being sent form his e-mail address. Please confirm by e-mail that you received this e-mail.

Again, thank you for your assistance.

Rick Marx

2005 (All of these shipments are from our Westbury, NY facility unless noted otherwise)

- Texas Manifest No. 3216919 (Manifest document no. 51024) - copies needed of TSDF signed manifest and Form 540 for Manifest numbers 51024-10 and 51024-11, also a copy of the WCS Certificate of Disposal
- Texas Manifest No. 3216918 (Manifest document no. 50926) - copies needed of TSDF signed manifest and Form 540 for Manifest numbers 50926-01, also a copy of the WCS Certificate of Disposal
- Texas Manifest No. 3216917 (Manifest document no. 50829) - copies needed of TSDF signed manifest and Form 540 for Manifest numbers 50829-02, also a copy of the WCS Certificate of Disposal
- Form 540 for Manifest number 50117-01 - copies needed of Texas Manifest (we have no copy of manifest) and a copy of the WCS Certificate of Disposal
- Form 540 for Manifest number 41213-06 - copies needed of Texas Manifest (we have no copy of manifest) and a copy of the WCS Certificate of Disposal
- Form 540 for Manifest number 41115-18 - copies needed of Texas Manifest (we have no copy of manifest) and a copy of the WCS Certificate of Disposal
- Form 540 for Manifest number 41018-02 - copies needed of Texas Manifest (we have no copy of manifest) and a copy of the WCS Certificate of Disposal
- Form 540 for Manifest number 40819-01 - copies needed of Texas Manifest (we have no copy of manifest) and a copy of the WCS Certificate of Disposal (*Note this was from the Hicksville, NY facility*)
- Form 540 for Manifest number 40819-02 - copies needed of Texas Manifest (we have no copy of manifest) and a copy of the WCS Certificate of Disposal (*Note this was from the Hicksville, NY facility*)
- Form 540 for Manifest number 40823-01 - copies needed of Texas Manifest (we have no copy of manifest) and a copy of the WCS Certificate of Disposal (*Note this was from the Hicksville, NY facility*)
- Form 540 for Manifest number 50117-01 - copies needed of Texas Manifest (we have no copy of manifest) and a copy of the WCS Certificate of Disposal

2006

- Texas Manifest No. 3769748 (Manifest document no. 60417) - copies needed of TSDF signed manifest and Form 540 for Manifest numbers 60417-01, also a copy of the WCS Certificate of Disposal

DiPietrantonio, Peter

888-789-2783

Anne Dean (WCS)

Remaining MSI manifests

(Anne's last day at WCS will be 2/1/07)

Candy Greenwood

From: Anne AD. Dean [adean@wcstexas.com]
Sent: Monday, January 15, 2007 2:22 PM
To: DiPietrantonio, Peter
Subject: FW: Request for Manifests & Certificates of Disposal
Attachments: 3216918.pdf; 3216917.PDF; 3642223.PDF

Rick,

Attached find the info requested of manifest 3216918,3216917,3€ requested will be emailed no later than Wednesday 1/17/07.

Have a great day,

Anne Dean
888-789-2783

-----Original Message-----
From: DiPietrantonio, Peter [mailto:Peter.DiPietrantonio@sulze
Sent: Friday, January 12, 2007 11:21 AM
To: Anne AD. Dean
Subject: Request for Manifests & Certificates of Disposal

Hi Anne,

Thank you for your assistance this morning addressing Sulzer Metco's waste manifest and certificate of disposal questions. As you requested, the following summarizes the information that is missing from our records/files and ask that you provide us with copies as noted. Please let me know if you have any questions after you have a chance to review this request (phone 516-338-2337). Also as discussed, I am working from Peter's desk during his medical leave and that is why this is being sent form his e-mail address. Please confirm by e-mail that you received this e-mail.

Again, thank you for your assistance.

Rick Marx

2005 (All of these shipments are from our Westbury, NY facility unless noted otherwise)

- Texas Manifest No. 3216919 (Manifest document no. 51024) - copies needed of TSDF signed manifest and Form 540 for Manifest numbers 51024-10 and 51024-11, also a copy of the WCS Certificate of Disposal
- Texas Manifest No. 3216918 (Manifest document no. 50926) - copies needed of TSDF signed manifest and Form 540 for Manifest numbers 50926-01, also a copy of the WCS Certificate of Disposal
- Texas Manifest No. 3216917 (Manifest document no. 50829) - copies needed of TSDF signed manifest and Form 540 for Manifest numbers 50829-02, also a copy of the WCS Certificate of Disposal
- Form 540 for Manifest number 50117-01 - copies needed of Texas Manifest (we have no copy of manifest) and a copy of the WCS Certificate of Disposal
- Form 540 for Manifest number 41213-06 - copies needed of Texas Manifest (we have no copy of

manifest) and a copy of the WCS Certificate of Disposal

- Form 540 for Manifest number 41115-18 - copies needed of Texas Manifest (we have no copy of manifest) and a copy of the WCS Certificate of Disposal
- Form 540 for Manifest number 41018-02 - copies needed of Texas Manifest (we have no copy of manifest) and a copy of the WCS Certificate of Disposal
- Form 540 for Manifest number 40819-01 - copies needed of Texas Manifest (we have no copy of manifest) and a copy of the WCS Certificate of Disposal (*Note this was from the Hicksville, NY facility*)
- Form 540 for Manifest number 40819-02 - copies needed of Texas Manifest (we have no copy of manifest) and a copy of the WCS Certificate of Disposal (*Note this was from the Hicksville, NY facility*)
- Form 540 for Manifest number 40823-01 - copies needed of Texas Manifest (we have no copy of manifest) and a copy of the WCS Certificate of Disposal (*Note this was from the Hicksville, NY facility*)
- Form 540 for Manifest number 50117-01 - copies needed of Texas Manifest (we have no copy of manifest) and a copy of the WCS Certificate of Disposal

2006

- Texas Manifest No. 3769748 (Manifest document no. 60417) - copies needed of TSDF signed manifest and Form 540 for Manifest numbers 60417-01, also a copy of the WCS Certificate of Disposal
- Texas Manifest No. 3642223 (Manifest document no. 60220) - copies needed of TSDF signed manifest and Form 540 for Manifest numbers 60220-11, also a copy of the WCS Certificate of Disposal

CONFIDENTIALITY NOTICE
The information in this email may be confidential and/or privileged. This email is intended to be reviewed by only the addressee(s) named above. If you are not the intended recipient, you are hereby notified that any review, dissemination, copying, use or storage of this email and its attachments, if any, or the information contained herein is prohibited. If you have received this email in error, please immediately notify the sender by return email and delete this email from your system. Thank you.

Date Received	Generator Name	Mar
08/10/06	Sulzer Metco	37697
06/15/06	Sulzer Metco	37697
3 /15/06	Sulzer Metco	36422
3 /18/05	Sulzer Metco	32169
6 /16/05	Sulzer Metco	32169
4 /21/05	Sulzer Metco	32169
8 /9 /05	Sulzer Metco (US) INC	32169
8 /8 /05	Sulzer Metco (US) INC	32169
11/29/05	Sulzer Metco Inc	36422
9 /9 /05	Sulzer Metco Inc	32169
11/4 /05	Sulzer Metco Inc.	32169
10/03/05	Sulzer-Metco	32169
1 /26/06	SULZER-METCO (US) INC.	37697

SULZER

Sulzer Metco

Waste Disposal Form

Department: MATERIALS OPERATION Date: NOV 12, 2004

Name of Submitter: DAVE HAWLEY

Waste Description:

Quantity of waste: 10,000 lb

List all constituents known to be present and the approximate percent of each. If the waste is a mixture of Sulzer Metco products, list the approximate percent of each:

1.	WATER	90 %	6.		%
2.	CERAMIC (ZIRC)	7 %	7.		%
3.	NICKEL / TUNG	1 %	8.		%
4.	OTHER	2 %	9.		%
5.		%	10.		%

Properties:

Circle those that apply:

Powder	(Liquid)	Flammable	Combustible
Oxidizer	Corrosive	Highly Acidic	Highly Alkaline

Please submit this form to the Facilities Department. Do not take the material to anyone. Someone will be assigned to remove the material for storage prior to disposal.

Facilities Use Only:

Waste Profile Code: CH 82414 Internal Tracking Number: —

Labels Required: —

WasteDisposalForm0303

Daily
11/12/04
11/12/04

C 282200 1828 00032 W I
LOCATION FAC EP

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0069
RUN DATE: 08/01/88

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/07/87
(5) 11590	(10) REP: A TEICHER 334-1300	PRIOR CO ISSUE DATE 11/16/87
		PRIOR CO EXPIRATION DATE 11/15/88

FACILITY EMIS-CLASS / PGM-CODE: A2 POINT EMIS-CLASS / PGM-CODE:

EMISSION POINT 00032
(41)UTM-E: 622.2 KM. (42)STACK HEIGHT: 30 FT. (43)EXIT VELOCITY: 50.00 FT/SEC (44)SIC: 3569 (45)AGENCY-CODE-1: C (COUNTY)
(46)UTM-N: 513.4 KM. (47)HT ABV STRUC: 15 FT. (48)EXIT FLOW: 1975.00 ACFM (49)CO FEE: $25.00 (50)AGENCY-CODE-2: C (COUNTY)
(51)GRND ELEV: 139 FT. (52)STK DIAM: 11 IN. (53)EXIT TEMP: 72 DEGR F (54)CO CONDITIONS:

UNIT I
(55)HOURS/DAY: 1.0 (56)DAYS/YEAR: 200 (57)% OP BY SEASON: 25 25 25 25 (58)SOURCE CODE: 1303 SPRAYING (OTHER THAN
(59)BLDG: 1101 (60)FLOOR NAME: (61)RULE 1: 212.00 (62)RULE 2:

PROCESS/UNIT DESCRIPTION (72)DESCRIPTION 1. SPRAYING OF METAL WIRES OR POWDERS FOR TESTING
2. PURPOSES OF EQUIPMENT AND/OR WIRES OR POWDERS

CONTROL EQUIPMENT (73)TYPE: 012 IMPINGEMENT PLATE (74)MFG: UNITED SWIRL ORIFICE SCRUBBERS STM 25 (75)ID: 01 (76)DATE INSTALLED: 01/65
(77)DISPOSAL METHOD: 09 OTHER (78)USEFUL LIFE: 20 YEARS

AIR CONTAMINANTS	CAS NUMBER	ENV RATING	EMISSIONS ACTUAL	UNIT	HOW DET	PERMISSIBLE	% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR	ANNUAL EMISSIONS (LBS/YEAR) ACTUAL	10x	PERMISSIBLE
TUNGSTEN W	(085) 07440-33-7	(086) C	(087) .001	(088) 15	(089) 06	(090) .001	(091)	(092) .001	(093) .200	(094) 0	(095) .200
MOLYBDENUM (8CI9CI)	(096) 07439-98-7	(097) C	(098) .001	(099) 01	(100) 06	(101) .001	(102) 90.0	(103) .001	(104) .200	(105) 0	(106) .200
ALUMINUM	(107) 07429-90-5	(108) C	(109) .001	(110) 01	(111) 06	(112) .001	(113) 90.0	(114) .001	(115) .200	(116) 0	(117) .200
ALUMINUM OXIDE	(118) 01344-28-1	(119) C	(120) .001	(121) 01	(122) 06	(123) .001	(124) 90.0	(125) .001	(126) .200	(127) 0	(128) .200
TITANIUM OXIDE	(129) 13463-67-7	(130) C	(131) .001	(132) 01	(133) 06	(134) .001	(135) 90.0	(136) .001	(137) .200	(138) 0	(139) .200
NICKEL	(140) 07440-02-0	(141) C	(142) .001	(143) 01	(144) 06	(145) .001	(146) 90.0	(147) .001	(148) .200	(149) 0	(150) .200

NOTE - SHOULD NEW EVIDENCE REQUIRE LOWER AMBIENT LEVELS BE MET FOR THE ABOVE UNDERSCORED CAS NUMBER(S), THE SOURCE OWNER MAY BE REQUIRED TO REDUCE EMISSIONS.

SPECIAL CONDITIONS (151)CONDITION 1. AG1 COMPLIANCE

CONTINUED ON NEXT PAGE

MATERIAL SAFETY DATA SHEET

PRODUCT NAME: CHROME S.G W/R LACQ **HMIS CODES:** H F R P
PRODUCT CODE: 74-32770 2 2 0 J

SECTION I - MANUFACTURER IDENTIFICATION

MANUFACTURER'S NAME: HARTIN PAINT & FILLER CO.
ADDRESS: 225 BROAD STREET, CARLSTADT NEW JERSEY 07072
EMERGENCY PHONE: 201-438-3300 **INFORMATION PHONE:** SAME
DATE REVISED : 09-20-89 **NAME OF PREPARER :**

SECTION II - HAZARDOUS INGREDIENTS/SARA III INFORMATION

HAZARDOUS COMPONENTS	CAS NUMBER	OCCUPATIONAL EXPOSURE LIMITS OSHA PEL	ACGIH TWA	TLV STEL	VAPOR PRESSURE mm Hg @ TEMP		WEIGHT PERCENT
*GLYCOL ETHER	111-76-2	50	25	(75)	1.0	68F	9
ALUMINIUM PASTE	7429-90-5	15MG/M3	10 MG.M3	10 MG/M3	N/A		< 5.0%
*ALCOHOL	67-63-0	400	400	500	33.0	68F	2

* Indicates toxic chemical(s) subject to the reporting requirements of section 313 of Title III and of 40 CFR 372.
MAY ALSO CONTAIN THE FOLLOWING PRODUCTS: TITANIUM DIOXIDE [CAS # 13463-67-7] CARBON BLACK [CAS # 1333-86-4]
MAGNESIUM SILICATE [CAS #14807-96-6]

SECTION III - PHYSICAL/CHEMICAL CHARACTERISTICS

BOILING RANGE: 181 to 360 Deg F **SPECIFIC GRAVITY (H2O=1):** 1.0
VAPOR DENSITY: LIGHTER THAN AIR **EVAPORATION RATE:** SLOWER THAN ETHER
COATING V.O.C. : 2.16 LB/GL (259 G/L)
SOLUBILITY IN WATER:
APPEARANCE AND ODOR:

SECTION IV - FIRE AND EXPLOSION HAZARD DATA

FLASH POINT: 53 Deg F **METHOD USED:** TCC
FLAMMABLE LIMITS IN AIR BY VOLUME- LOWER: 0.9% **UPPER:** 12.0%

EXTINGUISHING MEDIA: FOAM, ALCOHOL FOAM, CO2, DRY CHEMICAL, WATER FOG

SPECIAL FIREFIGHTING PROCEDURES
MATERIALS BURNS RAPIDLY WITH INTENSE HEAT. USE SELF-CONTAINED BREATHING APPARATUS AND PROTECTIVE CLOTHING.

UNUSUAL FIRE AND EXPLOSION HAZARDS
AVOID UNNECESSARY EXPOSURE TO HEAT. VAPORS MAY TRAVEL TO SOURCE OF IGNITION AND FLASH BACK.

SECTION V - REACTIVITY DATA

STABILITY: STABLE

CONDITIONS TO AVOID

HIGH HEAT. SPARKS. OPEN FLAME

INCOMPATIBILITY (MATERIALS TO AVOID)

ALKALINE METALS. STRONG ACIDS. OXIDIZING AGENTS

HAZARDOUS DECOMPOSITION OR BYPRODUCTS

OXIDES OF NITROGEN-CARBON DIOXIDE/MONOXIDE

HAZARDOUS POLYMERIZATION: WILL NOT OCCUR

SECTION VI - HEALTH HAZARD DATA

INHALATION HEALTH RISKS AND SYMPTOMS OF EXPOSURE

VAPORS MAY BE IRRITATING AND CAUSE DIZZINESS. HEADACHE. NAUSEA. VOMITTING AND NARCOSIS

SKIN AND EYE CONTACT HEALTH RISKS AND SYMPTOMS OF EXPOSURE

BREIF CONTACT WITH SKIN SHOULD NOT PRODUCE ANY HARMFUL EFFECTS. BUT PROLONGED CONTACT. AS FROM CLOTHING WET WITH CHEMICAL. MAY CAUSE IRRITATION. EYE CONTACT CAUSES SEVERE IRRITATION.

SKIN ABSORPTION HEALTH RISKS AND SYMPTOMS OF EXPOSURE

NONE CURRENTLY KNOWN.

INGESTION HEALTH RISKS AND SYMPTOMS OF EXPOSURE

MAY CAUSE TOXICOLOGICAL AND NEUROLOGICAL EFFECTS.

HEALTH HAZARDS (ACUTE AND CHRONIC)

ACUTE INGESTION CAN CAUSE HEADACHE. DROWSINESS AND UNCONSCIOUSNESS. ACUTE INHALATION OF VAPORS ARE IRRITATING TO NASAL PASSAGES AND THROAT. ACUTE REPEATED OR PROLONGED SKIN CONTACT CAN CAUSE DRYING OF THE SKIN. AND ACUTE VAPOR OR LIQUID EYE CONTACT MAY BE INHALED TO THE EYES.

CARCINOGENICITY: NTP? NO **IARC MONOGRAPHS?** NO **OSHA REGULATED?** NO

MEDICAL CONDITIONS GENERALLY AGGRAVATED BY EXPOSURE

EMPHYSEMA. ASTHMA. DERMATITIS.

EMERGENCY AND FIRST AID PROCEDURES

IF SWALLOWED CALL A PHYSICIAN SKIN - FLUSH WITH WATER. IF INHALED REMOCE TO FRESH AIR AND CALL A PHYSICIAN. GIVE ARTIFICIAL RESPIRATION IF BREATHINMG IS DIFFICULT. EYES - FLUSH WITH PLENTY OF WATER FOR AT LEAST 15 MINUTES. TREATMEN TSHOULD BE DIRECTED AT THE CONTROL OF SYMPTOMS AND THE CLINICAL CONDITION. THERE IS NO SPECIFIC ANTIDOTE

SECTION VII - PRECAUTIONS FOR SAFE HANDLING AND USE

STEPS TO BE TAKEN IN CASE MATERIAL IS RELEASED OR SPILLED

WEAR SUITABLE PROTECTIVE EQUIPMENT. SPILLS SHOULD BE COLLECTED FOR DISPOSAL BY APPROPRIATE METHODS.

WASTE DISPOSAL METHOD

DISPOSE OF WASTE BY APPROPRIATE METHODS OR INCENERATE IN A FURNACE WHERE PERMITTED UNDER APPROPRIATE FEDERAL. STATE. AND LOCAL REGULATIONS.

PRECAUTIONS TO BE TAKEN IN HANDLING AND STORING

STORE LARGE QUANITIES ONLY IN BUILDINGS DESIGNED TO COMMPLY WITH OSHA 1910.106. STORE IN COOL AREA.

OTHER PRECAUTIONS

KEEP CLOSURE TIGHT AND CONTAINER UPRIGHT TO PREVENT LEAKAGE . DO NOT STORE OR USE HEAT. SPARKS OR OPEN FLAME. STORE DRUM OUT OF SUN AND AWAY FROM HEAT. STORE AND USE ONLY IN WELL-VENTILATED AREAS. DRUMS OF THIS MATERIAL SHOULD BE GROUNDED WHEN POURING. NEVER USE PRESSURE TO EMPTY. DRUM IS NOT A PRESSURE VESSESL. DO NOT PUNCTURE CONTAINER OR LEAVE OPENED OR UNCOVERED. DRUMS SHOULD NOT BE WASHED OUT OR USED FOR OTHER PURPOSES. DO NOT GET IN EYES. AVOID SKIN CONTACT. HARMFUL IF INHALED. PREVENT PROLONGED OR REPEATED BREATHING OR VAPOR OR MIST. READ INSTRUCTIONS BEFORE USING

SECTION VIII - CONTROL MEASURES

RESPIRATORY PROTECTION

IN OPEN AREAS: USE APPROVED MECHANICAL FILTER RESPIRATORS TO REMOVE SOLID AIR-BORNE PARTICLES. IN RESTRICTED VENTILATION AREAS: USE OSHA APPROVED CHEMICAL/MECHANICAL FILTER RESPIRATORS DESIGNED TO REMOVE A COMBINATION OF PARTICLES AND VAPOR. IF LOCAL EXHAUST IS NOT SUFFICIENT TO KEEP LEL BELOW STATED IN SECTION III.

VENTILATION

ALL APPLICATION AREAS SHOULD BE VENTILATED IN ACCORDANCE WITH OSHA REGULATION 29CFR.1910 TO KEEP AIR CONTAMINANT CONCENTRATION LEVELS BELOW APPLICATION OSHA PERMISSABLE EXPOSURE LIMIT OR ACGIH'S TLV LIMIT.

PROTECTIVE GLOVES

REQUIRED FOR PROLONGED OR REPEATED CONTACT

EYE PROTECTION

USE SAFETY EYEWEAR WITH SPLASH GUARDS OR SIDE SHEILDS.

OTHER PROTECTIVE CLOTHING OR EQUIPMENT

EYE BATH. SAFETY SHOWER. APRONS

WORK/HYGIENIC PRACTICES

WEAR PROTECTIVE CLOTHING WHEN NECESSARY. WASH THOROUGHLY BEFORE HANDLING FOOD PRODUCTS.

SECTION IX - DISCLAIMER

DISCLAIMER

WHILE HARTIN PAINT AND FILLER CORP. BELEIVES THAT THE DATA CONTAINED HEREIN ARE FACTUAL AND THE OPINIONS EXPRESSED ARE THOSE OF QUALIFIED EXPERTS REGARDING THE RESULTS OF THE TESTS CONDUCTED. THE DATA ARE NOT TO BE TAKEN AS A WARRANTY OR REPRESENTATION FOR WHICH THE HARTIN ASSUMES LEGAL RESPONSIBILITY. IT IS THE USERS RESPONSIBILITY FOR SAFE USE.

SULZER

Sulzer Metco (US) Inc.
1101 Prospect Avenue
Westbury, NY 11590
United States of America
www.sulzermetco.com
(516) 334-1300

FEDERAL EXPRESS

December 9, 2005

Chief Joseph Pascarella
Westbury Fire Department
355 Maple Avenue
Westbury, NY 11590

Subject: Hazardous Waste Compliance

Dear Chief Pascarella:

In accordance with the ***Official Compilation Code Rules and Regulations of the State of New York*** NYCRR 373-3.3(g)(1)(i), *Arrangements with local authorities*, this letter is intended to notify the Westbury Fire Department that Sulzer Metco (US), Inc., located at 1101 Prospect Avenue, Westbury, NY, is a small quantity generator of hazardous waste. Therefore, due to the nature of this waste and in case of an emergency requiring assistance, it is necessary to make arrangements with local authorities as appropriate for the type of waste handled at this facility.

Sulzer Metco requests that the Westbury Fire Department be familiarized with the layout of this facility, properties of hazardous waste handled at this facility and associated hazards, places where facility personnel would normally be working, entrances and roads inside this facility, and possible evacuation routes.

Sulzer Metco has satellite storage areas where a hazardous waste in each location is accumulated into a 55 gallon drum. Those locations have one drum which is under the control of an employee working in that area. Those areas are shown on the attached facility diagram. A description of each hazardous waste is as follows:

Dust Collectors: Highlighted in yellow on the facility diagram. This material is a powder which contains chromium and may also contain nickel, aluminum, cobalt, iron, and other metals and ceramics. Nickel and cobalt are possible carcinogens. Hexavalent chromium is a known carcinogen. Please see the attached Material Safety Data Sheet for other hazards.

Machine Shop: Highlighted in blue on the facility diagram. This waste is a liquid which contains approximately 98% water and 2% chromic acid. Hexavalent chromium is a known carcinogen. Chromic acid is corrosive and causes burns to eyes and skin.

Analytical Lab: Highlighted in green on the facility diagram. This waste is a liquid which contains approximately 15% acid, 85% water and trace quantities of metals. The acids in this liquid, including sulfuric, hydrochloric, nitric, hydrofluoric and phosphoric acids, are corrosive and cause burns to eyes and skin.

Sulzer Metco has designated a hazardous waste accumulation area to hold the above waste materials. That area is also shown on the facility diagram and is highlighted in orange. Notices are posted outside this area with many emergency response telephone numbers, including that of the Westbury Fire Department.

If you have any questions regarding this matter please feel free to contact me at (516) 338-2337. Thank you for your cooperation.

Sincerely,
Sulzer Metco (US) Inc.

Peter DiPietrantonio
Environmental, Health & Safety Specialist

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME _____

_____

EPA ID NO. ___ ___ ___ ___

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

1992 HAZARDOUS WASTE REPORT

FORM WR

WASTE RECEIVED FROM OFF SITE

INSTRUCTIONS: Read the detailed instructions beginning on page 29 of the Hazardous Waste Report booklet before completing this form.

Waste 1

A. Description of hazardous waste - Instructions, Page 29

B. EPA hazardous waste code Instructions, Page 29

C. State hazardous waste code Instructions, Page 30

D. EPA ID Number of facility from which waste was shipped: Instr., Page 30

E.. Quantity generated in 1992 Instructions on Page 30

F. UOM Instr Page 30

Density: ___.___ ☐ 1. lbs/gal. ☐ 2. sg.

G. Waste form code Instructions, Page 31 B

H. RCRA Radioactive- mixed Instructions, Page 31

I. System type Instructions, Page 31 M

Waste 2

A. Description of hazardous waste - Instructions, Page 29

B. EPA hazardous waste code Instructions, Page 29

C. State hazardous waste code Instructions, Page 30

D. EPA ID Number of facility from which waste was shipped: Instr., Page 30

E.. Quantity generated in 1992 Instructions on Page 30

F. UOM Instr Page 30

Density: ___.___ ☐ 1. lbs/gal. ☐ 2. sg.

G. Waste form code Instructions, Page 31 B

H. RCRA Radioactive- mixed Instructions, Page 31

I. System type Instructions, Page 31 M

Waste 3

A. Description of hazardous waste - Instructions, Page 29

B. EPA hazardous waste code Instructions, Page 29

C. State hazardous waste code Instructions, Page 30

D. EPA ID Number of facility from which waste was shipped: Instr., Page 30

E.. Quantity generated in 1992 Instructions on Page 30

F. UOM Instr Page 30

Density: ___.___ ☐ 1. lbs/gal. ☐ 2. sg.

G. Waste form code Instructions, Page 31 B

H. RCRA Radioactive- mixed Instructions, Page 31

I. System type Instructions, Page 31 M

Comments:

Annex 2

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Sulzer Group

Environmental Data and Key Figures

1999 - 2001

Sites taken into account

1999	CT	CTCH, CTNL, CTPL, CTSG
	MT	SAR, SIND, SMX, SIT
	PU	SPUK, SBR, SBR/FDX, SPDE, SPI, SPUSA
	SM	SMCH, SMUS
	TS	HII
2000	CT	CTCH, CTNL, CTPL, CTSG, CTCN
	MT	SIND, SMX, SIT
	PU	SPUK, SBR, SBR/FDX, SPDE, SPI, SPUSA
	SM	SMCH, SMSZ, SMUS
	TS	HII
2001	CT	CTUK, CTMX, CTNL, CTCH, CTCN, CTPL, CTUS, (CTSG)
	MT	SIT, SIND, SMX, (SAR)
	PU	SPI, PUCN, SBR, SPUSA, SPCAN, SPPUS, SPFIN-SA, SPFIN-MA, SPFIN-KA, SBR/FDX, PTY, SPDE, SPUK
	SM	SMUS (Troy, Westbury, Hicksville), SMCH, (SMSZ)
	TS	HII, Elbar BV
	HX	Hexis

General remarks:

Data for transport and health&safety were assessed only since 2001, data are incomplete.

Sulzer Group: Value added and Employees

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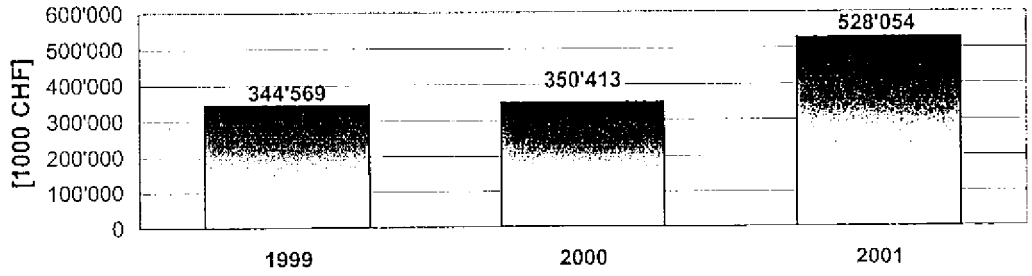
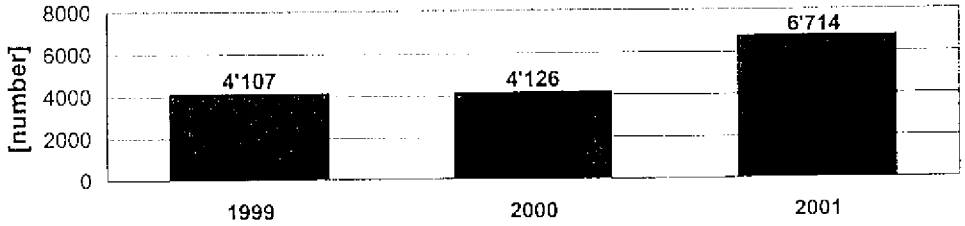
Value added*



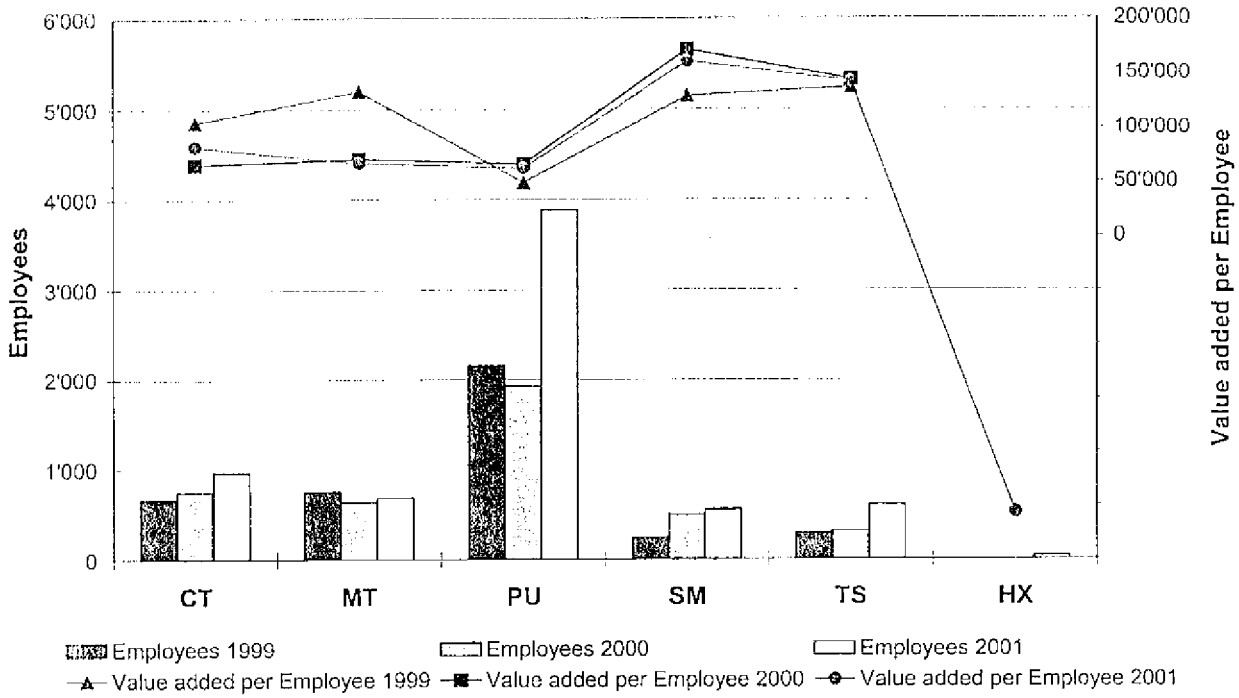
Employees (own)*



*Source: Corporate Controlling

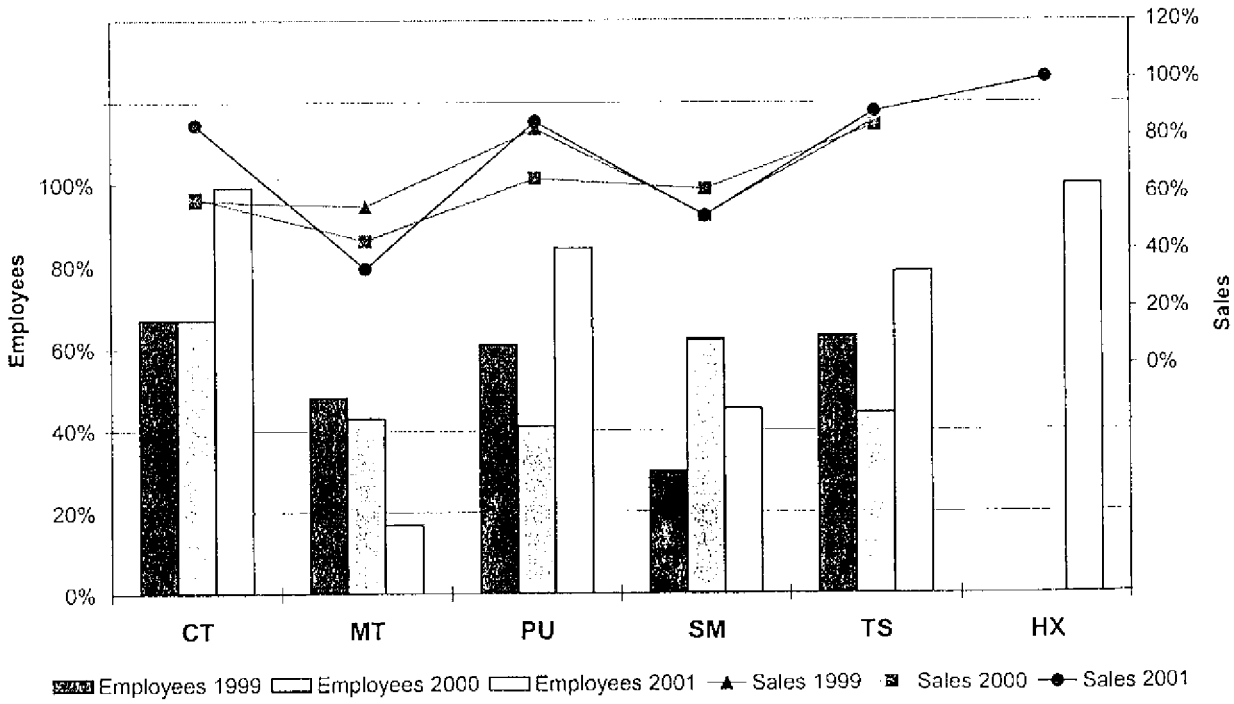
Sulzer Group: Employees and Value added per Employee (by Divisions)

SULZER



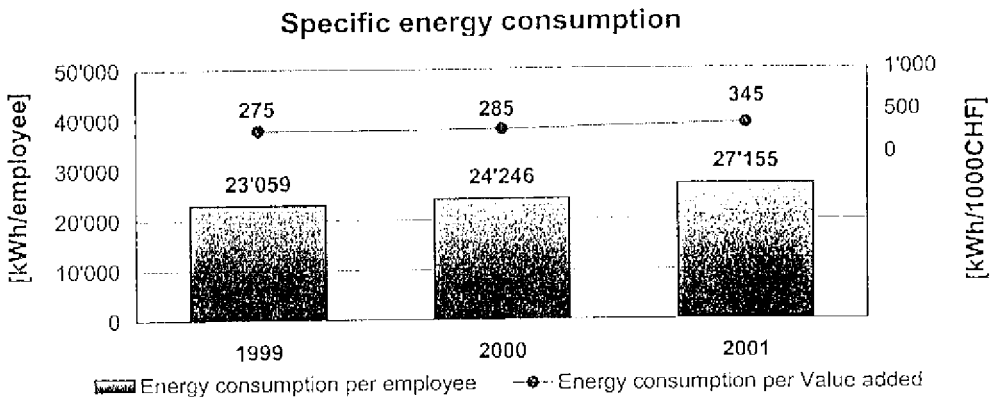
Sulzer Group: Share of Assessed Sites (by Divisions)

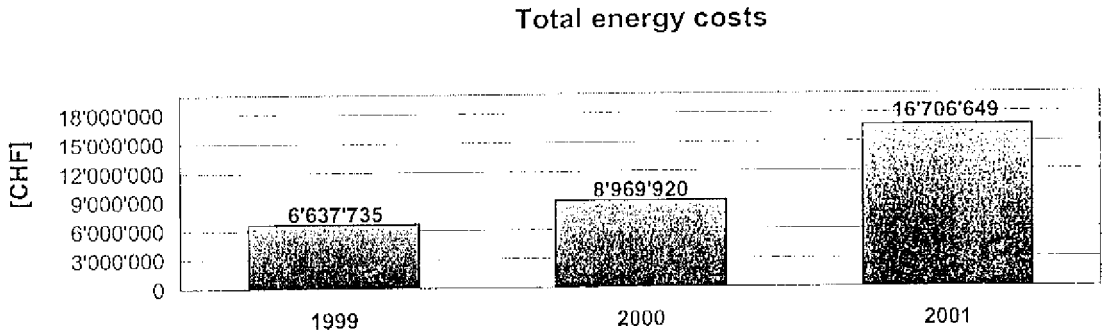
SULZER



Sulzer Group: Energy

SULZER





Sulzer Group: Energy (by Divisions)

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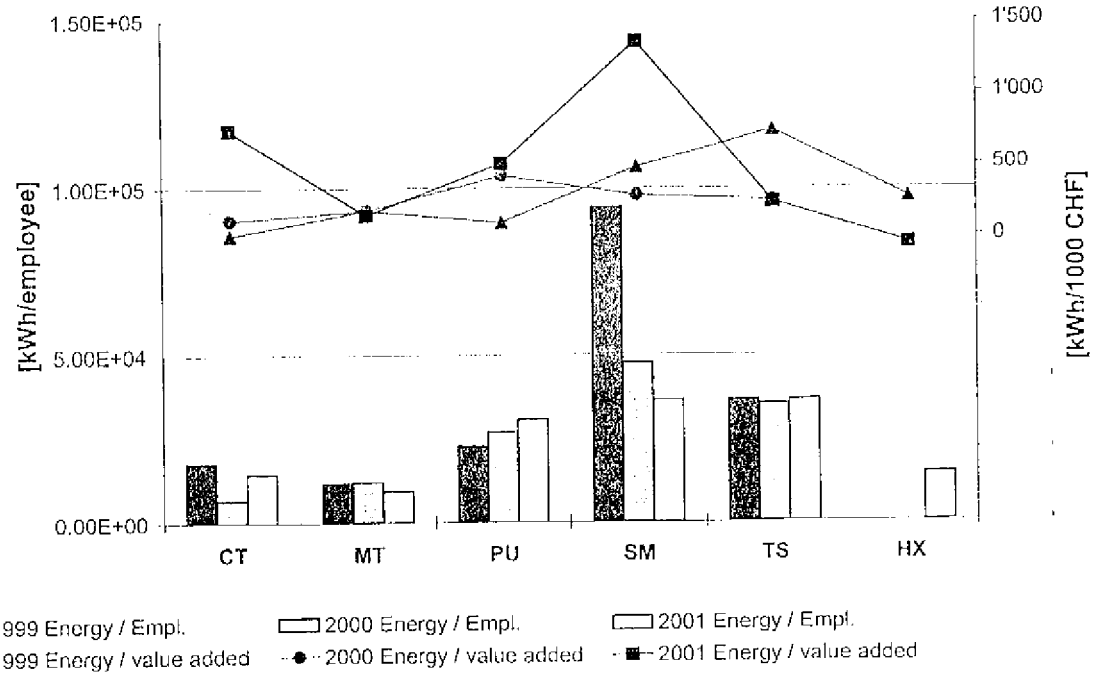

Sulzer Group: Water

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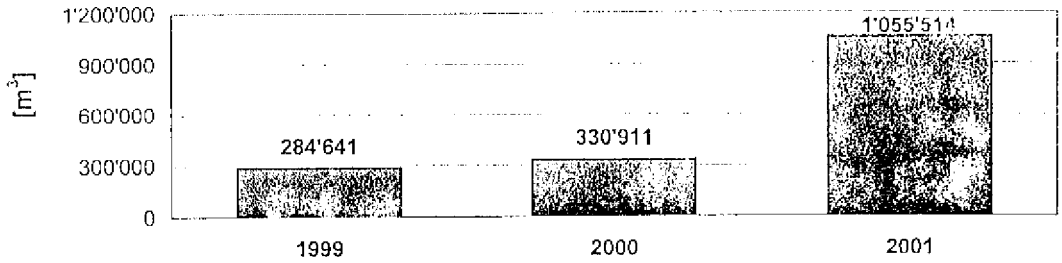
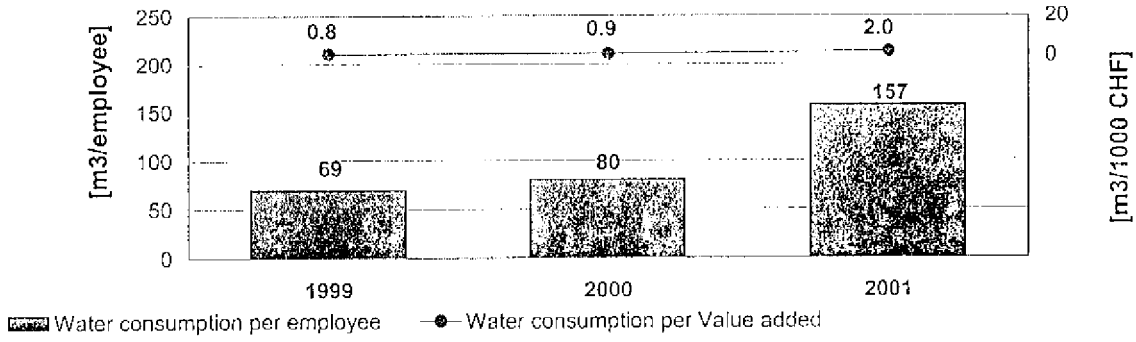
Water consumption



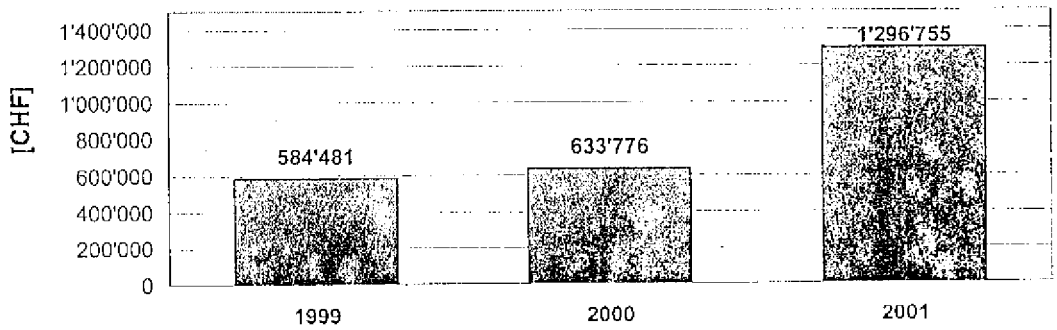
Specific water consumption



Sulzer Group: Water

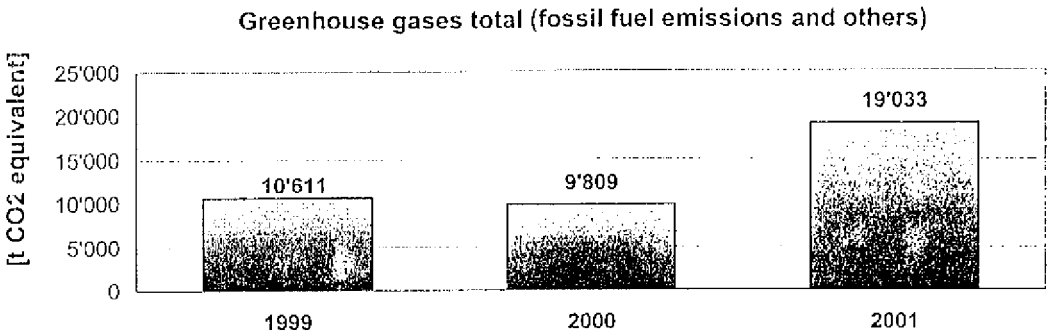
SULZER

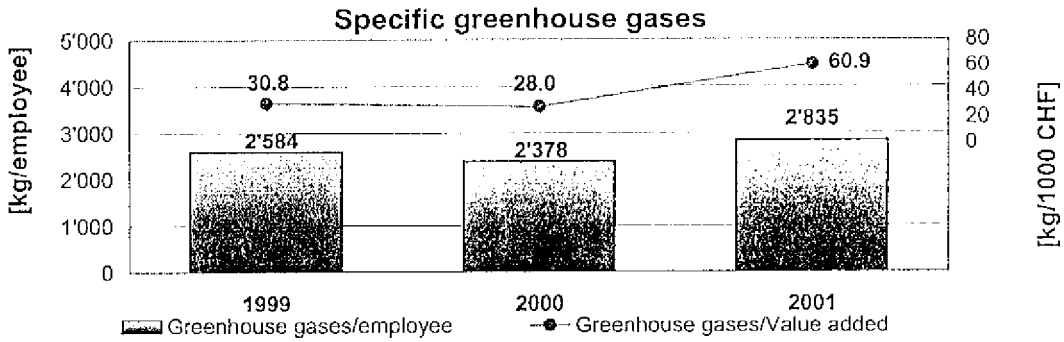
Water costs



Sulzer Group: Emissions*

SULZER

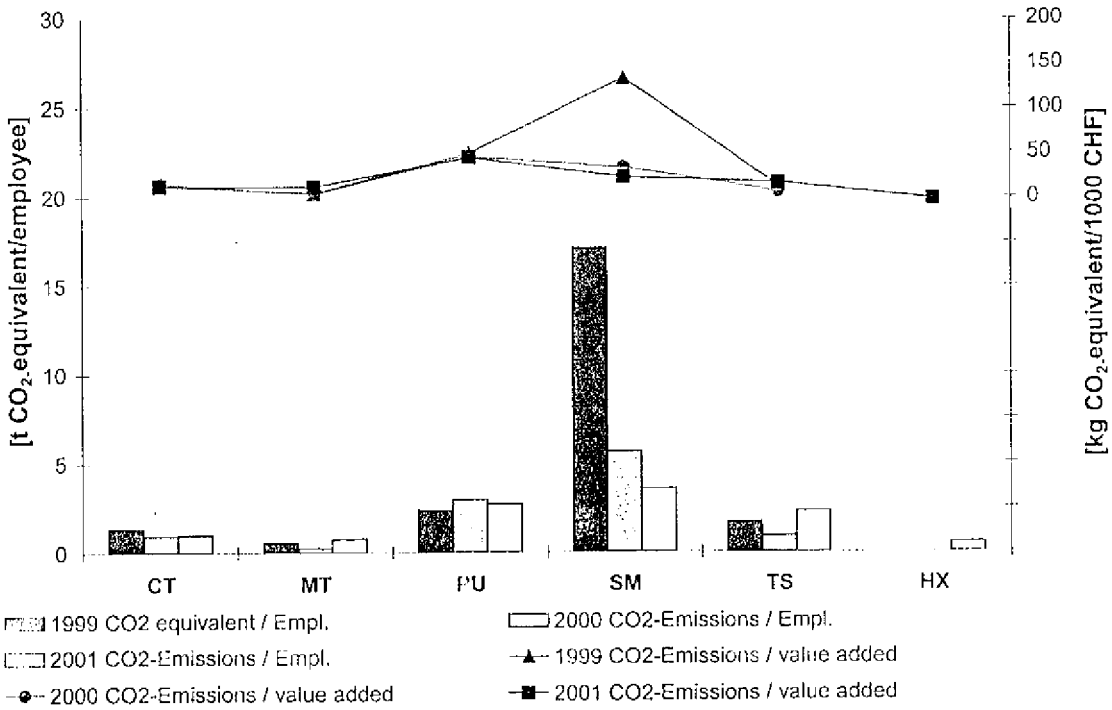




*without CO2-emissions due to generation of electricity

Sulzer Group: Emissions* (by Divisions)

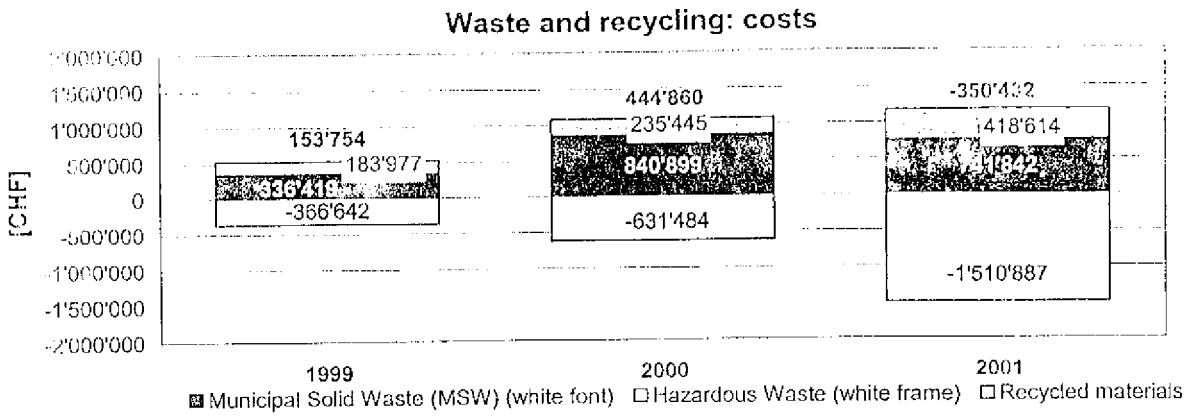
SULZER



*without CO2-emissions due to generation of electricity

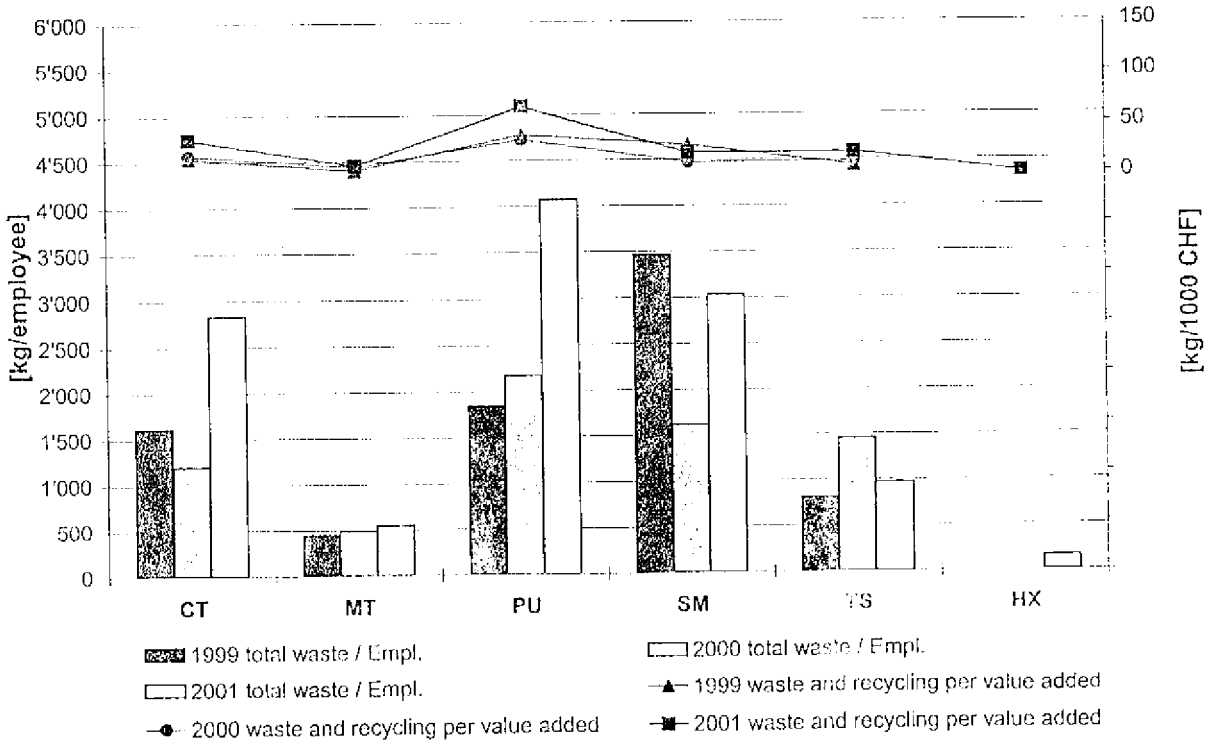
Sulzer Group: Waste and Recycling

SULZER



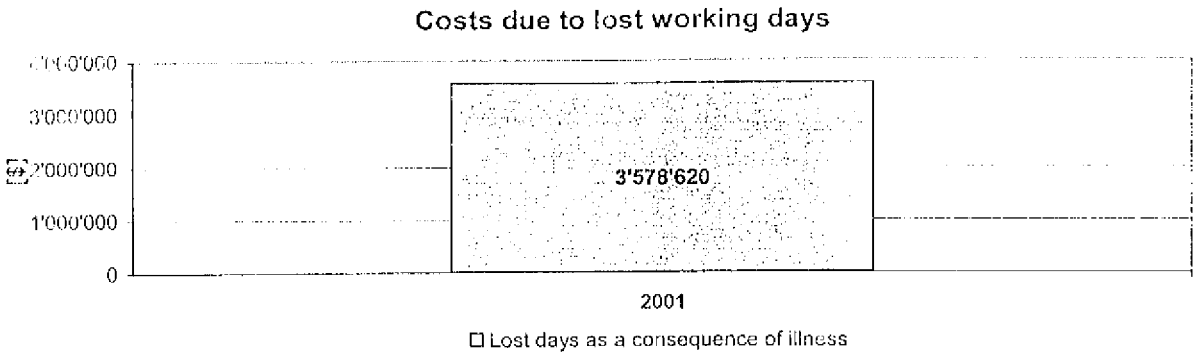
Sulzer Group: Waste and Recycling (by Divisions)

SULZER



Sulzer Group: Health and Safety

SULZER



Sulzer Group: Selected Costs 1999-2001

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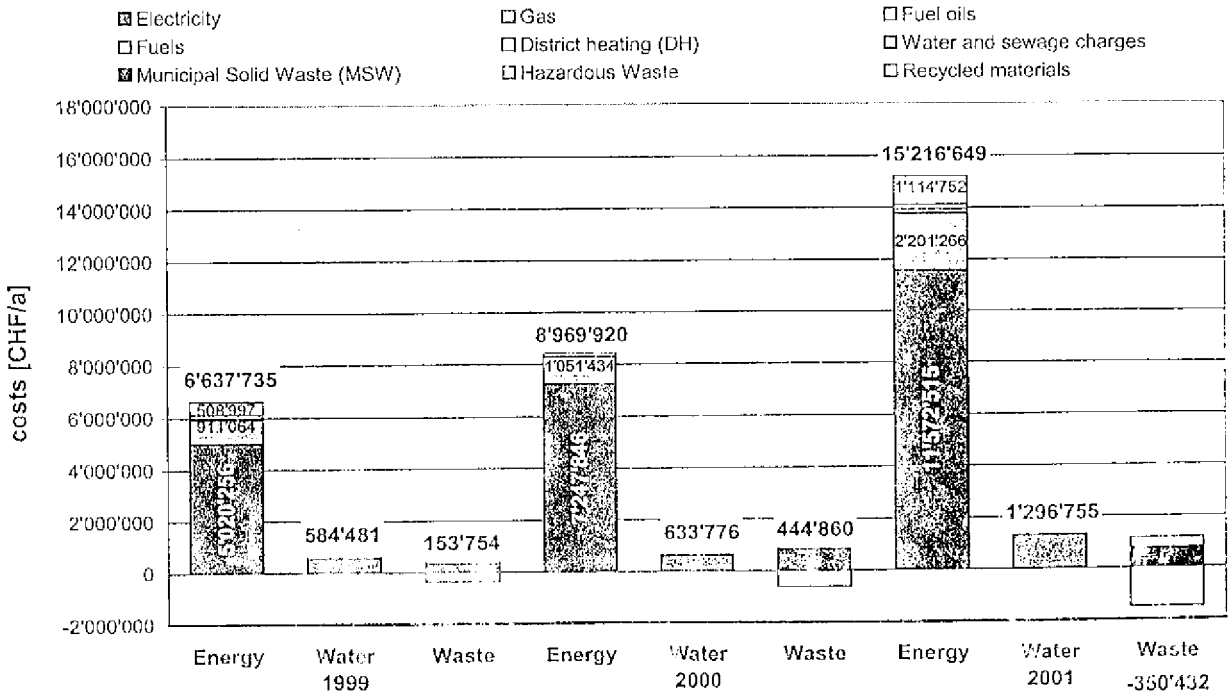

Annex 1 Currencies: Exchange rates

Foreign currency		CHF
€	EU (EURO)	1.511
$	U S A	1.689
£	Great Britain	2.430
ARA ($)	Argentina ($)	1.689
ARS	Argentina	0.834
ATS	Austria	0.110
AUD	Australia	0.873
BEF	Belgium	0.037
BRL	Brazil	0.726
CAD	Canada	1.091
CHF	Switzerland	1.000
CLP	Chile	0.003
CNY	China	0.204
COP	Columbia	0.001
CZK	Czech Republic	0.044
DEM	Germany	0.772
DKR	Denmark	0.203
ESP	Spain	0.009
FIN	Finland	0.230
FRF	France	0.230
GRD	Greece	0.004
HKD	Hong Kong	0.241
HUF	Hungary	0.006
IDR	Indonesia (from 9.99)	0.000

Foreign currency		CHF
IEP	Ireland	1.918
ILS	Israel	0.403
INR	India	0.036
IRR	Iran	0.000
ITL	Italy	0.001
JPY	Japan	0.014
KRW	South Korea	0.001
MXP	Mexiko	0.181
MYR	Malaysia	0.445
NGN	Nigeria	0.034
NLG	Netherlands	0.686
NOK	Norway	0.188
NZD	New Zealand	0.708
PEN	Peru	0.482
PLN	Poland	0.432
PTE	Portugal	0.008
RUB	Russia	0.058
SEK	Sweden	0.404
SGD	Singapore	0.942
THB	Thailand	0.038
TWD	Taiwan	0.050
VEB	Venezuela	0.002
ZAR	South Africa	0.197

Annex 2 Conversion factors

Energy sources

	density [kg/m³]	calorific value [MWh/t]	CO2-emissions [kg CO_2/ kWh]
Electricity	--	--	0 (not considered)
Natural gas	0.79	12.80	0.236
Propane	2.01	12.80	0.227
Butane	2.70	12.80	0.227
Fuel oil, extra-light	840.00	11.90	0.24
Fuel oil, medium	973.00	10.90	0.24
Fuel oil, heavy	973.00	10.90	0.288
Diesel	830.00	11.90	0.24
Petrol / Gasoline	740.00	11.90	0.275

surface

	[m²]
square foot	0.09
square yard	0.84
acre	4'046.90

volume

	[l]
gallon (UK)	4.55
gallon (US)	3.79
liquid barrel (US)	119.24
cubic foot	28.32

mass

	[kg]
pound	0.45
short ton (US)	907.19
long ton (UK)	1'040.05

Source: Leitfaden: BMG Efficiency Engineering

17. (Continued)

q. Rate of process sludge discharge from this operation:

volume: none gal per batch
weight: _____ lbs per batch
frequency: _____ batches per _____
% solids: _____

r. If make-up water volume does not equal discharge volume, account for method of loss (such as evaporation, drag out, or wet sludge removal from recycle loop) and indicate ultimate destination (e.g., offsite hazardous waste landfill, onsite hazardous waste incinerator). The total rate of loss should equal the make-up water flow to the operation minus the rate of water discharge from the operation.

Method of Loss	Rate of Loss (include units)	Ultimate Destination
evaporation	E 50 gallons/2-3 months	

s. Are process water additives used in this operation? Yes ✓ No ___
If yes, indicate below the concentration of those additives in process water (example additives: biocide, detergent, cleaning agent, antifoaming agent, alkali, emulsified oil). For each additive also indicate the general purpose (use) and chemical name. (If chemical name is not known, provide the trade name.)

Additive	Trade Name	Chemical Name	Purpose or Use	Concentration of Additive in Solution ~~(mg/l)~~ %
EXAMPLE: cleaning agent	METCLENZ	sodium gluconate	rust removal	250
Cutting fluid	Proline DEI	Hydric + reacted mineral oil and Petroleum hydrocarbons	lubricant/coolant	.03

VHW-001 (REV. 9/86)

State of New Jersey
Department of Environmental Protection
Division of Hazardous Waste Management
Manifest Section
CN 028, Trenton, NJ 08625

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD057731663
Manifest Document No. N94445
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Metco Perkin Elmer Corp
1101 Prospect ave
Metco Division, Westbury NY 11590

A. State Manifest Document Number
NJA 0483228

B. State Generator's ID
Hicksville, NY 11801
NY3A043 XK-94-EF

4. Generator's Phone (516) 334-1300

5. Transporter 1 Company Name
Environmental Transfer Corp
6. US EPA ID Number
NJD991291584

C. [illegible] 321-23616

7. Transporter 2 Company Name
8. US EPA ID Number

D. Transporter's Phone (201) 347-2215

E. State Trans. ID

9. Designated Facility Name and Site Address
Advanced Environmental Technology Corp.
1 Edge Lane
Flanders, NJ 07836
10. US EPA ID Number
NJD980526593

F. Transporter [illegible]

G. State Facility [illegible]

H. Facility Phone [illegible]-7-1909

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	✓	Waste, Benzoyl Peroxide Organic Peroxide NA2085	1	CW	07	P	D003
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above
S/A Non Lab chemical
a.
b.
c.
d.

K. Handling Codes for Wastes Listed Above
a. 501
b.
c.
d.

15. Special Handling Instructions and Additional Information
Packing Slip Attached for clarification of Material (transportation only)

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Bruce Nielsen
Signature:
Month Day Year: 06 08 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Charles Bartucz
Signature:
Month Day Year: 06 08 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: J. Justin
Signature:
Month Day Year:

GENERATOR

TRANSPORTER

FACILITY

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5500 (Day) (24hr) 609-[illegible]

Form 6219-02 (Rev. 3/88) Previous editions are obsolete.

SIGNATURE AND INFORMATION MUST BE LEGIBLE ON ALL COPIES

8 — TSD MAIL TO GENERATOR

NJA 0483228

PERKIN ELMER

METCO

1101 Prospect Avenue
Westbury, NY 11590
(516) 334-1300

February 21, 1989

CERTIFIED MAIL

New York State Dept. of
Environmental Conservation
Div. of Hazardous Substances
Regulation - Manifest Section
P.O. Box 12820
Albany, NY 12212

Dear Sir/Madam:

Enclosed are the "Generator Annual Report" for all three Metco buildings. Please note that in most cases the quantity is in fractions of tons.

If you require any further information please contact me.

Very truly yours,

Patrick A. Tighe
Supervisor
Facility Administration

PAT:eb
Enclosure (4)
cc: A. Mazzone

47-15-17 (10/87)—27c

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

GENERATOR ANNUAL REPORT

for the year ending December 31, 19 88

Page No. 1 of 1

XX GENERATOR EPA ID NUMBER NYD113118651 OR ☐ SMALL GENERATOR ☐ EXEMPT GENERATOR

NAME	TELEPHONE NUMBER
METCO DIVISION, PERKIN-ELMER CORP.	516-334-1300

STREET: 1101 Prospect Avenue

CITY	STATE	ZIP CODE
Westbury	NY	11590

TREATMENT, STORAGE, OR DISPOSAL FACILITY (TSDF)

EPA ID NUMBER NYD010069149

NAME	TELEPHONE NUMBER
CHEMICAL MANAGEMENT INC.	516-454-6766

STREET: 340 Eastern Parkway

CITY	STATE	ZIP CODE
Farmingdale	NY	11735

WASTE INFORMATION

WASTE DESCRIPTION	WASTE NUMBER	HANDLING CODE	QUANTITY (in Whole Tons)
Waste, Acid Liquid, NOS, Corrosive Material	D002	T	00000.4
Waste, Alkaline Liquid, NOS	D002	T	00000.2
Waste, Alkaline Liquid, NOS	D003	T	
Waste, Flammable Liquid, NOS	F002	B	00000.2
Waste, Flammable Liquid, NOS	D001		

I hereby affirm under penalty of perjury that information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

PRINT OR TYPE NAME	TITLE
Patrick A. Tighe	Supervisor, Facility Administration

SIGNATURE: Patrick A. Tighe

DATE: 2/13/89.

47-15-17 (10/87)—27c

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

GENERATOR ANNUAL REPORT

for the year ending December 31, 19 88

Page No. 1 of 1

☒ GENERATOR EPA ID NUMBER NYD113113865 1 OR ☐ SMALL GENERATOR ☐ EXEMPT GENERATOR

NAME	TELEPHONE NUMBER
METCO DIVISION, PERKIN-ELMER CORP.	516-334-1300

STREET: 1101 Prospect Ave.

CITY	STATE	ZIP CODE
Westbury	NY	11590

TREATMENT, STORAGE, OR DISPOSAL FACILITY (TSDF)

EPA ID NUMBER NYD000824334

NAME	TELEPHONE NUMBER
TECHTRONICS ECOLOGICAL CORP.	718-522-3838

STREET: 8 Walworth Street

CITY	STATE	ZIP CODE
Brooklyn	NY	11205

WASTE INFORMATION

WASTE DESCRIPTION	WASTE NUMBER	HANDLING CODE	QUANTITY (in Whole Tons)
Waste, Flammable Liquid, NOS, Toluene	F005	B	0007.31

I hereby affirm under penalty of perjury that information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

PRINT OR TYPE NAME	TITLE
Patrick A. Tighe	Supervisor, Facility Administration

SIGNATURE: Patrick A. Tighe

DATE: 2/13/89

47-15-17 (10/87)—27c

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

GENERATOR ANNUAL REPORT

for the year ending December 31, 19 88

Page No. 1 of 1

[XX] GENERATOR EPA ID NUMBER NYD015717316 3 OR [ ] SMALL GENERATOR [ ] EXEMPT GENERATOR

NAME	TELEPHONE NUMBER
METCO DIVISION, PERKIN-ELMER CORP.	516-334-1300

STREET: 325 Duffy Avenue

CITY	STATE	ZIP CODE
Hicksville	NY	11801

TREATMENT, STORAGE, OR DISPOSAL FACILITY (TSDF)

EPA ID NUMBER NYD008243 34

NAME	TELEPHONE NUMBER
TECHTRONICS ECOLOGICAL CORP.	718-522-3838

STREET: 8 Walworth Street

CITY	STATE	ZIP CODE
Brooklyn	NY	11205

WASTE INFORMATION

WASTE DESCRIPTION	WASTE NUMBER	HANDLING CODE	QUANTITY (in Whole Tons)
"RQ" Waste, Flammable Liquid (Toluol, Zylene,	F 003	B	0000.69
Paint Thinner.	F 005	B	
"RQ" Wate, Combustible, NOS, Mineral Spirits	D001	B	0000.46
"RQ" Waste, Flammable Liquid, NOS, Thinner & Oil	F003	B	0000.23
"RQ" Waste, 1-1-1 Trichloroethane	F001	B	0000.23

I hereby affirm under penalty of perjury that information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

PRINT OR TYPE NAME	TITLE
Patrick A. Tighe	Supervisor, Facility Administration

SIGNATURE: Patrick A. Tighe

DATE: 2/13/89

NYG 3893211

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

Please type or print. Do not staple

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

U3004242
(Hazardous Waste Manifest 1/23/03)
PPW 11/19/2004

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD131318651
Manifest Doc. No.: 73011
2. Page 1 of 1

Information within heavy bold line is not required by Federal Law.

A. NYG 3893211

3. Generator's Name and Mailing Address
Super Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590

B. Generator's ID: SAME

4. Generator's Telephone Number (516 338-2337

5. Transporter 1 (Company Name): Clean Harbors Env Services Inc
6. US EPA ID Number: MAD039322250

C. State Transporter's ID: NYMA006
D. Transporter's Telephone (781 849-1800

7. Transporter 2 (Company Name)
8. US EPA ID Number

E. State Transporter's ID
F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4879 Spring Grove Avenue
Cincinnati, OH, 45232
10. US EPA ID Number: OHD000816829

G. State Facility ID
H. Facility Telephone (513 681-6735

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II	001	DT	00473	P	EPA D002 / STATE
b. HAZARDOUS WASTE, SOLID, N.O.S., (CERAMIC OXIDE, ALUMINUM OXIDE), 9, NA3077, PG III	001	DM	00010	P	EPA D007 / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
a. ERG#164 (L)(C,E) COPPER CLEANER/CHROMIC ACID
b. ERG#171 (S)(E) RORA METAL & CERAMIC POWDER

K. Handling Codes for Wastes Listed Above
a. T
b. T k

15. Special Handling Instructions and Additional Information
11a: CH189142 D002 D007 D008 11b: CH189108
EMERGENCY PHONE #: (800) 483-3718
NJDEP#07259 DECAL# 010408
Lic. [illegible]

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
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GENERATOR — Printed/Typed Name: [illegible] Signature: [illegible] Mo. 01 Day 07 Year 05

TRANSPORTER — 17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Louis Irizarry Signature: [illegible] Mo. 01 Day 07 Year 05

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Karl Guzman Signature: [illegible] Mo. 01 Day 10 Year 05

FACILITY — 19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Signature: Mo. Day Year

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

COPY 5—Generator—Mailed by TSD Facility

15

NYG 3893211

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple

(Hazardous Waste Manifest 1/23/03)

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD131188861
Manifest Doc. No.:
2. Page 1 of 1

Information within heavy bold line is not required by Federal Law.

A. NYG 3893211

3. Generator's Name and Mailing Address
Eaton Metco US Inc
1811 Prospect Avenue
Westbury, NY 11590

B. Generator's ID: SAME

4. Generator's Telephone Number (516 338-2337

5. Transporter 1 (Company Name): Clean Harbors Env Services Inc
6. US EPA ID Number: MAD038112250

C. State Transporter's ID: NYMA005

D. Transporter's Telephone (781 849-1900

7. Transporter 2 (Company Name):
8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4879 Spring Grove Avenue
Cincinnati, OH, 45232
10. US EPA ID Number: OHD000816829

G. State Facility ID:

H. Facility Telephone (513 681-6738

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II					EPA D002 / STATE
b. HAZARDOUS WASTE, SOLID, N.O.S., (CERAMIC OXIDE, ALUMINUM OXIDE), 9, NA3077, PG III					EPA D007 / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
a. ERG#154 (L,I,C,E) COPPER CLEANER/CHROMIC ACID
b. ERG#171 (S),(E) RCRA METAL & CERAMIC POWDER
c.
d.

K. Handling Codes for Wastes Listed Above
a. T
b. L
c.
d.

15. Special Handling Instructions and Additional Information
EMERGENCY PHONE #: (800) 483-3718
11a. CH180142 D008 D007 D009 11b. CH180135 RIDEPM07250 DECAL#

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
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GENERATOR — Printed/Typed Name | Signature | Mo. | Day | Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Mo. | Day | Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Mo. | Day | Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Mo. | Day | Year

COPY 8—Generator—Retained by Generator

CleanHarbors ENVIRONMENTAL SERVICES, INC.

Land Disposal Restriction Notification Form

Date: 01 / 06 / 2005

MANIFEST INFORMATION

Generator: Sulzer Metco US Inc
Address: 1101 Prospect Avenue
Westbury, NY 11590
EPA ID#: N Y D 1 3 1 3 1 8 6 5 1

Manifest No
NYG3893211
Sales Order No: D3904242
Manifest Document No:

LINE ITEM INFORMATION

Line Item:	Page No:	Profile No:	Treatability Group:	LDR Disposal Category:
11a	1	CH189142	NON- WASTEWATER	2 : This is subject to LDR.

EPA Waste Codes	EPA Waste Subcategory
D002	Corrosive Characteristic
D006	Toxicity characteristic for Cadmium
D007	Toxicity Characteristic for Chromium
D008	Toxicity Characteristic for Lead

Line Item:	Page No:	Profile No:	Treatability Group:	LDR Disposal Category:
11b	1	CH189108	NON- WASTEWATER	2 : This is subject to LDR.

EPA Waste Codes	EPA Waste Subcategory
D007	Toxicity Characteristic for Chromium

Certification

Applies to Manifest Line Items

Pursuant to 40 CFR 268.7(a), I hereby notify that this shipment contains waste restricted under 40 CFR Part 268. **11a 11b**

CleanHarbors
ENVIRONMENTAL SERVICES, INC.

Land Disposal Restriction Notification Form

Date: 01 / 06 / 2005

MANIFEST INFORMATION

Generator: Sulzer Metco US Inc
Address: 1101 Prospect Avenue
Westbury, NY 11590
EPA ID#: N Y D 1 3 1 3 1 8 6 5 1

Manifest No
NYG3893211
Sales Order No: D3904242
Manifest Document No:

Waste analysis data, where available, is attached

Signature: P. DiPietrantonio
Print Name: P. DiPietrantonio
Title: EH&S Spec.
Date: 1/7/05

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Required under authority of Part 111 and Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL.

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD131318651
Manifest Document No. 18245
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Sulzer Metco
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Phone (516) 338-2337

A. State Manifest Document Number MI 7018245
B. State Generator's ID Same

5. Transporter 1 Company Name
Bechem Transport, Inc.
6. US EPA ID Number CTD982191942
C. State Transporter's ID 311 29 010
D. Transporter's Phone 203-562-1280

7. Transporter 2 Company Name
BECHEM TRANSPORT, INC
8. US EPA ID Number CTD982191942
E. State Transporter's ID 00 274 COMB
F. Transporter's Phone 203-562-128

9. Designated Facility Name and Site Address
City Environmental, Inc.
1923 Frederick Street
Detroit, MI 48211
10. US EPA ID Number MID980991566
G. State Facility's ID
H. Facility's Phone 313-923-0080

GENERATOR

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, Hazardous Waste Liquids, N.O.S., (Lead)(D008) 9, NA3082, PG III ERG# 171	X	[illegible]	DM	[illegible]	P	D008
b. RQ, Hazardous Waste Liquids, N.O.S., (1,1,1 Trichloroethane, Lead)(F001,F002,D008,D007) 9, NA3082, PG III ERG# 171	X	[illegible]	DM	[illegible]	P	F001, F002 D007, D008
c.						
d.						

J. Additional Descriptions for Materials Listed Above
11a) 24853-H
11b) 24854-H

K. Handling Codes

15. Special Handling Instructions and Additional Information
Emergency Contact: Trade Winds 516-775-4000

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name [illegible] Signature [illegible] Date Month Day Year 08 08 08

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name [illegible] Signature [illegible] Date Month Day Year [illegible]

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name John Bajor Signature John Bajor Date Month Day Year 08 04 08

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name [illegible] Signature [illegible] Date Month Day Year

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM. IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (Rev. 9/88) GENERATOR COPY EQP 5110 Rev. 10/98

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Required under authority of Part 111 and Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL.

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD131318651
Manifest Document No.: 18245
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Sulzer Metco
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Phone (516) 338-2337

A. State Manifest Document Number: MI 7018245
B. State Generator's ID: Same

5. Transporter 1 Company Name: Bechem Transport, Inc.
6. US EPA ID Number: CTD982191942
C. State Transporter's ID: [illegible]
D. Transporter's Phone: 203-562-1260

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
City Environmental, Inc.
1923 Frederick Street
Detroit, MI 48211
10. US EPA ID Number: MID980991566
G. State Facility's ID
H. Facility's Phone: 313-923-0080

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER).	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, Hazardous Waste Liquids, N.O.S., (Lead)(D008) 9, NA3082, PG III ERG# 171	X	[illegible]	D M	[illegible]	P	D008
b. RQ, Hazardous Waste Liquids, N.O.S., (1,1,1 Trichloroethane, Lead)(F001,F002,D008,D007) 9, NA3082, PG III ERG# 171	X	[illegible]	D M	[illegible]	P	F001, F002 D007, D008
c.						
d.						

J. Additional Descriptions for Materials Listed Above
11a)
11b)

K. Handling Codes

15. Special Handling Instructions and Additional Information
Emergency Contact: Trade Winds 516-755-4000

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name: [illegible] Signature: [illegible] Date (Month Day Year): 01 30 98

17. Transporter 1 Acknowledgement of Receipt of Materials
~~Printed~~/Typed Name: [illegible] Signature: [illegible] Date (Month Day Year): [illegible]

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Signature: Date (Month Day Year):

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Signature: Date (Month Day Year):

GENERATOR

TRANSPORTER

FACILITY

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

EPA Form 8700-22 (Rev. 9/88)

EQP 5110 Rev. 10/96

GENERATOR COPY

SULZER METCO

October 21, 1998

Sulzer Metco (U.S.) Inc.
1101 Prospect Avenue
Westbury, NY 11590
Phone: (516) 334-1300
Fax: (516) 338-2296

NYSDEC
Division of Solid & Hazardous Materials
Bureau of Hazardous Waste Management
Data Management Section
50 Wolf Rd.
Albany, NY 12233-7251

Subject: manifest MIA7018245 shipped to City Environmental Inc.

To whom it may concern:

Enclosed please find a signed TSD copy of manifest MIA7018245 dated 08-12-98.

Thank you.

Michael S. Lydon
Environment, Health & Safety
Phone #: (516) 338-2337
FAX #: (516) 338-2336

FILE: 1021981.DOC

New York State Department of Environmental Conservation
Division of Solid & Hazardous Materials
Bureau of Hazardous Waste Management
Data Management Section
50 Wolf Road, Albany, New York 12233-7251
(518) 457-6858

John P. Cahill
Commissioner

METCO
1101 PROSPECT AVENUE
WESTBURY , NY 11590

OCTOBER 06, 1998

EPA ID NUMBER : NYD131318651
REFERENCE CODE NO.: 1

RE: MANIFEST DOCUMENT NUMBER MIA7018245
SHIPPED TO CITY ENVIRONMENTAL INC
SHIPPED ON 07/30/98

DEAR HAZARDOUS WASTE COORDINATOR:

OUR RECORDS INDICATE THAT WE HAVE NOT RECEIVED A COPY OF THE ABOVE REFERENCED MANIFEST SIGNED BY THE DISPOSAL FACILITY CONFIRMING DELIVERY OF THE HAZARDOUS WASTE SHIPMENT.

IF YOU, THE GENERATOR, HAVE NOT RECEIVED A COPY CONFIRMING DELIVERY, IMMEDIATELY FORWARD AN EXCEPTION REPORT TO THE DEPARTMENT EXPLAINING THE CURRENT DISPOSITION OF THIS HAZARDOUS WASTE SHIPMENT.

IF YOU HAVE RECEIVED YOUR CONFIRMATION COPY SIGNED BY THE DISPOSAL FACILITY, PLEASE FORWARD A LEGIBLE PHOTOCOPY, ALONG WITH A COPY OF THIS LETTER, TO THE ADDRESS LISTED BELOW.

TO AVOID FUTURE PROBLEMS IN THIS REGARD; PLEASE REQUEST THAT THE DISPOSAL FACILITY FORWARD THE APPROPRIATE COPY TO NEW YORK STATE DIRECTLY.

FOR FURTHUR INFORMATION PLEASE CONTACT A MEMBER OF MY STAFF AT (518) 457-6858.

NYS DEC - Division of Solid & Hazardous Materials
Data Management Section
50 Wolf Road, Room 472
Albany, N.Y. 12233-7251

Sincerely,

Robert P. McCarty, P.E.
Supervisor, Data Management Section
Bureau of Hazardous Waste Management
Division of Solid & Hazardous Materials

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Required under authority of Part 111 and Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL.

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD131318651
Manifest Document No.: 18245
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Sulzer Metco
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Phone (516) 338-2337

A. State Manifest Document Number: MI 7018245
B. State Generator's ID: Same

5. Transporter 1 Company Name: Bechem Transport, Inc.
6. US EPA ID Number: CTD982191942
C. State Transporter's ID: 3124MA
D. Transporter's Phone: 203-562-1280

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
City Environmental, Inc.
1923 Frederick Street
Detroit, MI 48211
10. US EPA ID Number: MID980991566
G. State Facility's ID:
H. Facility's Phone: 313-923-0080

	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER). HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X	RQ, Hazardous Waste ~~Liquids~~ SOLIDS, N.O.S., (Lead)(D008) 9, NA3082, PG III ERG# 171	XX4	D M	2400	P	D008
b.	X	RQ, Hazardous Waste Liquids, N.O.S., (1,1,1 Trichloroethane, Lead)(F001,F002,D008,D007) 9, NA3082, PG III ERG# 171	X27	D M	16200	P	F001, F002 D007, D008
c.							
d.							

J. Additional Descriptions for Materials Listed Above
11a)
11b)

K. Handling Codes

15. Special Handling Instructions and Additional Information
Emergency Contact: Trade Winds 516-755-4000

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR; if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Michael S. Lydon — Signature: [signature] — Date (Month Day Year): 07 30 98

TRANSPORTER — 17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name: James Coleman — Signature: [signature] — Date (Month Day Year): 07 30 98

18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name: — Signature: — Date (Month Day Year):

FACILITY — 19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: — Signature: — Date (Month Day Year):

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Sate of New York
Dept of Environmental Conservation
Div of Solid & Hazardous Mat'ls
Manifest Section
PO Box 12820
Albany, NY 12212

4a. Article Number

P341 833 730

4b. Service Type

☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: *(Print Name)*

6. Signature: *(Addressee or Agent)*

X

8. Addressee's Address *(Only if requested and fee is paid)*

Thank you for using Return Receipt Service.

PS Form **3811**, December 1994 102595-98-B-0229 Domestic Return Receipt

P 341 833 730

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail *(See reverse)*

Sent to	NYS Dept of Env. Conservation
Street & Number	PO Box 12820
Post Office, State, & ZIP Code	Albany, NY 12212
Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form **3800**, April 1995

Fold at line over top of envelope to the right of the return address

CERTIFIED

P 341 833 730

MAIL

P2SUL006800

P 341 833 731

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail *(See reverse)*

Sent to Waste Management Division	
Street & Number PO Box 30038	
Post Office, State, & ZIP Code Lansing, MI 48909-7538	
Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form **3800**, April 1995

Fold at line over top of envelope to the right of the return address

CERTIFIED

P 341 833 731

MAIL

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Waste Management Division
Michigan Dept of Environmental Quality
PO Box 30038
Lansing, MI 48909-7538

4a. Article Number
P341 833 731

4b. Service Type
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☒ Certified
☐ Insured
☐ COD

5. Received By: *(Print Name)*

6. Signature: *(Addressee or Agent)*
X

7. Date of Delivery

8. Addressee's Address *(Only if requested and fee is paid)*

PS Form **3811**, December 1994 102595-96-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

P2SUL006801

WASTE MANAGEMENT DIVISION
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Failure to file may subject you to criminal and/or civil penalties under Sections 324.11151 or 324.12116 MCL

Use print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD131318651
Manifest Document No.: 16245
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Sulzer Metco
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Phone (516) 338-2317

A. State Manifest Document Number: MI 7018245
B. State Generator's ID: None

5. Transporter 1 Company Name: Bechem Transport, Inc.
6. US EPA ID Number: CTD982191942
C. State Transporter's ID: 31124 MA
D. Transporter's Phone: 203-562-1280

7. Transporter 2 Company Name: BECHEM TRANSPORT, INC
US EPA ID Number: CTD982191942
E. State Transporter's ID: 002740 OMA
F. Transporter's Phone: 203-562-1280

9. Designated Facility Name and Site Address
City Environmental, Inc.
1923 Frederick Street
Detroit, MI 48211
10. US EPA ID Number: MID980991566
G. State Facility's ID
H. Facility's Phone: 313-923-0080

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID NUMBER).	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X RQ, Hazardous Waste Liquids, N.O.S., (Lead)(D008) 9, NA3082, PG III ERG# 171	XX4	DM	2400	P	D008
b.	X RQ, Hazardous Waste Liquids, N.O.S., (1,1,1 Trichloroethane, Lead)(F001,F002,D008,D007) 9, NA3082, PG III ERG# 171	X27	DM	16200	P	F001, F002 D007, D008
c.						
d.						

J. Additional Descriptions for Materials Listed Above
11a) 24853-H
11b) 24854-H

K. Handling Codes

15. Special Handling Instructions and Additional Information
Emergency Contact: Trade Winds 516-755-4000

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Murray S. Lydon
Signature
Date: Month Day Year 013098

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Sandy Coleman
Signature
Date: Month Day Year 013098

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Bajor
Signature
Date: Month Day Year 080498

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name
Signature
Date: Month Day Year 08/12/98

GENERATOR
TRANSPORTER
FACILITY

ALL SPILLS MUST BE REPORTED TO CENTER AT 1-800-424-8802 24 HOURS PER DAY.

CITY ENVIRONMENTAL, INC. 1923 FREDERICK STREET DETROIT, MICHIGAN 48221 (313) 923-0080
FAX: (313) 923-0217
SALES FAX: (313) 923-3375

Generator Name: SULZER METRO
Contact: ARTHUR BALDWIN
Address: 1101 PROSPECT AVENUE

City, State Zip: WESTBURY, NY 11690

Certificate of Disposal

This certificate is to verify that the waste received from:

Generator Name: SULZER METRO

Michigan Manifest: 7018245

Reference Manifest: N/A

Recieved On: August 12,1998

has been properly treated to meet all applicable local, state and federal standards at:

CITY ENVIRONMENTAL, FREDERICK
1923 FREDERICK
DETROIT, MI 48211

Don Roeser
FOR USE ON
C.O. DISPOSAL ONLY

Don Roeser

City Environmental, Inc
Plant Supervisor

CITY

Distribution box Soil WASTE

City Environmental, Inc.
1923 Frederick Street
Detroit, MI 48211
(313) 923-0080
(313) 923-0217 (FAX)

<NOTICE>

FROM GENERATOR FOR WASTES THAT DO NOT MEET LAND DISPOSAL TREATMENT STANDARDS

The wastes identified on manifest number M1701 8245 and bearing the EPA Hazardous Waste Number(s) D008 are subject to the land disposal restrictions of 40 CFR Part 268. The wastes do not meet the treatment standards specified in Part 268 Subpart D or do not meet the prohibitions specified in 268.32 or RCRA section 3004(d). The treatment standards or prohibition levels applicable to each waste are identified below:

(Check all boxes that apply.)

- ☐ This shipment includes F001 - F005 spent solvents, as identified on the attached sheet. (3)
- ☐ This shipment includes F039 multi-source leachate, as identified on the attached sheet(s). (4)
- ☐ This shipment includes D001 (5) and/or D002 (8) wastes prohibited under §268.37, as indentified below. (1)
- ☐ This shipment includes RCRA Section 3004(d) California list wastes, as identified on the attached sheet. (2)
- ☒ This shipment includes one or more TC metals D004-D011 identified below.
- ☐ This shipment includes one or more TC orgainics D012-D043 identified below. (1)

Hazardous Waste No.	Subcategory(6)	Treatability group (7)	CFR Reference for Treatment Standard	Five-letter code(s)
D008	—	NWW	268.43	—

(1) Must include form B (UTS)
(2) Must include form C (California list)
(3) Must include form D (F001-F005)
(4) Must include form E (F039)
(5) Subcategory for D001 referenced by letter A & B.
  (A) Ignitable wastes based on 40 CFR 261.21 (except for 261.21 (a) (1) high TOC subcategory), managed in Non-CWA / Non-CWA equivalent / Non Class 1 SDWA Systems. Less than 10% TOC.
  (B) Ignitable wastes based on 40 CFR 261.21 (except for 261.21 (a) (1) high TOC subcategory), managed in CWA / CWA equivalent / Class 1 SDWA Systems. Less than 10% TOC.
(6) Subcategory (if any) can be determined from 40 CFR 268, Subpart D.
(7) Treatability group is either "wastewater" or "nonwastewater".
(8) Subcategory for D002 is "Acid" or "Alkaline."

Authorized Signature

FORM A

Settling tank, soil waste

City Environmental, Inc.
1923 Frederick Street
Detroit, MI 48211
(313) 923-0080
(313) 923-0217 (FAX)

<NOTICE>

FROM GENERATOR FOR WASTES THAT DO NOT MEET LAND DISPOSAL TREATMENT STANDARDS

The wastes identified on manifest number M17018245 and bearing the EPA Hazardous Waste Number(s) F001, F002, D007, D008 subject to the land disposal restrictions of 40 CFR Part 268. The wastes do not meet the treatment standards specified in Part 268 Subpart D or do not meet the prohibitions specified in 268.32 or RCRA section 3004(d). The treatment standards or prohibition levels applicable to each waste are identified below:

(Check all boxes that apply.)

- [x] This shipment includes F001 - F005 spent solvents, as identified on the attached sheet. (3)
- [ ] This shipment includes F039 multi-source leachate, as identified on the attached sheet(s). (4)
- [ ] This shipment includes D001 (5) and/or D002 (8) wastes prohibited under §268.37, as indentified below. (1)
- [ ] This shipment includes RCRA Section 3004(d) California list wastes, as identified on the attached sheet. (2)
- [x] This shipment includes one or more TC metals D004-D011 identified below.
- [ ] This shipment includes one or more TC orgainics D012-D043 identified below. (1)

Hazardous Waste No.	Subcategory[6]	Treatability group [7]	CFR Reference for Treatment Standard	Five-letter code(s)
D007	—	NWW	268.43	
D008	—	NWW	268.43	
F001	—	NWW	268.43	
F002	—	NWW	268.43	

(1) Must include form B (UTS)
(2) Must include form C (California list)
(3) Must include form D (F001-F005)
(4) Must include form E (F039)
(5) Subcategory for D001 referenced by letter A & B.
  (A) Ignitable wastes based on 40 CFR 261.21 (except for 261.21 (a) (1) high TOC subcategory), managed in Non-CWA / Non-CWA equivalent / Non Class 1 SDWA Systems. Less than 10% TOC.
  (B) Ignitable wastes based on 40 CFR 261.21 (except for 261.21 (a) (1) high TOC subcategory), managed in CWA / CWA equivalent / Class 1 SDWA Systems. Less than 10% TOC.
(6) Subcategory (if any) can be determined from 40 CFR 268, Subpart D.
(7) Treatability group is either "wastewater" or "nonwastewater".
(8) Subcategory for D002 is "Acid" or "Alkaline."

Michael L. [illegible]
Authorized Signature

FORM A

TREATMENT STANDARDS FOR F001-F005 SPENT SOLVENTS

[Instructions: Check the box beside each waste included in the offsite shipment, circle or otherwise identify the individual constituents likely to be present in each waste.]

Hazardous waste description	Constituents of concern	Nonwastewater: Total composition, mg/kg	Nonwastewater: TCLP, mg/L	Wastewater, coomposition, mg/L
☒ F001 - Spent halogenated solvents used in degreasing	Carbon tetrachloride	6.0	—	0.057
	Methylene chloride	30	—	0.089
	Tetrachloroethylene	6.0	—	0.056
	1,1,1-Trichloroethane	6.0	—	0.054
	Trichloroethylene	6.0	—	0.054
	1,1,2-Trichloro-1,2,2-trifluoroethane[5]	30	—	0.057
	Trichloromonofluoromethane	30	—	0.02
☒ F002 - Spent halogenated solvents	Chlorobenzene	6.0	—	0.057
	o-Dichlorobenzene	6.0	—	0.088
	Methylene chloride	30	—	0.089
	Methylene chloride (wastewater from the pharmaceutical industry)	—		0.44
	Tetrachloroethylene	6.0	—	0.056
	1,1,1-Trichloroethane	6.0	—	0.054
	1,1,2-Trichloroethane	6.0		0.030
	Trichloroethylene	6.0	—	0.054
	1,1,2-Trichloro-1,2,2-trifluoroethane[5]	30	—	0.057
	Trichloromonofluoromethane	30	—	0.02
☐ F003 - Spent non-halogenated solvents	Acetone	160	—	0.28
	n-Butyl alcohol	2.6	—	5.6
	Cyclohexanone[4]		0.75	0.36[4]
	Ethyl acetate	33	—	0.34
	Ethyl benzene	10.0	—	0.057
	Ethyl ether	160	—	0.12
	Methanol[4]		0.75	5.6[4]
	Methyl isobutyl ketone	33	—	0.14
	Xylenes (total)	30	—	0.32
☐ F004 - Spent non-halogenated solvents	Cresol (m- and p-isomers)	5.6	—	0.77
	o-Cresol	5.6	—	0.11
	Nitrobenzene	14	—	0.068
	All Cresol mixed Isomers	11.2	—	0.88
☐ F005 - Spent non-halogenated solvents solvents	Benzene	10		0.14
	Carbon disulfide[4]		4.8	3.8
	2-Ethoxyethanol	Incineration[1]		Biological degradation or incineration[2]
	Isobutyl alcohol	170	—	5.6
	Methyl ethyl ketone	36	—	0.28
	2-Nitropropane	Incineration[1]		(Wet oxidation or chemical oxidation followed by carbon adsorption; or incineration[3])
	Pyridine	16	—	0.014
	Toluene	10	—	0.08

[1]Five-letter code is "INCIN"

[2]Five-letter codes are "BIODG; or INCIN".

[3]Five-letter codes are "(WETOX or CHOXD) fb CARBN; or INCIN".

[4]The treatment standards for carbon disulfide, cyclohexanone, and methanol nonwastewaters are based on the TCLP and apply only to spent solvents containing only one, two or all three of these constituents. If a waste contains any of these three constituents along with any of the other constituents found in F001-F005, then only the treatment standards for the other constituents apply (i.e., the standards for carbon disulfide, cyclohexanone, and methanol do not apply when other constituents are present). It appears that EPA made a technical error when it modified Tables CCW and CCWE in the August 18, 1992 final rule, because wastewater standards for these three constituents do not appear in either table. In the preamble to that rule, EPA indicates that the wastewater standards are 0.014 mg/L for carbon disulfide, 0.35 mg/L for cyclohexanone, and 5.6 mg/L for methanol. (57 FR 37205)

[5]The constituent of concern given here is believed to be correct. Although the August 18, 1992 final rule identifies the constituent as 1,1,2-trichloro-1,2,2trifluoromethane, historically the constituent has always been identified as 1,1,2-trichloro-1,2,2-trifluoroethane.

FORM D

Rate 182: Voluntary Large Residential Service with Multiple Rate Periods

Available as an option to customers who use, or are expected to use, more than 39,000 kilowatt hours (kWh) annually or 12,600 kWh for the months of June through September. Customers on this rate are billed on a meter that records usage during peak and off-peak hours. *This rate is available only to qualifying customers who are considered space heating.*

Rate: (per meter)	*June 1 through Sept. 30*	*Oct. 1 through May 31*
Service Charge: (per day)	$.9150	$.9150
OFF-PEAK	**Period 1**	**Period 2**
8 PM to 10 AM and Saturday and Sunday		
First 125 kWh	$.0997	$.0997
Excess 125 kWh	$.0997	$.0847
PEAK	**Period 3**	**Period 4**
10 AM to 8 PM Weekdays		
First 125 kWh	$.0997	$.0997
Excess 125 kWh	$.1634	$.0847

Minimum Charge: Is the Service Charge per meter, per month.

Term: Terminable by the customer upon five days written notice or by LIPA in the manner provided by its tariff. Customers may switch to another service classification for which they qualify on their annual anniversary date, provided they request the transfer in writing at least 30 days in advance.

Rate 188: Voluntary Residential Service with Multiple Rate Periods

An optional "off-peak pricing" rate for customers whose usage does not qualify for Rate 184, 181 or 182. Customers on this rate are billed on a meter that records usage during peak and off-peak hours.

Rate: (per meter)	*June 1 through Sept. 30*	*Oct. 1 through May 31*
Service Charge: (per day)	$.1790	$.1790
Meter Charge: (per day)	$.0900	$.0900
OFF-PEAK (Energy Charge: per kWh)	**Period 1**	**Period 2**
8 PM to 10 AM and Saturday and Sunday	$.0970	$.0829
PEAK (Energy Charge: per kWh)	**Period 3**	**Period 4**
10 AM to 8 PM Weekdays	$.3127	$.1280

Minimum Charge: The minimum charge is $13.81 per meter, per month, exclusive of Fuel Adjustment and Increase in Rates and Charges.

Term: One year and thereafter unless terminated on subsequent anniversary dates by the customer upon five days written notice to LIPA. Service will not be restored at the same location to the same customer within one year after termination.

LABEL #1

In Case of Fire:
Extinguishing Media: Use National Fire Protection Association (NFPA) Class B extinguishers (carbon dioxide, dry chemical or foam) designed to extinguish NFPA Class 1B flammable liquid fires.
Unusual Fire and Explosion Hazards: Keep containers tightly closed. Isolate from heat, electrical equipment, sparks and open flames, or other sources of ignition. Closed containers may explode if exposed to extreme heat. Do not apply to hot surfaces.
Special Fire Fighting Procedures: Water spray may be ineffective. Water may be used to cool containers to prevent pressure buildup and possible auto-ignition or explosion when exposed to extreme heat. If water is used, fog nozzles are preferable.

In Case of Spill or Leak:
Remove all sources of ignition (flames, hot surfaces, electrical static or frictional sparks). Avoid breathing vapors. Ventilate area. Remove with inert absorbent and non-sparking tools. IMPORTANT: Hazardous product residue may be present after contents have been removed. Do not reuse empty package without commercial cleaning or reconditioning.

Special Protection Information:
Adequate local/general ventilation should be provided when using this product. Appropriate respiratory, skin, eye and hand protection should be utilized when using this product.

Special Precautions:
Precautions to be Taken in Handling and Storing: Do not store above 120°F.
Other Precautions: Do not take internally. Containers should be grounded when pouring. Avoid free fall of liquid in excess of a few inches.
DO NOT FLAME CUT, BRAZE OR WELD EMPTY CONTAINERS. KEEP CONTAINERS CLOSED WHEN NOT IN USE.
Waste Disposal Method: Dispose of in accordance with local, State and Federal regulations.

USING THE NATIONAL PAINT AND COATINGS ASSOCIATION'S HAZARDOUS MATERIALS IDENTIFICATION SYSTEM, THIS PRODUCT'S HAZARD CLASSIFICATION IS:

HEALTH**	3
**Note: If an asterisk is present, see section 2 and 8 of the MSDS for further information.	
FLAMMABILITY	3
REACTIVITY	0
PERSONAL PROTECTION	See the MSDS for proper personal protective equipment.

Flash Point: 36°F

WARNING: This product contains a chemical known to the STATE OF CALIFORNIA to cause cancer and/or reproductive harm.

INVOICE

REMIT TO:
Clean Harbors Env. Services
PO Box 3442
Boston, MA 02241-3442

OFFICE:
Clean Harbors Env Services Inc
3 Sutton Place
Edison, NJ 08817- 0000
(732) 248-1997

If you have any questions regarding this invoice, please contact your customer service representative at the telephone number listed above

SOLD TO:
Alfonso Rolli
Sulzer Metco US Inc
Attn: Accounts Payable
1101 Prospect Avenue
Westbury,NY 11590

JOB SITE/GENERATOR:
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury,NY 11590

Job Description: DS-CH82414,METAL/CERAMIC POWDER & 90% WAT VIA CHES TO LANCAS

**** Payable in USD funds ****

Job Date	Invoice No	Customer	Sales Order	Purchase Order	Terms
18 Apr 2008	MS0814396	SUL025	MS1873976	ALFONSO ROLLI	NET 15 DAYS

SUMMARY BY LINE TYPE

Disposal	$1,785.00	
Transportation	$1,400.00	
SUBTOTAL	**$3,185.00**	**USD**
TAX	**0.00**	
INVOICE TOTAL	**$3,185.00**	**USD**

Manifest Info	Item ID	Description	Billing Qty	Billing UOM	Unit Price	Amount
		18 Apr 2008				
BOL229832 A	DISPSL / B26B	METAL/CERAMIC POWDER & 90% WATER DS-CH82414	2,380.000	GAL	0.7500	$1,785.00
BOL229832	TRAN	TRANSPORTATION	1.000	EA	1,400.0000	$1,400.00
					SUBTOTAL	**$3,185.00**
					TAX	**$0.00**
					TOTAL	**$3,185.00**

3000405

SULZER METCO (US) INC.
MAY 09 2008
EHS DEPARTMENT

PLEASE RETURN A COPY OF INVOICE WITH PAYMENT - THANK YOU

NYC 560754-0

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4/97)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Document No.

2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number NYC 560754-0

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. | c.

b. | d.

K. Handling Codes for Wastes Listed Above

a. | c.

b. | d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR**, if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford

Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

COPY 5-Generator-Mailed by TSD facility

P2SUL007914

NYC 560754 0

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4/97)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Document No.

2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number: NYC 560754 0

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. | c.

b. | d.

K. Handling Codes for Wastes Listed Above

a. | c.

b. | d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR,** if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

COPY 8-Generator-retained by generator

P2SUL007915

K04214-R5732 SAFETY-KLEEN 04/05/99 PAGE: 1
LOCATION: A11A36 LAND DISPOSAL RESTRICTION NOTICE 19:26:15

TO: SAFETY-KLEEN SYSTEMS, INC. EPA ID NO. NYD000708198
80 SEARD (DESIGNATED FACILITY)
NO AMITYVILLE, NY 11701

UNDER MANIFEST/SALES SERVICE NUMBER (N/C 560754-0) THE SUBSTANCES NOTED BELOW IS SHIPPING TO YOU WASTE RESTRICTED TO BE RESTRICTED UNDER 40 CFR PART 268. IN ACCORDANCE WITH 40 CFR PART 268.7, THE GENERATOR HEREBY PROVIDES NOTICE THAT THE WASTE IS RESTRICTED FROM LAND DISPOSAL. A COPY OF THIS FORM MUST BE KEPT BY THE GENERATOR FOR FIVE (5) YEARS FROM THE DATE OF WASTE SHIPMENT.

LDR FORM LINE NO.: 1 % PROFILE NO.: 000

WASTE NAME: SOLVENT 105 LOC: SKDUT#: 0000704
HAZARDOUS WASTE CODES: D001 D018 D039 D040

TREATABILITY GROUP: NONWASTEWATERS

EPA WASTE CODE	WASTE DESCRIPTION AND TREATMENT/REGULATORY SUBCATEGORY OR REGULATED HAZARDOUS CONSTITUENT	TREATMENT STANDARD (*) CONCENTRATION OR TECHNOLOGY CODE
D001	HIGH TOC IGNITABLE CHARACTERISTIC WASTE	POROUS OR SUBST **
D018	BENZENE	10 MG/KG ****
D039	TETRACHLOROETHYLENE	6.0 MG/KG ****
D040	TRICHLOROETHYLENE	5.0 MG/KG ****

LDR FORM LINE NO.: 2 % PROFILE NO.: 000

WASTE NAME: SOLVENT 105 LOC: SKDUT#: 0000704
HAZARDOUS WASTE CODES: D001 D018 D039 D040

TREATABILITY GROUP: NONWASTEWATERS

EPA WASTE CODE	WASTE DESCRIPTION AND TREATMENT/REGULATORY SUBCATEGORY OR REGULATED HAZARDOUS CONSTITUENT	TREATMENT STANDARD (*) CONCENTRATION OR TECHNOLOGY CODE
D001	HIGH TOC IGNITABLE CHARACTERISTIC WASTE	POROUS OR SUBST **
D018	BENZENE	10 MG/KG ****
D039	TETRACHLOROETHYLENE	6.0 MG/KG ****
D040	TRICHLOROETHYLENE	5.0 MG/KG ****

NOTES

THE CONSTITUENT COMPOSITION IS BASED ON KNOWLEDGE OF THE WASTE (VIA MATERIAL SAFETY DATA SHEETS FOR THE CHEMICAL(S) USED, AND THE PROCESS WHICH CREATED THE WASTE).

NOTES: * THESE TREATMENT STANDARDS DO NOT PRECLUDE DILUTION PRIOR TO FINAL DISPOSITION.
** NEW TREATMENT STANDARDS UNDER FEDERAL RULES EFFECTIVE 12-17-94.
*** TREATMENT STANDARDS APPLICABLE IN VACATED STATES AND NOT UNIVERSAL TREATMENT STANDARDS.
**** NEW TREATMENT STANDARDS UNDER FEDERAL RULES EFFECTIVE 7-8-96.
***** NEW TREATMENT STANDARDS UNDER FEDERAL RULES EFFECTIVE 8-24-98.

UHC NOTICE: GENERATOR IS NOT REQUIRED TO LIST UNCLASSIFIED CONSTITUENTS WHEN TREATED MONITORS FOR ALL REGULATED CONSTITUENTS PRIOR TO DISPOSAL.

EXP NOTICE: THIS FORM EXPIRES ON 12/31/99.

GENERATOR NAME: SULZER METCO INC EPA ID. NYD131319651

SEQ#: 3027 LOC: A11D08 CUST: 2-119-03-4047 PLN: 5A DSPS. 144253 SW: 9917

TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFER

Z 566 133 310

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail *(See reverse)*

Sent to Division of Solid & Haz. Waste	
Street & Number Manifest Section PO BOX 12820	
Post Office, State, & ZIP Code Albany NY 12212	
Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form **3800**, April 1995

Fold at line over top of envelope to the right of the return address

CERTIFIED

Z 566 133 310

MAIL

Thank you for using Return Receipt Service.

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
Division of Solid & Haz Waste
Manifest Section
P.O. BOX 12820
Albany, NY 12212

4a. Article Number
P 566 133 310

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: *(Print Name)*

6. Signature: *(Addressee or Agent)*
X

8. Addressee's Address *(Only if requested and fee is paid)*

PS Form **3811**, December 1994 102595-94-B-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

P2SUL007917

Form Approved OMB No.: 2070-0093

Approval Expires: 01/94

(Important: Type or print; read instructions before completing form.)

EPA U.S. Environmental Protection Agency

TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

Public reporting burden for this collection of information is estimated to vary from 30 to 34 hours per response with an average of 32 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Chief, Information Policy Branch (PM-223), US EPA, 401 M St., SW, Washington, D.C. 20460 Attn: TRI Burden and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (2070-0093), Washington, D.C. 20503.

EPA FORM R

PART I. FACILITY IDENTIFICATION INFORMATION

(This space for your optional use.)

1.	1.1 Are you claiming the chemical identity on page 3 trade secret? [ ] Yes (Answer question 1.2; Attach substantiation forms.) [X] No (Do not answer 1.2; Go to question 1.3.)	1.2 If "Yes" in 1.1, is this copy: [ ] Sanitized [ ] Unsanitized	1.3 Reporting Year 19 90

2. CERTIFICATION (Read and sign after completing all sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official: Patrick A. Tighe Superintendent, Facilities Coordination

Signature: Patrick A. Tighe

Date signed:

3. FACILITY IDENTIFICATION

3.1	Facility or Establishment Name: Metco Division Perkin-Elmer Corporation	
	Street Address: 1101 Prospect Avenue	
	City: Westbury	County: Nassau
	State: New York	Zip Code: 11590
	TRI Facility Identification Number: 11590PRKNL1101P	

WHERE TO SEND COMPLETED FORMS:

1. EPCRA REPORTING CENTER
   P.O. BOX 23779
   WASHINGTON, DC 20026-3779
   ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix G)

3.2	This report contains information for (Check only one): a. [ ] An entire facility b. [X] Part of a facility.	
3.3	Technical Contact: Patrick A. Tighe	Telephone Number (include area code): (516) 334-1300 Ext. 495
3.4	Public Contact: Same as 3.3	Telephone Number (include area code): (516) 334-1300 Ext. 495

3.5	a.	b.	c.	d.	e.	f.
SIC Code (4 digit)	3542					

3.6	Latitude			Longitude		
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
	075	09	50	027	53	16

3.7	Dun & Bradstreet Number(s) a. 05-773-1663	b.
3.8	EPA Identification Number(s) (RCRA I.D. No.) a. NYD131318651	b.
3.9	NPDES Permit Number(s) a.	b.
3.10	Receiving Streams or Water Bodies (enter one name per box) a. N/A	b.
	c.	d.
	e.	f.
3.11	Underground Injection Well Code (UIC) Identification Number(s) a. N/A	b.

4. PARENT COMPANY INFORMATION

4.1	Name of Parent Company: Perkin-Elmer Corporation	4.2	Parent Company's Dun & Bradstreet Number: 00-118-4480

(Important: Type or print; read instructions before completing form.)

EPA

EPA FORM R
PART II. OFF-SITE LOCATIONS TO WHICH TOXIC CHEMICALS ARE TRANSFERRED IN WASTES

(This space for your optional use.)

1. PUBLICLY OWNED TREATMENT WORKS (POTWs)

1.1 POTW name		1.2 POTW name	
N/A			
Street Address		Street Address	
City	County	City	County
State	Zip	State	Zip

2. OTHER OFF-SITE LOCATIONS (DO NOT REPORT LOCATIONS TO WHICH WASTES ARE SENT ONLY FOR RECYCLING OR REUSE).

2.1 Off-site location name		2.2 Off-site location name	
N/A			
EPA Identification Number (RCRA ID. No.)		EPA Identification Number (RCRA ID. No.)	
Street Address		Street Address	
City	County	City	County
State	Zip	State	Zip
Is location under control of reporting facility or parent company? [ ] Yes [ ] No		Is location under control of reporting facility or parent company? [ ] Yes [ ] No	

2.3 Off-site location name		2.4 Off-site location name	
EPA Identification Number (RCRA ID. No.)		EPA Identification Number (RCRA ID. No.)	
Street Address		Street Address	
City	County	City	County
State	Zip	State	Zip
Is location under control of reporting facility or parent company? [ ] Yes [ ] No		Is location under control of reporting facility or parent company? [ ] Yes [ ] No	

2.5 Off-site location name		2.6 Off-site location name	
EPA Identification Number (RCRA ID. No.)		EPA Identification Number (RCRA ID. No.)	
Street Address		Street Address	
City	County	City	County
State	Zip	State	Zip
Is location under control of reporting facility or parent company? [ ] Yes [ ] No		Is location under control of reporting facility or parent company? [ ] Yes [ ] No	

[ ] Check if additional pages of Part II are attached. How many? _____

(Important: Type or print; read instructions before completing form.)

EPA

EPA FORM R
PART III. CHEMICAL-SPECIFIC INFORMATION

(This space for your optional use.)

1. CHEMICAL IDENTITY (Do not complete this section if you complete Section 2.)

1.1	[Reserved]
1.2	CAS Number (Enter only one number exactly as it appears on the 313 list. Enter NA if reporting a chemical category.) 7440-02-5
1.3	Chemical or Chemical Category Name (Enter only one name exactly as it appears on the 313 list.) Nickel Powder
1.4	Generic Chemical Name (Complete only if Part I, Section 1.1 is checked "Yes." Generic name must be structurally descriptive.)

2. MIXTURE COMPONENT IDENTITY (Do not complete this section if you complete Section 1.)

Generic Chemical Name Provided by Supplier (Limit the name to a maximum of 70 characters (e.g., numbers, letters, spaces, punctuation).)

3. ACTIVITIES AND USES OF THE CHEMICAL AT THE FACILITY (Check all that apply.)

3.1	Manufacture the chemical:	a. [ ] Produce b. [ ] Import	If produce or import: c. [ ] For on-site use/processing e. [ ] As a byproduct	d. [ ] For sale/distribution f. [ ] As an impurity
3.2	Process the chemical:	a. [ ] As a reactant d. [ ] Repackaging only	b. [ ] As a formulation component	c. [ ] As an article component
3.3	Otherwise use the chemical:	a. [ ] As a chemical processing aid	b. [ ] As a manufacturing aid	c. [X] Ancillary or other use

4. MAXIMUM AMOUNT OF THE CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

[0|4] (enter code)

5. RELEASES OF THE CHEMICAL TO THE ENVIRONMENT ON-SITE

You may report releases of less than 1,000 pounds by checking ranges under A.1. (Do not use both A.1 and A.2)			A. Total Release (pounds/year) A.1 Reporting Ranges 1-10	11-499	500-999	A.2 Enter Estimate	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1 Fugitive or non-point air emissions		5.1a	[ ]	[ ]	[ ]	NA	5.1b [ ]	
5.2 Stack or point air emissions		5.2a	[ ]	[ ]	[ ]	NA	5.2b [ ]	
5.3 Discharges to receiving streams or water bodies (Enter letter code from Part I Section 3.10 for stream(s) in the box provided.)	5.3.1 [ ]	5.3.1a	[ ]	[ ]	[ ]	NA	5.3.1b [ ]	5.3.1c %
	5.3.2 [ ]	5.3.2a	[ ]	[ ]	[ ]	NA	5.3.2b [ ]	5.3.2c %
	5.3.3 [ ]	5.3.3a	[ ]	[ ]	[ ]	NA	5.3.3b [ ]	5.3.3c %
5.4 Underground injection		5.4a	[ ]	[ ]	[ ]	NA	5.4b [ ]	
5.5 Releases to land								
5.5.1 On-site landfill		5.5.1a	[ ]	[ ]	[ ]	NA	5.5.1b [ ]	
5.5.2 Land treatment/application farming		5.5.2a	[ ]	[ ]	[ ]	NA	5.5.2b [ ]	
5.5.3 Surface impoundment		5.5.3a	[ ]	[ ]	[ ]	NA	5.5.3b [ ]	
5.5.4 Other disposal		5.5.4a	[ ]	[ ]	[ ]	NA	5.5.4b [ ]	

[ ] (Check if additional information is provided on Part IV-Supplemental Information.)

EPA

EPA FORM R

PART III. CHEMICAL-SPECIFIC INFORMATION (continued)

(This space for your optional use.)

6. TRANSFERS OF THE CHEMICAL IN WASTE TO OFF-SITE LOCATIONS

You may report transfers of less than 1,000 pounds by checking ranges under A.1. (Do not use both A.1 and A.2)	A. Total Transfers (pounds/yr) A.1 Reporting Ranges 1-10	11-499	500-999	A.2 Enter Estimate	B. Basis of Estimate (enter code)	C. Type of Treatment/ Disposal (enter code)
6.1.1 Discharge to POTW (enter location number from Part II, Section 1.) 1 .	[ ]	[ ]	[ ]	NA	6.1.1b	
6.2.1 Other off-site location (enter location number from Part II, Section 2.) 2 .	[ ]	[ ]	[ ]	NA	6.2.1b	6.2.1c M
6.2.2 Other off-site location (enter location number from Part II, Section 2.) 2 .	[ ]	[ ]	[ ]	NA	6.2.2b	6.2.2c M
6.2.3 Other off-site location (enter location number from Part II, Section 2.) 2 .	[ ]	[ ]	[ ]	NA	6.2.3b	6.2.3c M

[ ] (Check if additional information is provided on Part IV-Supplemental Information.)

7. WASTE TREATMENT METHODS AND EFFICIENCY

NA Not Applicabl;e (NA) - Check if no on-site treatment is applied to any waste stream containing the chemical or chemical catagory

A. General Wastestream (enter code)	B. Treatment Method (enter code)	C. Range of Influent Concentration (enter code)	D. Sequential Treatment? (check if applicable)	E. Treatment Efficiency Estimate	F. Based on Operating Data? Yes	No
7.1a	7.1b	7.1c	7.1d [ ]	7.1e %	7.1f [ ]	[ ]
7.2a	7.2b	7.2c	7.2d [ ]	7.2e %	7.2f [ ]	[ ]
7.3a	7.3b	7.3c	7.3d [ ]	7.3e %	7.3f [ ]	[ ]
7.4a	7.4b	7.4c	7.4d [ ]	7.4e %	7.4f [ ]	[ ]
7.5a	7.5b	7.5c	7.5d [ ]	7.5e %	7.5f [ ]	[ ]
7.6a	7.6b	7.6c	7.6d [ ]	7.6e %	7.6f [ ]	[ ]
7.7a	7.7b	7.7c	7.7d [ ]	7.7e %	7.7f [ ]	[ ]
7.8a	7.8b	7.8c	7.8d [ ]	7.8e %	7.8f [ ]	[ ]
7.9a	7.9b	7.9c	7.9d [ ]	7.9e %	7.9f [ ]	[ ]
7.10a	7.10b	7.10c	7.10d [ ]	7.10e %	7.10f [ ]	[ ]

[ ] (Check if additional information is provided on Part IV-Supplemental Information.)

8. POLLUTION PREVENTION: OPTIONAL INFORMATION ON WASTE MINIMIZATION

(Indicate actions taken to reduce the amount of the chemical being released from the facility. See the instructions for coded items and an explanation of what information to include.)

A. Type of Modification (enter code)	B. Quantity of the Chemical in Wastes Prior to Treatment or Disposal: Current reporting year (pounds/year)	Prior year (pounds/year)	Or percent change (Check (+) or (-))	C. Index	D. Reason for Action (enter code)
M 7			+ - %	.	R

(Important: Type or print; read instructions before completing form.)

EPA

EPA FORM R
PART IV. SUPPLEMENTAL INFORMATION

Use this section if you need additional space for answers to questions in Part III. Number the lines used sequentially from lines in prior sections (e.g., 5.3.4, 6.1.2, 7.11)

(This space for your optional use.)

ADDITIONAL INFORMATION ON RELEASES OF THE CHEMICAL TO THE ENVIRONMENT ON-SITE (Part III, Section 5.3)

You may report releases of less than 1,000 pounds by checking ranges under A.1. (Do not use both A.1 and A.2)			A. Total Release (pounds/yr) A.1 Reporting Ranges 1-10	11-499	500-999	A.2 Enter Estimate	B. Basis of Estimate (enter code in box provided)	C.% From Stormwater
5.3 Discharges to receiving streams or water bodies	5.3.___	5.3.___a	[ ]	[ ]	[ ]		5.3.___b	5.3.___c %
(Enter letter code from Part I Section 3.10 for stream(s) in the box provided.)	5.3.___	5.3.___a	[ ]	[ ]	[ ]		5.3.___b	5.3.___c %
	5.3.___	5.3.___a	[ ]	[ ]	[ ]		5.3.___b	5.3.___c %

ADDITIONAL INFORMATION ON TRANSFERS OF THE CHEMICAL IN WASTE TO OFF-SITE LOCATIONS (Part III, Section 6)

You may report transfers of less than 1,000 pounds by checking ranges under A.1. (Do not use both A.1 and A.2)	A. Total Transfers (pounds/yr) A.1 Reporting Ranges 1-10	11-499	500-999	A.2 Enter Estimate	B. Basis of Estimate (enter code in box provided)	C. Type of Treatment/ Disposal (enter code in box provided)
6.1.___ Discharge to POTW (enter location number from Part II, Section 1.) 1	[ ]	[ ]	[ ]		6.1.___b	
6.2.___ Other off-site location (enter location number from Part II, Section 2.) 2	[ ]	[ ]	[ ]		6.2.___b	6.2.___c M
6.2.___ Other off-site location (enter location number from Part II, Section 2.) 2	[ ]	[ ]	[ ]		6.2.___b	6.2.___c M
6.2.___ Other off-site location (enter location number from Part II, Section 2.) 2	[ ]	[ ]	[ ]		6.2.___b	6.2.___c M

ADDITIONAL INFORMATION ON WASTE TREATMENT METHODS AND EFFICIENCY (Part III, Section 7)

A. General Wastestream (enter code in box provided)	B. Treatment Method (enter code in box provided)	C. Range of Influent Concentration (enter code)	D. Sequential Treatment? (check if applicable)	E. Treatment Efficiency Estimate	F. Based on Operating Data? Yes	No
7.___a	7.___b	7.___c	7.___d [ ]	7.___e %	7.___f [ ]	[ ]
7.___a	7.___b	7.___c	7.___d [ ]	7.___e %	7.___f [ ]	[ ]
7.___a	7.___b	7.___c	7.___d [ ]	7.___e %	7.___f [ ]	[ ]
7.___a	7.___b	7.___c	7.___d [ ]	7.___e %	7.___f [ ]	[ ]
7.___a	7.___b	7.___c	7.___d [ ]	7.___e %	7.___f [ ]	[ ]
7.___a	7.___b	7.___c	7.___d [ ]	7.___e %	7.___f [ ]	[ ]
7.___a	7.___b	7.___c	7.___d [ ]	7.___e %	7.___f [ ]	[ ]
7.___a	7.___b	7.___c	7.___d [ ]	7.___e %	7.___f [ ]	[ ]
7.___a	7.___b	7.___c	7.___d [ ]	7.___e %	7.___f [ ]	[ ]

NYG 2545488

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple

(Hazardous Waste Manifest 1/5/99)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD131318651
Manifest Doc. No.: 45486
2. Page 1 of: 1
Information within heavy bold line is not required by Federal Law.

3. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Telephone Number (516) 338-2337

A. NYG 2545488
B. Generator's ID: SAME

5. Transporter 1 (Company Name): Clean Harbors Env Services Inc
6. US EPA ID Number: MAD983922225
C. State Transporter's ID
D. Transporter's Telephone (781) 849-1800

7. Transporter 2 (Company Name)
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4879 Spring Grove Avenue
Cincinnati, OH 45232
10. US EPA ID Number: OHD000816629
G. State Facility ID
H. Facility Telephone (513) 681-5738

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
HAZARDOUS WASTE SOLID, N.O.S. (CHROMIUM), 9, NA3077, III	002	DM	0200	P	EPA D007
					STATE
NON DOT REGULATED MATERIAL , NON DOT HAZARDOUS, NONE	004	DM	0800	P	EPA NONE
					STATE
c					EPA
					STATE
d.					EPA
					STATE

J. Additional Descriptions for Materials listed Above
a (S),(E),(ERG#:171)
b (S)
c
d

K. Handling Codes for Wastes Listed Above
a
b
c
d

15. Special Handling Instructions and Additional Information
11a CH189188 4x55 Drum-B
11b CH189187 4x55
IN EMERGENCY, CALL CHES 1-800-645-8265
wo# D3336544

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name | Signature | Mo. 06 Day 23 Year 01

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Lewson Miner | Signature | Mo. 06 Day 23 Year 01
18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Mo. Day Year

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

COPY 5—Generator—Mailed by TSD Facility

P2SOL008440

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST
(Continuation Sheet)

21. Generator's US EPA ID No.: NYD131318651

Manifest Document No.: 45488

22. Page: 2/2

Information in the shaded areas is not required by Federal law.

23. Generator's Name: SULZER METCO US INC, 1101 PROSPECT AVE, WESTBURY, NY 11590

L. State Manifest Document Number

M. State Generator's ID

24. Transporter 5 Company Name: CLEAN HARBORS ENV. SERVICES, INC

25. US EPA ID Number: MAD039322250

N. State Transporter's ID

O. Transporter's Phone

26. Transporter ___ Company Name

27. US EPA ID Number

P. State Transporter's ID

Q. Transporter's Phone

	28. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*	HM	29. Containers No.	Type	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
a.	FTPO						
b.							
c.							
d.							
e.							
f.							
g.							
h.							
i.							

S. Additional Descriptions for Materials Listed Above

T. Handling Codes for Wastes Listed Above

32. Special Handling Instructions and Additional Information

GENERATOR

TRANSPORTER

33. Transporter 5 Acknowledgement of Receipt of Materials

Printed/Typed Name: GARY D. BAZELL

Signature: Gary D Bazell

Date: Month 07 Day 26 Year 01

34. Transporter ___ Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date: Month Day Year

FACILITY

35. Discrepancy Indication Space

Style F16 LABELMASTER® (800) 621-5808 www.labelmaster.com

EPA Form 8700-22A (Rev. 9-88) Previous editions are obsolete.

PRINTED ON RECYCLED PAPER USING SOYBEAN INK PRINTED WITH SOY INK

ORIGINAL — RETURN TO GENERATOR

NYG 2545488

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple

(Hazardous Waste Manifest 1/5/99)

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD 1 3 1 8 2 6 5 1

Manifest Doc. No.

2. Page 1 of 1

Information within heavy bold line is not required by Federal Law.

3. Generator's Name and Mailing Address
Sulzer Metco US Inc
1181 Prospect Avenue
Westbury, NY 11590
516 338-2337

4. Generator's Telephone Number ( )

A. NYG 2545488

B. Generator's ID SAME

5. Transporter 1 (Company Name) Clean Harbors Env Services Inc

6. US EPA ID Number MAD 9 9 3 3 2 2 5

C. State Transporter's ID

D. Transporter's Telephone (781) 849-1882

7. Transporter 2 (Company Name)

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4876 Spring Grove Avenue
Cincinnati, OH 45232

10. US EPA ID Number OHD 0 0 9 8 1 6 6 2 9

G. State Facility ID

H. Facility Telephone (513 681-4738)

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
HAZARDOUS WASTE SOLID, N.O.S. (CHROMIUM), 9, NA9177, III					EPA D007
					STATE
~~NON DOT REGULATED MATERIAL, NON DOT HAZARDOUS, NONE~~	1	DM			EPA ~~NONE~~
					STATE
c					EPA
					STATE
d.					EPA
					STATE

J. Additional Descriptions for Materials listed Above
a (S), (E), (ERG#: 171)
b (S)
c
d

K. Handling Codes for Wastes Listed Above
a
b
c
d

15. Special Handling Instructions and Additional Information
11a CH189186
11b CH189187
IN EMERGENCY, CALL CHEM 1-800-617-8265
and DISPATCH

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name | Signature | Mo. | Day | Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Mo. | Day | Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Mo. | Day | Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name | Signature | Mo. | Day | Year

P2SUL008442

COPY 8 - Generator - Retained by Generator

CLEAN HARBORS ENVIRONMENTAL SERVICES, INC.
LAND DISPOSAL RESTRICTION NOTIFICATION FORM LDR-1 Manifest No. NYG2545488

THE HAZARDOUS WASTES IDENTIFIED ON THE HAZARDOUS WASTE MANIFEST IDENTIFIED ABOVE AND BEARING THE EPA HAZARDOUS WASTE CODES LISTED BELOW ARE RESTRICTED WASTES WHICH ARE PROHIBITED FROM LAND DISPOSAL WITHOUT FURTHER TREATMENT UNDER THE LAND DISPOSAL RESTRICTIONS, 40 CFR PART 268 AND RCRA SECTION 3004(D). IN ACCORDANCE WITH 40 CFR 268.7(a)(2), THE EPA WASTE CODE, WASTE SUBCATEGORY, AND TREATABILITY GROUPS, AS APPLICABLE, ARE INCLUDED BELOW.

INSTRUCTIONS -- COMPLETE ALL SECTIONS. REFER TO PAGE 3 OF THIS FORM FOR KEY TERMS/DEFINITIONS.
Column 1 - Line Item: Enter the manifest line item number (e.g., 11a) that corresponds to the waste code(s).
Column 2 - Waste Codes/Subcategory: Check off all applicable waste codes. For D001 through D043, also check applicable subcategory; for F001 through F005, check applicable constituents.
Column 3 - Wastewater/Non-wastewater: Check off "WW" for wastewater and "Non-WW" for non-wastewaters.
Column 4 - LDR Handling Code: Circle the appropriate handling code, as follows:

1 = The waste is a characteristic hazardous waste D001, D002, D003, D004-D011, or D018-43 which is intended for treatment/disposal in a CWA system, CWA-equivalent system, or Class I SDWA system. Underlying Hazardous Constituents (UHC's) are NOT required to be identified.

1A = The waste is a characteristic hazardous waste D001 High TOC Ignitable Liquids Subcategory (i.e., greater than or equal to 10% TOC). Pursuant to 40 CFR 268.40, the waste must be treated using organic recovery (RORGS) or combustion (CMBST) technology. UHC's are NOT required to be identified.

2 = The waste is a characteristic hazardous waste D001 (other than High TOC Ignitable Liquids), D002, D003 Explosive, Water Reactive or Other Reactive subcategory, D004-D011, D012-17 non-wastewater, or D018-43 which is intended for treatment/disposal in a non-CWA system, non-CWA-equivalent system, or non-Class I SDWA system located in the United States. All UHC's which are reasonably expected to be present must be identified, except for D001 waste that is intended to be treated using organic recovery (RORGS) or combustion (CMBST) technologies. Identify UHC's by completing Sections I and IV of CHI Form LDR-1 Addendum and attach completed Addendum to this form.

3 = The waste is a characteristic (i.e., D-code) or listed (i.e., F-, K-, U-, or P-code) hazardous waste which is intended for export and treatment/disposal at a facility located outside the United States. LDR treatment standards do not apply to hazardous waste treated/disposed in a foreign country, and per USEPA guidance, the identification of UHC's (if applicable) is not required for hazardous waste that is intended to be exported. Note however that if the exported waste is subsequently returned for treatment/disposal in the United States, all applicable LDR regulations would apply and a revised LDR notification would be required.

4 = The waste meets the definition of hazardous debris pursuant to 40 CFR 268.2(h) and is intended for treatment/disposal in compliance with the alternate debris treatment technologies of 40 CFR 268.45. In accordance with the requirements of 40 CFR 268.7(a)(2): the contaminants subject to treatment (CSTT's) must be identified as part of this notification. Identify CSTT's by completing Sections III and IV of CHI Form LDR-1 Addendum and attach completed Addendum to this form. These constituents are being treated to comply with 40 CFR 268.45.

5 = The waste is a characteristic waste D003 Reactive Sulfide, Reactive Cyanide, or Unexploded Ordnance subcategory, a characteristic waste D012-17 wastewater, or a listed (i.e., F-, K-, U-, or P-code) hazardous waste. UHC's are NOT required to be identified.

6 = The waste is a lab pack that is intended for incineration using the alternative lab pack treatment standard under 40 CFR 268.42(c). UHC's are NOT required to be identified; however, the generator must complete and attach the lab pack certification statement on CHI Form LDR-LP. Note that in accordance with 40 CFR Part 268 Appendix IV, lab packs which contain waste codes D009, F019, K003, K004, K005, K006, K062, K071, K100, K106, P010, P011, P012, P076, P078, U134, and U151 are not eligible for alternative lab pack treatment standard.

*** **NOTE: IF THE WASTE IS A SOIL CONTAMINATED WITH A LISTED OR CHARACTERISTIC WASTE AND THE GENERATOR WANTS TO USE THE ALTERNATE TREATMENT STANDARD FOR SOILS, CONTACT CORPORATE COMPLIANCE FOR THE APPROPRIATE LDR NOTIFICATION FORM.**

SECTION I. CHARACTERISTIC WASTES D001 THROUGH D043

COLUMN 1: LINE ITEM SEE MANIFEST	COLUMN 2: WASTE CODE / SUBCATEGORY			COLUMN 3: WASTEWATER/ NON-WASTEWATER	COLUMN 4: HANDLING CODE
	[ ]	D001	Ignitables, except High TOC subcategory	[ ] WW [ ] Non-WW	1 2 3 4 6
	[ ]	D001	High TOC Ignitable Liquids Subcategory (Greater than or equal to 10% TOC)	[ ] Non-WW only	1A 3 6
	[ ]	D002	Corrosives	[ ] WW [ ] Non-WW	1 2 3 4 6
	[ ]	D003			
		[ ]	Reactive Sulfide, per 261.23(a)(5)	[ ] WW [ ] Non-WW	1 3 4 5 6
		[ ]	Reactive Cyanide, per 261.23(a)(5)	[ ] WW [ ] Non-WW	1 3 4 5 6
		[ ]	Explosive, per 261.23(a)(6), (7) & (8)	[ ] WW [ ] Non-WW	1 2 3 4 6
		[ ]	Water Reactive, per 261.23(a)(2), (3) & (4)	[ ] Non-WW only	1 2 3 4 6
		[ ]	Other Reactive, per 261.23(a)(1)	[ ] WW [ ] Non-WW	1 2 3 4 6
		[ ]	Unexploded Ordnance, Emergency Response	[ ] WW [ ] Non-WW	1 3 4 5 6
	[ ]	D004	Arsenic	[ ] WW [ ] Non-WW	1 2 3 4 6
	[ ]	D005	Barium	[ ] WW [ ] Non-WW	1 2 3 4 6
	[ ]	D006			
		[ ]	Cadmium	[ ] WW [ ] Non-WW	1 2 3 4 6
		[ ]	Cadmium Containing Batteries	[ ] Non-WW only	2 3 6
11a	[X]	D007	Chromium	[ ] WW [X] Non-WW	1 (2) 3 4 6
	[ ]	D008			
		[ ]	Lead	[ ] WW [ ] Non-WW	1 2 3 4 6
		[ ]	Lead Acid Batteries	[ ] Non-WW only	2 3 6

CLEAN HARBORS ENVIRONMENTAL SERVICES, INC.
LAND DISPOSAL RESTRICTION NOTIFICATION FORM LDR-1

Manifest No. NYG2545488

SECTION III. CALIFORNIA LIST WASTES

COLUMN 1: LINE ITEM SEE MANIFEST	COLUMN 2: WASTE CODE / SUBCATEGORY	COLUMN 3: WASTEWATER/ NON-WASTEWATER	COLUMN 4: HANDLING CODE
_____	Hazardous waste containing one or more of the following California List constituents:	[ ] WW [ ] Non-WW	1 2 3 4 5 6

[ ] ALL CALIFORNIA LIST CONSTITUENTS
[ ] Liquids with nickel greater than or equal to 134 mg/l
[ ] Liquids with thallium greater than or equal to 130 mg/l
[ ] Liquids with PCB's > or = 50 ppm
[ ] Waste containing HOC's > or = 1,000 mg/kg

SECTION IV. OTHER LISTED WASTES (F006-12, F019-F028, F037-38, F039, K-, U-, AND P-CODES)

COLUMN 1: LINE ITEM SEE MANIFEST	COLUMN 2: WASTE CODE / SUBCATEGORY	COLUMN 3: WASTEWATER/ NON-WASTEWATER	COLUMN 4: HANDLING CODE
_____	_____	[ ] WW [ ] Non-WW	3 4 5 6
_____	_____	[ ] WW [ ] Non-WW	3 4 5 6
_____	_____	[ ] WW [ ] Non-WW	3 4 5 6
_____	_____	[ ] WW [ ] Non-WW	3 4 5 6
_____	_____	[ ] WW [ ] Non-WW	3 4 5 6

[ ] CHECK HERE IF ADDITIONAL LISTED WASTE CODES ARE PRESENT. COMPLETE AND ATTACH LDR-1 CONTINUATION SHEET.
[ ] CHECK HERE IF WASTE CODE F039 (MULTISOURCE LEACHATE) IS PRESENT. IDENTIFY F039 CONSTITUENTS BY COMPLETING SECTIONS II AND IV OF CHI FORM LDR-1 ADDENDUM AND ATTACH COMPLETED ADDENDUM TO THIS FORM.

SECTION V. CONTACT NAME AND DATE

Print Name: DAVID WALZAK Date: 6/22/01

KEY TERMS/DEFINITIONS

CLASS I SDWA SYSTEM means a Class I deep well facility regulated under the Safe Drinking Water Act (SDWA).

CWA SYSTEM means a centralized wastewater treatment facility discharging under a Clean Water Act (CWA) permit. For example, a CWA facility would treat organic or inorganic aqueous wastes and discharge the treated effluent to the local sewer system. Examples of CWA treatment systems owned and operated by Clean Harbors include the wastewater treatment operations at Baltimore (including the CES system), Bristol, Chicago, Cincinnati and Cleveland.

CWA-EQUIVALENT SYSTEM means a "zero discharge system" that engages in "CWA-equivalent" treatment before land disposal. Zero-discharge facilities treat hazardous wastes using "CWA-equivalent" treatment methods, but do not discharge the treatment effluent to a sewer or water body (e.g., spray irrigation land farm). "CWA-equivalent" treatment methods means biological treatment for organics, alkaline chlorination, or ferrous sulfate precipitation for cyanide, precipitation/ sedimentation for metals, reduction of hexavalent chromium, or other treatment technology that can be demonstrated to perform equally or greater than these technologies.

HIGH TOC IGNITABLE LIQUIDS SUBCATEGORY means an ignitable liquid hazardous waste (waste code D001) which contains greater than or equal to 10% total organic carbon (TOC). Pursuant to 40 CFR 268.40, such wastes must be treated using organic recovery (RORGS) or combustion (CMBST) technology. Examples of RORGS technologies include the CES unit at Clean Harbors of Baltimore. Examples of CMBST technologies include hazardous waste fuel blending and subsequent reuse at a cement kiln, or destruction at a RCRA incinerator.

WASTEWATERS are wastes that contain less than 1% by weight total organic carbon (TOC) and less than 1% by weight total suspended solids (TSS). [See 40 CFR 268.2(f)]

 Manifest No. NYG2545488

122. _____ [ ] Dieldrin
123. _____ [ ] Diethyl phthalate
124. _____ [ ] 2,4-Dimethyl phenol
125. _____ [ ] Dimethyl phthalate
126. _____ [ ] Di-n-butyl phthalate
127. _____ [ ] 1,4-Dinitrobenzene
128. _____ [ ] 4,6-Dinitro-o-cresol
129. _____ [ ] 2,4-Dinitrophenol
130. _____ [ ] 2,4-Dinitrotoluene
131. _____ [ ] 2,6-Dinitrotoluene
132. _____ [ ] Di-n-octyl phthalate
133. _____ [ ] p-Dimethylaminoazobenzene (*)
134. _____ [ ] Di-n-propylnitrosoamine
135. _____ [ ] 1,4-Dioxane (*)
136. _____ [ ] Diphenylamine (difficult to distinguish from diphenylnitrosamine)
137. _____ [ ] Diphenylnitrosamine (difficult to distinguish from diphenylamine)
138. _____ [ ] 1,2-Diphenylhydrazine
139. _____ [ ] Disulfoton
266. _____ [ ] Dithiocarbamates (Total) (*)
140. _____ [ ] Endosulfan I
141. _____ [ ] Endosulfan II
142. _____ [ ] Endosulfan sulfate
143. _____ [ ] Endrin
144. _____ [ ] Endrin aldehyde
267. _____ [ ] EPTC (*)
145. _____ [ ] Ethyl acetate
146. _____ [ ] Ethyl cyanide (propanenitrile)
147. _____ [ ] Ethyl benzene
148. _____ [ ] Ethyl ether
149. _____ [ ] bis(2-Ethylhexyl)phthalate
150. _____ [ ] Ethyl methacrylate
151. _____ [ ] Ethylene oxide
152. _____ [ ] Famphur
153. _____ [ ] Fluoranthene
154. _____ [ ] Fluorene
155. _____ [ ] Fluoride
268. _____ [ ] Formetanate hydrochloride (*)
156. _____ [ ] Heptachlor
157. _____ [ ] Heptachlor epoxide
158. _____ [ ] Hexachlorobenzene
159. _____ [ ] Hexachlorobutadiene
160. _____ [ ] Hexachlorocylopentadiene
161. _____ [ ] HxCDDs (All hexachlorodibenzo-p-dioxins)
162. _____ [ ] HxCDFs (All hexachlorodibenzo-furans)
163. _____ [ ] Hexachloroethane
164. _____ [ ] Hexachloropropylene
165. _____ [ ] Indeno (1,2,3-c,d)pyrene
270. _____ [ ] 3-Iodo-2-propynyl n-butylcarbamate (*)
166. _____ [ ] Iodomethane
167. _____ [ ] Isobutyl alcohol
168. _____ [ ] Isodrin
169. _____ [ ] Isosafrole
170. _____ [ ] Kepone
171. _____ [ ] Lead
172. _____ [ ] Mercury--Nonwastewater from Retort
173. _____ [ ] Mercury--All others
174. _____ [ ] Methacrylonitrile
175. _____ [ ] Methanol
176. _____ [ ] Methapyrilene
272. _____ [ ] Methiocarb (*)
273. _____ [ ] Methomyl (*)
177. _____ [ ] Methoxychlor
178. _____ [ ] 3-Methylcholanthrene
179. _____ [ ] 4,4-Methylene-bis(2-chloroaniline)
180. _____ [ ] Methylene chloride
181. _____ [ ] Methyl ethyl ketone
182. _____ [ ] Methyl isobutyl ketone
183. _____ [ ] Methyl methacrylate
184. _____ [ ] Methyl methansulfonate
185. _____ [ ] Methyl parathion
274. _____ [ ] Metolcarb (*)
275. _____ [ ] Mexacarbate (*)
276. _____ [ ] Molinate (*)
186. _____ [ ] Naphthalene
187. _____ [ ] 2-Naphthylamine
188. _____ [ ] Nickel
189. _____ [ ] o-Nitroaniline (*)
190. _____ [ ] p-Nitroaniline
191. _____ [ ] Nitrobenzene
192. _____ [ ] 5-Nitro-o-toluidine
193. _____ [ ] o-Nitrophenol (*)
194. _____ [ ] p-Nitrophenol
195. _____ [ ] N-Nitrosodiethylamine
196. _____ [ ] N-Nitrosodimethylamine
197. _____ [ ] N-Nitroso-di-n-butylamine
198. _____ [ ] N-Nitrosomethylethylamine
199. _____ [ ] N-Nitrosomorpholine
200. _____ [ ] N-Nitrosopiperidine
201. _____ [ ] N-Nitrosopyrrolidine
277. _____ [ ] Oxamyl (*)
202. _____ [ ] Parathion
203. _____ [ ] Total PCBs (sum of all PCB isomers, or all Arochlors)
278. _____ [ ] Pebulate (*)
204. _____ [ ] Pentachlorobenzene
205. _____ [ ] PeCDDs (All pentachlorodibenzo-p-dioxins)
206. _____ [ ] PeCDFs (All pentachlorodibenzofurans)
207. _____ [ ] Pentachloroethane (*)
208. _____ [ ] Pentachloronitrobenzene
209. _____ [ ] Pentachlorophenol
210. _____ [ ] Phenacetin
211. _____ [ ] Phenanthrene
212. _____ [ ] Phenol
213. _____ [ ] Phorate
214. _____ [ ] Phthalic acid (*)
215. _____ [ ] Phthalic anhydride
280. _____ [ ] Physostigmine (*)
281. _____ [ ] Physostigmine salicylate (*)
282. _____ [ ] Promecarb (*)
216. _____ [ ] Pronamide
283. _____ [ ] Propham (*)
284. _____ [ ] Propoxur (*)
285. _____ [ ] Prosulfocarb (*)
217. _____ [ ] Pyrene
218. _____ [ ] Pyridine
219. _____ [ ] Safrole
220. _____ [ ] Selenium
221. _____ [ ] Silver
222. _____ [ ] Silvex (2,4,5-TP)
223. _____ [ ] Sulfide
224. _____ [ ] 2,4,5-T (2,4,5-Trichlorophenoxyacetic acid)
225. _____ [ ] 1,2,4,5-Tetrachlorobenzene
226. _____ [ ] TCDDs (All tetrachlorodibenzo-p-dioxins)
227. _____ [ ] TCDFs (All tetrachlorodibenzofurans)
228. _____ [ ] 1,1,1,2-Tetrachloroethane
229. _____ [ ] 1,1,2,2-Tetrachloroethane
230. _____ [ ] Tetrachloroethylene
231. _____ [ ] 2,3,4,6-Tetrachlorophenol
232. _____ [ ] Thallium
286. _____ [ ] Thiodicarb (*)
287. _____ [ ] Thiophanate-methyl (*)
233. _____ [ ] Toluene
234. _____ [ ] Toxaphene
289. _____ [ ] Triallate (*)
235. _____ [ ] Tribromomethane (Bromoform)

NATIONAL 45-606 EYE-EASE 45-706 20/20 BUFF Made in U.S.A.

METCO DIVISION PERKIN-ELMER

DUFFY AVENUE CALENDAR YEAR 1992

JANUARY 1, 1992 - MARCH 31, 1992

DURING THIS PERIOD, NO WASTE MATERIAL WAS MANIFESTED FROM THE BUILDING.

45-606 EYE-EASE
45-706 20/20 BUFF
Made in U.S.A.

METCO DIVISION PERKIN-ELMER

DUFFY AVENUE — CALENDAR YEAR 1992

APRIL 1, 1992 TO JUNE 30, 1992

	1	2	3	4	5	6
SHIPPING NAME / HAZARD CLASS / ID NUMBER	STATE MANIFEST DOCUMENTATION NUMBER	TOTAL QUANTITY	WASTE NUMBER	HANDLING CODES		
06-24-92 CHEMICAL WASTE	CWMA6509069 X					
S/B 06-25-92 MANAGEMENT, INC.	✓					
HORWITH TRUCKS, INC.						
		2449 P. 1.2 TONS				
a. R2 WASTE FLAMMABLE LIQUID, NOS		295 G	D001		EMELLE, AL.	(VARSOL)
(D001) FLAMMABLE LIQUID UN1993		(5 DRUMS)			FUEL BLENDING	
(PETROLEUM DISTILLATE) NTS-AB2882						
06-24-92 CHEMICAL WASTE	NYD2698560 X					
S/B 06-25-92 MANAGEMENT, INC.	✓					
		6391 P. 3.2 TONS				
a. NON-REGULATED MATERIAL		770 G	NONE	NON-REG	SKR WEST CARROLLTON, OH.	(FLUSHABLE OIL)
NTS-AB2880		(14 DRUMS)			FUEL BLENDING	
b. NON-REGULATED MATERIAL		9217 P. 990 G 4.1 TONS	NONE	NON-REG	SKR WEST CARROLLTON, OH.	(WATER SOLUBLE OIL)
NTS-AB2881		(18 DRUMS)			FUEL BLENDING	

HAZARDOUS WASTE MANIFEST

(As Required By The Alabama Department of Environmental Management)

Please print or type. *(Form designed for use on elite (12-pitch) typewriter.)*

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD057731636 — Manifest Document No.: 25013

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: Metco Inc, 325 Duffy Ave., Hicksville, NY 11801

A. State Manifest Document Number: CWMA 650909

B. State Generator's ID:

4. Generator's Phone: (516) 334-1300

5. Transporter 1 Company Name: Horwith Trucks, Inc

6. US EPA ID Number: PAD064035819

C. State Transporter's ID: TK 29242 (PA)

D. Transporter's Phone: 215 261-5220

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address: CHEMICAL WASTE MANAGEMENT, INC., Emelle Facility, Alabama Highway 17 at Mile Marker 163, Emelle, Alabama 35459

10. US EPA ID Number: ALD000622464

G. State Facility's ID:

H. Facility's Phone: 205/652-9721

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ Waste Flammable Liquid, n.o.s. (D001) Flammable Liquid, UN1993 (Petroleum Distillates) CWM Profile Number NTS-AB2882	005	DM	00295	G	D001
b. CWM Profile Number					
c. CWM Profile Number					
d. CWM Profile Number					

J. Additional Descriptions for Materials Listed Above: 11a. Petroleum hydrocarbons, 30-60%, metal shaving (aluminum, brass, copper) 20-50%, water 20%, quido #27

K. Handling Codes for Wastes Listed Above: a. b. c. d.

15. Special Handling Instructions and Additional Information: 24 hr. emergency contact #(800) 424-9300

Job # Bill Tech Services Mid-Atlantic Div. Acct # 174-91

Work Order #: Purchase Order #:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: BILL BOUCHARD — Signature: [signature] — Month Day Year: 06 24 92

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Dale Gorr — Signature: [signature] — Month Day Year: 06 25 92

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: — Signature: — Month Day Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: — Signature: — Month Day Year:

GENERATOR — TRANSPORTER — FACILITY

EPA Form 8700-22 (Rev. 9-86) Previous editions ...

WASTE MGMNT TEL NO:

48-14-1 (3/89)—7f

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. Do not Staple.

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. NYD057731663 Manifest Document No. 62504

2. Page 1 of 1

Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
Metco Inc
325 Duffy Ave.
Hicksville, NY 11801

4. Generator's Phone 516 334-1300

A. State Manifest Document No. NY B 269856 0

B. Generator's ID Same

5. Transporter 1 (Company Name) Chemical Waste Management, Inc.

6. US EPA ID Number ILD099202681

C. State Transporter's ID T514-LW (NJ)

D. Transporter's Phone 201 465-2121

7. Transporter 2 (Company Name)

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone ( )

9. Designated Facility Name and Site Address
CWM Recovery Resources, Inc
4301 Infirmary Rd, P.O. Box 453
West Carrollton, OH 45449

10. US EPA ID Number OHD093945293

G. State Facility's ID Same

H. Facility's Phone (513) 859-6101

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Non-regulated material	014	DM	00770	G	EPA none / STATE
b. Non-regulated material	018	DM	00990	G	EPA none / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
a NTS-AB2880
b NTS-AB2881
c
d

K. Handling Codes for Wastes Listed Above
a
b
c
d

15. Special Handling Instructions and Additional Information
Job #
Bill Tech Services
Mid-Atlantic Div.
Acct # 174-91
11a. Petroleum lube oil 100%
11b. Cutting oil 50-100%, hydrotreated mineral oil 20-50%
24 hr emergency contact #(800)424-9300

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Bill Bouchard
Signature: B. Bouchard
Mo. Day Year: 06 24 92

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: Joseph Macaluso
Signature: Joseph Macaluso
Mo. Day Year: 06 24 92

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name
Signature
Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name
Signature
Mo. Day Year

NY B 269856 0

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Dept. of Environmental Conservation (518) 457-7362.

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

1101 Prospect Avenue
Westbury, NY 11590

METCO

a division of
PERKIN ELMER

Emergency Telephone Number
(516) 334-1300

MATERIAL SAFETY DATA SHEET

Product Name: METCO 610NS, 605NS, 604NS MSDS# 50-190

SECTION I

Trade Name: ALUMINUM BRONZE POLYESTER COMPOSITE POWDER

Date of Issue: September 7, 1987
Revision Date: January 18, 1988

SECTION II — COMPOSITION AND TOXICITY DATA

Composition	CAS#	OSHA PEL	ACGIH TLV	OTHER LIMITS RECOMMENDED
Copper (Fume)	7440-50-8	0.1 mg/m^3	0.2 mg/m^3	
(Dust and Mist)		1 mg/m^3	1 mg/m^3	
Aluminum (Metal & Oxide)	7429-90-5	N/A	10 mg/m^3	
Poly-P-Oxybenzate Polymer		N/A	N/A	
Organic Binder		10 mg/m^3	10 mg/m^3	

* * * ATTENTION * * *
THIS DATA SHEET IS IN THE PROCESS OF BEING REVISED TO MEET CURRENT REGULATIONS.

SECTION III — PHYSICAL DATA

Boiling Point:	N/A	Specific Gravity (H_2O=1):	N/A
Vapor Pressure (mmHg):	N/A	Melting Point:	1100-2000
Solubility in Water:	Neg.	Evaporation Rate:	N/A
Appearance and Odor:	Powder; no odor.	Vapor Density (AIR = 1):	N/A

SECTION IV — FIRE AND EXPLOSION HAZARD DATA

Flash Point (Method Used):	Flammable Limits	LEL	UEL
None	N/A	N/A	N/A

Extinguishing Media: Dry sand.

Special Fire Fighting Procedures: N/A

Unusual Fire and Explosion Hazards: Will react violently with C_2H_2, NH_4NO_3, Bromates, Chlorates, Iodates, Cl_2, ClF_3, (Cl_2+OF_2), Ethylene Oxide, F_2, H_2 Hydrazine Mononitrate.

SECTION V			REACTIVITY DATA	50-190
Stability	Unstable		Chlorinated hydrocarbon vapors present near plasma flame may be decomposed to phosgene. An adequate exhaust system is required to avoid the effect of dust, fumes and mist which may be generated by thermal spraying. Do not permit spray dust to enter eyes, mouth, cuts, scratches or open wounds.	
	Stable	X		

Incompatibility (Materials to Avoid): N/A

Hazardous Decomposition Products: Ozone and nitric oxide are formed by plasma flame (independent of powder; similar to welding fumes).

Hazardous Polymerization	May Occur	X	Avoid exceeding the TLV Limit of 30 mg/m^3 and .2 mg/m^3 for nitric oxide and ozone respectively.
	Will Not Occur		

SECTION VI HEALTH HAZARD DATA

Summary of Risks:

COPPER: As a sublimed oxide, copper may cause a form of metal fume fever. Irritates mucous membranes, pharynx; nasal perforation; eye irritant; metal taste; dermatitis.

ALUMINUM: There has been some record of lung damage due to the inhalation of finely divided aluminum oxide particles. However, this effect (known as Shavers disease) is complicated by the presence in the inhaled air of silica and oxides of iron; a nuisance particulate. Aluminum alone is not generally regarded as an industrial poison. Inhalation of finely divided aluminum powder has been reported as a cause of preliminary fibrosis. May be implicated by Alzheimers disease.

POLY-P-OXYBENZATE

POLYMER: Not available.

ORGANIC BINDER: Not available.

Medical Conditions Which May be Aggravated by Contact: N/A

Primary Entry Route(s): Respiratory System, Skin, Liver, increased risk with Wilson's disease, Kidneys.

Signs and Symptoms of Overexposure:

Eye Contact: Possible irritation.

Skin Contact: Possible dermatitis.

Inhalation: Respiratory irritation. As a sublimed oxide, copper may cause a form of metal fume fever.

Ingestion: N/A

First Aid:

Eye Contact: Flood eye with water. If irritation persists, consult a physician.

Skin Contact: If skin irritation occurs, wash with soap and water to remove powder.

Inhalation: Expose to fresh air.

Ingestion: Consult a physician.

SECTION VII SPILL, LEAK AND DISPOSAL PROCEDURES

Spill/Leak Procedures: Material that is spilled onto the floor may become airborne by normal plant activity. Good housekeeping, by sweeping the area clean, is necessary to remove these materials from becoming a source of air contamination.

Waste Management/Disposal: Consult local and federal regulations.

Personal Protective Equipment:

Goggles: The following lens shades are recommended for the process indicated. Combustion spraying shade #5, plasma spraying up to 40 kW shade #9, 40 to 60 kW shade #10 and greater than 60 kW shade #11.

Gloves: Aluminized gloves are to be worn during plasma spray process.

Respirator: A respirator approved by NIOSH for dust/fumes/mists should be worn at all times during the thermal spray process to protect operator from dust and fumes.

Other Protective Clothing or Equipment: Ear protection must be worn when the operator is subjected to excessive noise levels. (See OSHA Requirements). Aluminized apron is to be worn during plasma spray process.

Workplace Considerations:

Ventilation: Ventilation equipment designed to create an air velocity of 200 FPM.

Safety Stations: Eye Wash Station is recommended.

Other: N/A

SECTION IX HANDLING AND STORAGE PRECAUTIONS

Precautions to be Taken in Handling and Storage: Avoid excessive skin contact and oral ingestion.

Other Precautions: N/A

The information contained herein is based on available data and tests and is believed to be accurate. It is presented solely for your consideration and verification since conditions of use, storage and handling may vary.

Tridon Chemical CORP.

FAX TRANSMITTAL

7/20/93

RANDY BUYER

TRIDON / BATH

FAX #: 330-2477

COMPANY: METCO

PAGES TO FOLLOW: 1

NOTES: INFO ON MI-TRI REQUESTED

LOT # will be faxed as soon as recieved

1,1,1-TRICHLOROETHANE

(METHYL

SHIPPING INFORMATION

WARNING!

VAPOR

AVOID

DO NOT

KEEP VENT END UP
DO NOT ROLL
DO NOT DROP

1

BEFORE USING, READ AND UNDERSTAND

OVEREXPOSURE CAN CAUSE DROWSINESS, NAUSEA, UNCONSCIOUSNESS OR HEART

NOT FOR FOOD, DRUG, COSMETIC OR PESTICIDE USE.

Avoid prolonged or repeated breathing of vapor

adequate ventilation such as forced air or other

FOR INFO: Do not get in eyes, on skin or on

wear a full face mask with supplied air. Keep

Decomposition could occur and explosion might

THE FOLLOWING REPRESENTS THE

May injure eye tissue

Mildly irritating and defatting.

Irritating to nose and throat. Causes headache

inhalation of high concentrations, even death

If vomiting occurs liquid could be

The following medical conditions can be

disease and rhythm disorders of the heart.

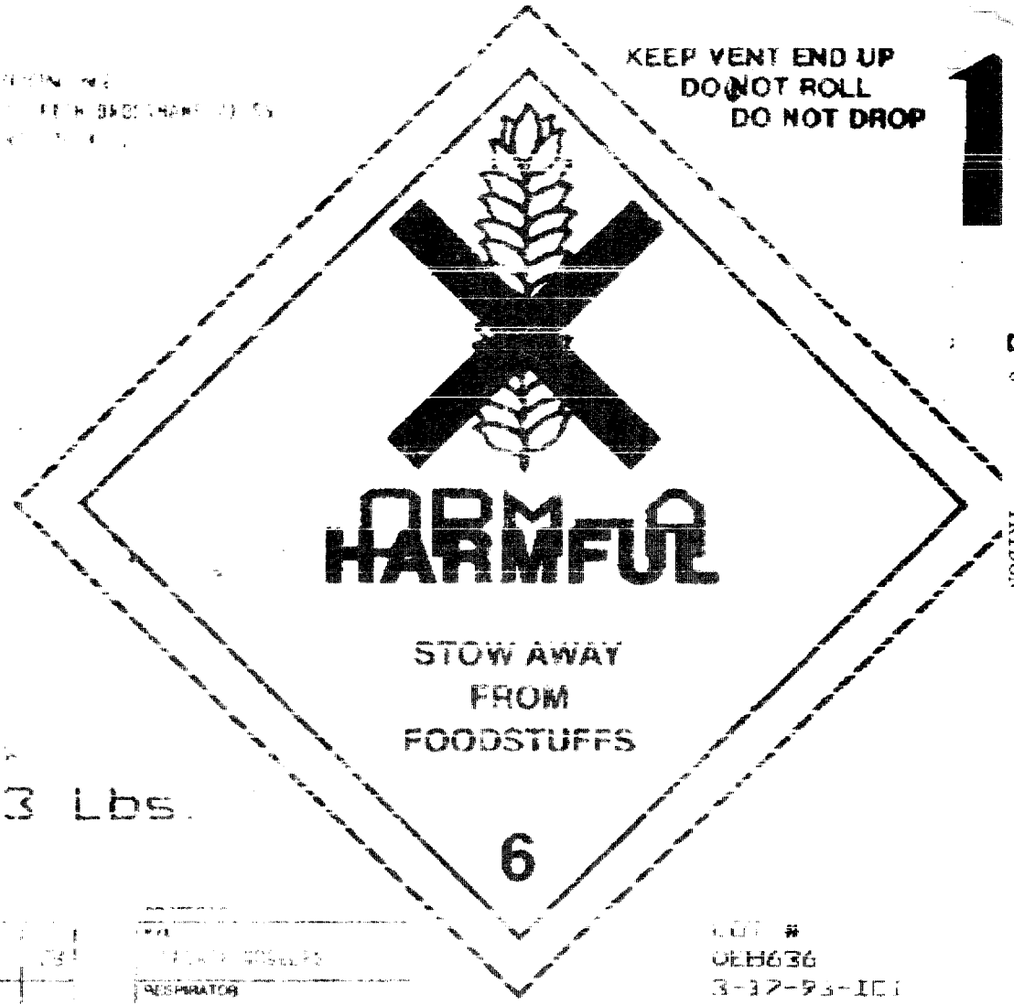
Add Material To Container

WARNING: Contains Methyl

public health and environment

atmosphere.

FOR FIRST AID INFORMATION, CONSULT MSDS



593 Lbs.

HEALTH	3
FIRE	1
REACTIVITY	0

PPE
FACE SHIELD
RESPIRATOR
ORGANIC VAPOR
BODY
GLOVES, APRON

LOT #
OEH636
3-17-95-IC1

FOR INDUSTRIAL USE ONLY

KEEP OUT OF REACH OF ALL CHILDREN

STORE IN A COOL PLACE. OUT OF DIRECT SUNLIGHT AWAY FROM HEAT

DO NOT CUT OR WELD ON OR NEAR THIS CONTAINER. THIS CONTAINER IS HAZARDOUS WHEN EMPTIED AND ALL HAZARD PRECAUTIONS SHOULD BE OBEYED.

Seller makes no warranty, express or implied, concerning this material or the use of this product other than indicated on the label. Buyer assumes all risk of use and/or handling of this when such use and/or handling is contrary to label instructions.

FOR EMERGENCY ASSISTANCE CALL: CHEMTREC 800-424-9300

TRIDON

P02

17. (Continued)

y. Indicate the effect that the waste minimization practices have had on the toxicity of wastewater generated by this operation:

___Increase in the concentration of hazardous constituents
✓ Decrease in the concentration of hazardous constituents
✓ No effect on the concentration of hazardous constituents

z. Do this site's waste minimization programs reduce the cost of producing the products or services that generate wastewater?

Yes ___ No ✓

aa. Do this site's waste minimization programs reduce the cost of waste management?

Yes ___ No ✓

bb. Was it necessary for this site to make any capital investments for equipment in order to implement its waste minimization programs?

Yes ___ No ✓

cc. Does this site intend to recover the cost of these capital investments through decreased production costs or waste management costs?

Yes ___ No ✓

18. Attach a production process block diagram illustrating the sequence in which all machinery manufacturing, rebuilding, and maintenance operations are conducted, and illustrating water use for each operation that uses process water. Example diagrams are included on pages 20 through 22 of the instructions to this data collection portfolio. Be sure to:

- Identify all unit operations with one of the terms listed in Question 16. Include even those operations that do not use process water.
- Show a separate block on the diagram each time an operation occurs in the production process.
- Identify all duplicate production lines within each production process.
- Air pollution control devices should also be included.
- Include use of noncontact cooling water.
- Indicate the destination of all water used in a process, including evaporation, use in other processes, discharge to treatment, etc.
- Any recycle or reuse should also be indicated clearly on the diagram.
- Flow rates should be assigned to all streams. If flow is intermittent, provide amount and frequency; for example, "200 gallons, twice a month" or "100 gallons once per year".

NYG 3892518

Please type or print. Do not staple

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

D3933729

(Waste Manifest 1/23/03)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD131186651

Manifest Doc. No.: 92-16

2. Page 1 of 2

Information within heavy bold line is not required by Federal Law.

3. Generator's Name and Mailing Address
Sutter Melco US Inc
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Telephone Number (516 338-2337

A. NYG 3892518

B. Generator's ID: BAME

5. Transporter 1 (Company Name): Clean Harbors Env Services Inc

6. US EPA ID Number: MAD039322280

C. State Transporter's ID

D. Transporter's Telephone (781 849-1800

7. Transporter 2 (Company Name)

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4879 Spring Grove Avenue
Cincinnati, OH, 45232

10. US EPA ID Number: OHD000816629

G. State Facility ID

H. Facility Telephone (513 681-5738

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE FLAMMABLE LIQUID, N.O.S., (METHANOL, GRAPHITE), 3, UN1993, PG II	001	DT	00055	P	EPA F003 / STATE
b. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II	001	DT	00055	P	EPA D002 / STATE
c. HAZARDOUS WASTE, SOLID, N.O.S., (CERAMIC OXIDE, CHROMIUM), 9, NA3077, PG III	001	DT	00055	P	EPA D007 / STATE
d. NON DOT REGULATED MATERIAL, (ABSORBENT PADS, OIL FILTERS), NA, NONE	002	DT	00055	P	EPA NONE / STATE

J. Additional Descriptions for Materials listed Above

a. ERG#128 (L)(I) METHANOL/AQUADAG/WATER

c. ERG#171 (8)(E) RCRA METAL & CERAMIC POWDER

b. ERG#154 (L)(C,E) COPPER CLEANER/CHROMIC ACID

d. (G) OIL SPILL CLEANUP/FILTERS

K. Handling Codes for Wastes Listed Above

a. B

c. T

b. B

d. B

15. Special Handling Instructions and Additional Information

EMERGENCY PHONE #: (800) 483-5715

11a: CH192537 11b: CH189142 D008 D007 D003 11c: CH189108 11d: CH189102 PUDN W07268 DECAL#

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: [illegible] Signature: [illegible] Mo. 07 Day 18 Year 06

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Lou Tracey Signature: [illegible] Mo. 07 Day 18 Year 06

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: Signature: Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: Signature: Mo. Day Year

GENERATOR

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

COPY 8—Generator—Retained by Generator

INSTRUCTIONS FOR THE NEW YORK STATE UNIFORM HAZARDOUS WASTE MANIFEST

General Information

New York State regulation requires proper completion of all information on a manifest. Omissions, false coding or illegibility is considered a violation. All generators are responsible under New York State and Federal Law for the proper identification, labeling, manifesting and ultimate disposal of all hazardous waste they generate. The manifest system is designed to track hazardous waste from the point of generation until its final disposal (cradle to grave). In order to accomplish this goal, it is essential that all **items on a manifest be properly completed.**

Distribution

Distribution of each copy of the manifest is indicated on the bottom of the form. Copies of the manifest must be mailed promptly. New York State regulations provide five (5) working days for generator and two (2) for a TSDF. The disposer's state is the state in which the designated TSD facility is located. Generator's state is the state in which the installation generating the hazardous waste is located. TSD facility is a treatment, storage or disposal facility.

Generator Section

Item 1-Enter the US EPA ID number (twelve digit number issued by the federal government). The generator must assign a sequential unique; five digit number different for each manifest, as the manifest document number.

Item 2-If a continuation sheet is used, please enter the total number of sheets here. Any EPA approved continuation sheet may be used, but distribution and completion must meet New York manifest requirements. The document number in Item A must be placed in Item L of each continuation sheet.

Items 3-and **4**-Self explanatory. These must correspond to the generator's US EPA ID number.

Items 5, 6, 7 and **8**- These are self-explanatory. These numbers must be secured from the transporter. If more than one transporter is used, the generator must supply additional copies of this manifest for each transporter copy (#5).

Items 9 and **10**-The designated TSD facility, name, address and ID number should appear here.

NOTE: All US EPA ID numbers are a twelve digit code starting off with the letters corresponding to the state in which the facility or transporter is located.

NOTE: Only New York State authorized transporters and TSD facilities are allowed to transport or receive hazardous waste in New York State. The generator shall check for authorization.

Item 11-USDOT requires the word "waste" before or in the shipping name for all hazardous waste. See 49 CFR 171 thru 177. Contact USDOT office for description assistance. Any waste in this box is considered a hazardous waste.

Item 12-

Number-indicate number of containers (use whole numbers).

Containers/Type

DM-Metal drums, barrels, kegs	DT-Dump trucks
DW-Wooden drums, barrels, kegs	CY-Cylinders
DF-Fiberboard or plastic drums, kegs	CM-Metal boxes, cartons, cases, roll-offs
TP-Tanks, portable	CW-Wooden boxes, cartons, cases
TT-Cargo tank, tank trucks	CF-Fiber or plastic boxes, cartons, cases
TC-Tank cars	BA-Burlap, cloth, paper or plastic bags

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to: Chief Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street S.W., Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503

Item 13-Actual number of units indicated in box 14. (Do not use fractions or decimals).

Item 14-Units (wt/vol)

G-Gallons (liquids only)	L-Liters (liquids only)
P-Pounds	K-Kilograms
T-Tons (2,000 pounds)	M-Metric Tons (1,000 kilograms)
Y-Cubic Yards	N-Cubic Meters

Item 15-Use this space to indicate special transportation, treatment, storage or disposal or Bill of Lading information. If an alternate facility is designated, note it here. For international shipments, enter point of departure. Emergency response telephone numbers, or similar information may be included here.

Item 16-The authorized agent of the generator must read and then sign (by hand) and date this certification. The date is the date of receipt by transporter.

NEW YORK STATE REQUIRES THIS ADDITIONAL INFORMATION

Item A-Number preprinted by New York State Department of Environmental Conservation (NYSDEC).

Item B-Generator site address if different from mailing address. If same, write in same.

Item C and **E**-State of registration and motor vehicle license plate number of waste carrying portion of vehicle used to transport.

Item D and **F**-Telephone number of authorized agent.

Item G-No entry required by NYSDEC

Item H-Telephone number at site of TSD facility.

Item I-Hazardous waste numbers (letter and three digits) as assigned by 6 NYCRR Part 371 or 40 CFR 261 must be used to identify hazardous waste. Enter in top box by EPA. If waste is not hazardous in New York but regulated by another state, enter that state's waste code in bottom box.

Item J-If description in Item 11 (a,b,c,d) contains NOS or other general term, the hazardous waste constituent must be provided here for each. The specific gravity assumed to be one (1.00) unless indicated in lower right of each box.

Item K-Each material **must** be assigned an ultimate disposal method code as follows: L=Landfill, B=Incineration, heat recovery, burning, T=Chemical, physical, or biological treatment, R=Material recovery of more than 75 percent of the total material. Both the generator and the TSDF should agree on codes assigned in this item.

Transporter Section

Items 17 and **18**-Print or type the full name of person accepting responsibility and acknowledging receipt of material as listed on manifest for transport. Enter date of receipt and signature.

TSDF Section

Item 19-The authorized representative of the TSDF must note in the space any discrepancy between waste described on manifest and waste actually received. Any rejected materials should be listed and destination of those materials provided.

Item 20-The signature (by hand) of the authorized TSDF agent indicates acceptance (except for Item 19) and agreement with statements on this manifest. The date is the date of signature and receipt of shipment. A TSDF not providing ultimate disposal agrees to transfer waste to a TSDF authorized to provide ultimate disposal as indicated in Item K.

Additional Information

1. If the disposer state supplies a manifest, that state's form must be used. In any case, New York requires that both the generator and TSDF mail copies to the generator's state and the disposer's state, with the ultimate disposal method indicated in Item K.
2. There may be variations in the requirements between various states regarding Items A thru K, therefore, the generator should contact the disposer's state for specific details.
3. If assistance is needed in completion of this manifest, please contact NYSDEC Data Management Section at 518/402-8738 weekdays from 9:00 a.m. to 4:00 p.m.

CycleChem

INVOICE NO.	CUSTOMER NO.	INVOICE DATE	ORDER NO.	GEN CODE
W089904	08-1047408	09/29/2008	89904 WW829	945948 1

FOR ADDITIONAL INFORMATION PERTAINING TO THIS INVOICE PLEASE DIAL
PHONE: 908-355-5800 • FAX: 908-355-0562

Page

PICK UP FROM: SULZER METCO US INC
Attn: JIM Kourkoumelis
1101 PROSPECT AVE
WESTBURY, NY 11590

BILL TO: SULZER METCO US INC
Attn: JIM Kourkoumelis
1101 PROSPECT AVE
WESTBURY, NY 11590

TELEPHONE NUMBER

POR

EPA ID NO.	MANIFEST NO.	DATE RECEIVED	P.O. #
NYD131318651	001028641JJK	9/29/2008	4530114674

PRODUCT CODE	SEQUENCE NUMBER	QUANTITY ORDERED	DESCRIPTION	UNITS	RATE	CONT.	TOTAL
DIRECT	0053	4	NORM waste > LINE 16	4.00	400.00/EA	CYB	1,600.00
DIRECT	0053	60	NORM waste	60.00	130.00/EA	55DM	7,800.00

SULZER METCO (US) INC.
OCT 06 2008
EHS DEPARTMENT

INVOICE

Disposal Subtotal* $9400.00

COMMENTS/ADDITIONAL CHARGES		AMOUNT
Invoice Comment: P.O. # 4530114674	QA/QC Fee	No Charge
	Reg. Admin. Fee	No Charge
	Transportation*	6,058.80
	Tax On * Items: 8.625% X $15458.80	1,333.32

Please Remit payment in full to:
Cycle Chem, Inc.
P.O. Box 18173, Newark, N.J. 07191

PAY THIS AMOUNT 16,792.12

PLEASE NOTE: INTEREST CHARGES OF 1.5% PER MONTH (18% PER YEAR WILL ACCRUE ON ALL PAST DUE AMOUNTS. ON UNPAID AMOUNTS, INTEREST AND ALL EXPENSES OF COLLECTIONS INCLUDING A REASONABLE ATTORNEY FEE IN AN AMOUNT OF 20% WILL BE CHARGED.

THE WASTE LISTED ON THIS INVOICE HAS BEEN RECEIVED BY OUR HAZARDOUS WASTE FACILITY AND IS BEING HANDLED IN FULL COMPLIANCE WITH THE RCRA REGULATIONS CONCERNING THE TREATMENT, STORAGE AND DISPOSAL OF THE DESCRIBED MATERIAL

48-14-1 (3-89)-7f

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

Form Approved OMB No. 2050-0039. Expires 9-30-94

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.

2. Page 1 of | Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number: NY C 339748-7

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Phone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility's ID

H. Facility's Phone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	2				EPA / STATE
b.					EPA / STATE
c.	11				EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a | c

b | d

K. Handling Codes for Wastes Listed Above

a | c | b | d

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR**, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: BILL BOULANGER | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name: Tom Kerte | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

Discrepancy Line 11b

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name: Steve Zimmerman | Signature | Mo. Day Year

NY C 339748-7

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 5-Generator-Mailed by TSD facility

P2SUL005844

48-14-1 (3-89)-7

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

Please print or type. DO NOT STAPLE.

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-94

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.
Manifest Document No.
2. Page 1 of
Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Malling Address
4. Generator's Phone ( )

A. State Manifest Document Number NY C 339748-7
B. Generator's ID

5. Transporter 1 (Company Name)
6. US EPA ID Number
C. State Transporter's ID
D. Transporter's Phone ( )

7. Transporter 2 (Company Name)
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone ( )

9. Designated Facility Name and Site Address
10. US EPA ID Number
G. State Facility's ID
H. Facility's Phone

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
a
c
b
d

K. Handling Codes for Wastes Listed Above
a
c
b
d

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name
Signature
Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name
Signature
Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name
Signature
Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name
Signature
Mo. Day Year

NY C 339748-7

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 8-Generator-retained by generator

P2SUL005845

LAND DISPOSAL RESTRICTION AND WASTE ANALYSIS CRITERIA FORM

safety-kleen

PHASE II LDR NOTICE: GENERATOR NOT REQUIRED TO DO LDR ANALYSIS BECAUSE TREATER WILL MONITOR FOR THE CONSTITUENTS BEFORE LAND DISPOSAL.

TO: SAFETY-KLEEN CORP. (DESIGNATED FACILITY) EPA ID NO. NYD057731663 (DESIGNATED FACILITY)

ADDRESS: 90 SEABRO NO AMITYVILLE, NY 11701

Under manifest / sales service number NYC339[illegible] the generator noted below is shipping to you a waste determined to be restricted under 40 CFR Part 268. In accordance with 40 CFR Part 268.7, the generator hereby provides notice that the waste is restricted from land disposal. A copy of this form must be kept by the generator and facility for five (5) years from the date of waste shipment. * SEE BELOW

PLEASE ✓ THE APPROPRIATE BOXES

WASTE NAME (FOR NON-WASTE WATER)	WASTE CODE	THE WASTE MAY CONTAIN THE FOLLOWING RESTRICTED CONSTITUENTS	TREATMENT STANDARD (mg/l) OR METHOD
☑ Waste Petroleum Naphtha 105	D001,	Ignitable Liquid (High TOC Subcategory) Halogenated Organic Compounds (HOC's) ≥ 1000 mg/l	Incineration (INCIN), fuel substitution (FSUBS) or recovery (RORGS) (40 CFR 268.42) (non-waste water) INCIN (40 CFR 268.42)(non-waste water)
	D006,	Cadmium	1.0 (non-waste water)
	D008,	Lead	5.0 (non-waste water)
	D018,	Benzene	10 (NON-WASTE WATER) Not Established
	D035,	Methyl Ethyl Ketone	36 (NON-WASTE WATER) Not Established
	D039,	Tetrachloroethylene	6.0 (NON-WASTE WATER) Not Established
	D040,	Trichloroethylene	6.0 (NON-WASTE WATER) Not Established
☐ Waste Petroleum Naphtha 140	D001,	Ignitable Liquid (High TOC Subcategory)	INCIN, FSUBS, or RORGS (40 CFR 268.42)(non-waste water)
	D006,	Cadmium	1.0 (non-waste water)
	D008,	Lead	5.0 (non-waste water)
	D018,	Benzene	10 (NON-WASTE WATER) Not Established
	D039,	Tetrachloroethylene	6.0 (NON-WASTE WATER) Not Established
☐ Cyclonic, 150 Premium Solvent OR Actrel Solvent (If customer specific TCLP is not available)	D006,	Cadmium	1.0 (non-waste water)
	D008,	Lead	5.0 (non-waste water)
	D018,	Benzene	10 (NON-WASTE WATER) Not Established
	D039,	Tetrachloroethylene	6.0 (NON-WASTE WATER) Not Established
	D040,	Trichloroethylene	6.0 (NON-WASTE WATER) Not Established
☐ Waste Petroleum Naphtha (sludges from Safety-Kleen Service Center Operations)	D001,	Ignitable Liquid (High TOC Subcategory)	INCIN, FSUBS, or RORGS (40 CFR 268.42)(non-waste water)
	D006,	Cadmium	1.0 (non-waste water)
	D008,	Lead	5.0 (non-waste water)
	D018,	Benzene	10 (NON-WASTE WATER) Not Established
	D039,	Tetrachloroethylene	6.0 (NON-WASTE WATER) Not Established
☐ Waste Compound Cleaning Liquid/ Immersion cleaner 699	D006,	Cadmium	1.0 (non-waste water)
	D008,	Lead	5.0 (non-waste water)
	D018,	Benzene	10 (NON-WASTE WATER) Not Established
	D021,	Chlorobenzene	6.0 (NON-WASTE WATER) Not Established
	D027,	1, 4-Dichlorobenzene	6.0 (NON-WASTE WATER) Not Established
	D035,	Methyl Ethyl Ketone	36 (NON-WASTE WATER) Not Established
	D039,	Tetrachloroethylene	6.0 (NON-WASTE WATER) Not Established
	D040,	Trichloroethylene	6.0 (NON-WASTE WATER) Not Established

OPTIONAL STATE INFO

MACHINE NUMBER	SPECIFIC GRAVITY	EXCESS FLUID IN DRUM? (MS>2/3)(IC>1/3)(Y/N)	OFF - COLOR? (Y/N)	MORE THAN 30% SOLIDS?(Y/N)	UNUSUAL ODOR? (Y/N)	UNUSUAL MATERIALS INCLUDED/ADDED? (Y/N)
172-35871						
301-62262						
172-37537						
172-37090						
173-03446						
173-03408						
173-03475						
173-03483						
173-03695						
173-09287						
173-10374						
173-41600						

SPECIFIC GRAVITY ACCEPTANCE GUIDELINES

SALES REPRESENTATIVE SIGNATURE

The constituent composition is based on knowledge of the waste (via Material Safety Data Sheets for the chemical(s) used, and the process which created the waste).
*These treatment standards do not preclude reclamation prior to final disposition.

Generator Company: METCO * ALSO IN ACCORDANCE WITH 6NYCRR 376.4(E) EPA ID NO.: NYD057731663

Safety-Kleen Corp. manages the above waste through its recycling and fuels programs in accordance with applicable elements of the land disposal restrictions.

GENERATOR

FORM 1339 (10/94)

printed on recycled paper

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

NEW YORK STATE DEC
DIVISION OF HAZARDOUS SUBSTANCE
PO BOX 12820
ALBANY NY 12212

4a. Article Number

Z 024 624 075

4b. Service Type

☐ Registered ☐ Insured
XX Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

PS Form **3811**, December 1991 ★U.S. GPO: 1993—352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

Z 024 624 075

Receipt for Certified Mail

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

NYS DEC DIVISION OF HAZARDOUS SUBSTANCES

PO BOX 12820

ALBANY NY 12212

Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form **3800**, March 1993

Fold at line over top of envelope to the right of the return address

CERTIFIED

Z 024 624 075

MAIL

SULZER METCO

February 25, 1998

Certified Mail # P 341 833 574

Sulzer Metco (Westbury) Inc.
1101 Prospect Avenue
PO Box 1006
Westbury, NY 11590-0201
Phone:(516) 334-1300
Fax: (516) 338-2477

Local Emergency Planning Committee
c/o Civil Preparedness Office
140 15th Street
Mineola, New York 11501

Subject: SARA TITLE III - Tier II Report

Dear Sir / Madam:

Enclosed please find the 1997 reporting year SARA TITLE III, Tier II Reports for our Prospect Avenue and Miller Place facilities.

If you have any questions or comments please call me at the number listed below.

Thank you.

Laurence F. Miles
Facilities Department
Phone #: (516) 338-2374
FAX #: (516) 338-2336

Enclosure

0303984.DOC

METCO AMDRY

Form Approved OMB No. 2050-0072

Tier Two
EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: Sulzer Metco (US) Inc.
Street: 1101 Prospect Avenue
City: Westbury County: Nassau State: NY Zip: 11590
SIC Code: 3542 Dun & Brad Number: 87-429-0349

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name
Name: Laurence F. Miles Phone: (516) 334-1300
Mail Address: 1101 Prospect Avenue, Westbury, NY 11590

Emergency Contact
Name: Laurence F. Miles Title: Manager, Facilities
Phone: (516) 334-1300 ext. 2374 24 Hr. Phone: (800) 424-9300 CHEMTREC
Name: Michael S. Lydon Title: Environment, Health & Safet
Phone: (516) 334-1300 ext. 2337 24 Hr. Phone: (800) 424-9300 CHEMTREC

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19 97

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7429905 Trade Secret ☐ Chem. Name: Aluminum Check all that apply: Pure ☒ Mix ☒ Solid ☒ Liquid ☐ Gas ☐ EHS ☐ EHS Name:	☒ Fire ☐ Sudden Release of Pressure ☒ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 Engineering Laboratories Warehouse D 1 4 Warehouse	☐
CAS 1344281 Trade Secret ☐ Chem. Name: Aluminum Oxide Check all that apply: Pure ☐ Mix ☒ Solid ☒ Liquid ☐ Gas ☐ EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 Engineering Laboratories Warehouse D 1 4 Warehouse	☐
CAS 7439896 Trade Secret ☐ Chem. Name: Iron Check all that apply: Pure ☒ Mix ☒ Solid ☒ Liquid ☐ Gas ☐ EHS ☐ EHS Name:	☒ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 Engineering Laboratories, Warehouse D 1 4 Warehouse	☐

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3 and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Laurence F. Miles Manager Facilities
Name and official title of owner/operator OR owner/operator's authorized representative

Signature

02/25/98
Date signed

Optional Attachments
☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

Form Approved OMB No 2050 0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: Sulzer Metco (US) Inc.
Street: 1101 Prospect Avenue
City: Westbury County: Nassau State: NY Zip: 11590
SIC Code: 3542 Dun & Brad Number: 87-429-0349

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name
Name: Laurence F. Miles Phone: (516) 334-1300
Mail Address: 1101 Prospect Avenue, Westubury, NY 11590

Emergency Contact
Name: Laurence F. Miles Title: Manager, Facilities
Phone: (516) 334-1300 ext. 2374 24 Hr Phone: (800) 424-9300 CHEMTREC
Name: Michael S. Lydon Title: Environment, Health & Safet
Phone: (516) 334-1300 ext. 2337 24 Hr Phone: (800 424-9300 CHEMTREC

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 97

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7440 02 0 Trade Secret ☐ Chem. Name: Nickel Check all that apply: Pure ☐ Mix X Solid X Liquid ☐ Gas ☐ EHS ☐ EHS Name:	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 04 Avg. Daily Amount (code): 04 No. of Days On-site (days): 365	N 1 4 Engineering Laboratories, Warehouse D 1 4 Warehouse	☐
CAS 7440 47 3 Trade Secret ☐ Chem. Name: Chromium Check all that apply: Pure X Mix X Solid X Liquid ☐ Gas ☐ EHS ☐ EHS Name:	Fire X Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 03 Avg. Daily Amount (code): 03 No. of Days On-site (days): 365	N 1 4 Engineering Laboratories, Warehouse D 1 4 Warehouse	☐
CAS 1314 23 4 Trade Secret ☐ Chem. Name: Zirconium Oxide Check all that apply: Pure X Mix X Solid X Liquid ☐ Gas ☐ EHS ☐ EHS Name:	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) X Delayed (chronic) ☐	Max. Daily Amount (code): 04 Avg. Daily Amount (code): 04 No. of Days On-site (days): 365	N 1 4 Engineering Laboratories, Warehouse D 1 4 Warehouse	☐

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3 and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Laurence F. Miles Manager Facilities
Name and official title of owner/operator OR owner/operator's authorized representative

Signature

02/25/98
Date signed

Optional Attachments

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

Form Approved OMB No 2050 0072

Tier Two

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Specific Information by Chemical

Facility Identification

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Street: 1101 Prospect Avenue
City: Westbury County: Nassau State: NY Zip: 11590
SIC Code: 3542 Dun & Bradstreet Number: 87-429-0339

FOR OFFICIAL USE ONLY
ID #:
Date Received:

Owner/Operator Name

Name: Laurence F. Miles Phone: (516) 334-1300
Mail Address: 1101 Prospect Avenue, Westubury, NY 11590

Emergency Contact

Name: Laurence F. Miles Title: Manager, Facilities
Phone: (516) 334-1300 ext. 2374 24 Hr Phone: (800) 424-9300 CHEMTREC
Name: Michael S. Lydon Title: Environment, Health & Safet
Phone: (516) 334-1300 ext. 2337 24 Hr Phone: (800) 424-9300 CHEMTREC

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 97

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 26099718 Trade Secret ☐ Chem Name: Polyester "POB" Check all that apply: Pure ☒ Mix ☒ Solid ☒ Liquid ☐ Gas ☐ EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 Engineering Laboratories, Warehouse D 1 4 Warehouse	☐
CAS Trade Secret ☐ Chem. Name: Check all that apply: Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas ☐ EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic)	Max. Daily Amount (code) Avg. Daily Amount (code) No. of Days On-site (days)		☐
CAS Trade Secret ☐ Chem. Name: Check all that apply: Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas ☐ EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic)	Max. Daily Amount (code) Avg. Daily Amount (code) No. of Days On-site (days)		☐

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3 and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Laurence F. Miles Manager Facilities
Name and official title of owner/operator OR owner/operator's authorized representative

Signature

02/25/98
Date signed

Optional Attachments

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

Form Approved OMB No 2050 0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: Sulzer Metco (US) Inc.
Street: 220 Miller Place
City: Hicksville County: Nassau State: NY Zip: 11801
SIC Code: 3399 Dun & Brad Number: 15-208-4398

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name

Name: Laurence F. Miles Phone: (516) 334-1300
Mail Address: 1101 Prospect Avenue, Westubury, NY 11590

Emergency Contact

Name: Laurence F. Miles Title: Manager, Facilities
Phone: (516) 334-1300 ext. 2374 24 Hr. Phone: (800) 424-9300 CHEMTREC
Name: Michael S. Lydon Title: Environment, Health & Safet
Phone: (516) 334-1300 ext. 2337 24 Hr. Phone: (800) 424-9300 CHEMTREC

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 97

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential)	Optional
CAS 7440-02-0 Trade Secret ☐ Chem. Name: Nickel Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 04 Avg. Daily Amount (code): 04 No. of Days On-site (days): 365	Container Type / Temperature / Pressure / Storage Locations D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor, Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Warehouse, Production Floor	☐
CAS 7440-47-3 Trade Secret ☐ Chem. Name: Chromium Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire X Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 04 Avg. Daily Amount (code): 04 No. of Days On-site (days): 365	D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor, Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Warehouse, Production Floor	☐
CAS 7440-48-4 Trade Secret ☐ Chem. Name: Cobalt Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire X Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 03 Avg. Daily Amount (code): 03 No. of Days On-site (days): 365	D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor, Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Warehouse, Production Floor	☐

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Laurence F. Miles Manager Facilities
Name and official title of owner/operator OR owner/operator's authorized representative

Signature

02/25/98
Date signed

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Tier Two
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Reporting Period From January 1 to December 31, 19 97

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Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7429905 Trade Secret ☐ Chem. Name: Aluminum Check all that apply: X Pure, X Mix, X Solid, ☐ Liquid, ☐ Gas, ☐ EHS EHS Name:	X Fire ☐ Sudden Release of Pressure X Reactivity X Immediate (acute) X Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor, Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Warehouse, Production Floor	☐
CAS 1344281 Trade Secret ☐ Chem. Name: Aluminum Oxide Check all that apply: X Pure, X Mix, X Solid, ☐ Liquid, ☐ Gas, ☐ EHS EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor, Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Warehouse, Production Floor	☐
CAS 1314234 Trade Secret ☐ Chem. Name: Zirconium Oxide Check all that apply: X Pure, X Mix, X Solid, ☐ Liquid, ☐ Gas, ☐ EHS EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) ☐ Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor, Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Waerhouse, Production Floor	☐

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Laurence F. Miles Manager Facilities
Name and official title of owner/operator OR owner/operator's authorized representative

Signature

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Reporting Period From January 1 to December 31, 19 97

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CAS 7429905 Trade Secret ☐ Chem. Name: Aluminum Check all that apply: X Pure, X Mix, X Solid, ☐ Liquid, ☐ Gas, ☐ EHS EHS Name:	X Fire ☐ Sudden Release of Pressure X Reactivity X Immediate (acute) X Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor, Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Warehouse, Production Floor	☐
CAS 1344281 Trade Secret ☐ Chem. Name: Aluminum Oxide Check all that apply: X Pure, X Mix, X Solid, ☐ Liquid, ☐ Gas, ☐ EHS EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor, Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Warehouse, Production Floor	☐
CAS 1314234 Trade Secret ☐ Chem. Name: Zirconium Oxide Check all that apply: X Pure, X Mix, X Solid, ☐ Liquid, ☐ Gas, ☐ EHS EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) ☐ Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor, Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Waerhouse, Production Floor	☐

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Laurence F. Miles Manager Facilities
Name and official title of owner/operator OR owner/operator's authorized representative

Signature: [signature] Date signed: 02/25/98

Optional Attachments

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Form Approved OMB No 2050 0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

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Street: 220 Miller Place
City: Hicksville County: Nassau State: NY Zip: 11801
SIC Code: 3399 Dun & Bradstreet Number: 15-208-4398

FOR OFFICIAL USE ONLY: ID # / Date Received

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Reporting Period From January 1 to December 31, 19 97

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Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential)	Optional
CAS 26099718 Trade Secret ☐ Chem. Name: Polyester "POB" Homopolymer Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 03 Avg. Daily Amount (code): 03 No. of Days On-site (days): 365	Container Type / Temperature / Pressure / Storage Locations: D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor, Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Warehouse, Production Floor	☐
CAS 13038389 Trade Secret ☐ Chem. Name: Chromium oxide Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire X Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 04 Avg. Daily Amount (code): 04 No. of Days On-site (days): 365	D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor, Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Warehouse, Production Floor	☐
CAS ☐ Trade Secret ☐ Chem. Name: Check all that apply: Pure ☐, Mix ☐, Solid ☐, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic) ☐	Max. Daily Amount (code): Avg. Daily Amount (code): No. of Days On-site (days):		☐

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Laurence F. Miles Manager Facilities
Name and official title of owner/operator OR owner/operator's authorized representative

Signature

02/25/98
Date signed

Optional Attachments

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SULZER METCO

February 25, 1998

Certified Mail # P 341 833 575

Sulzer Metco (Westbury) Inc.
1101 Prospect Avenue
PO Box 1006
Westbury, NY 11590-0201
Phone:(516) 334-1300
Fax: (516) 338-2477

Fire Chief
Hicksville Fire Department
East Marie Street
Hicksville, New York 11801

Subject: SARA TITLE III - Tier II Report

Dear Sir / Madam:

Enclosed please find the 1997 reporting year SARA TITLE III, Tier II Reports for our Prospect Avenue and Miller Place facilities.

If you have any questions or comments please call me at the number listed below.

Thank you.

Laurence F. Miles
Facilities Department
Phone #: (516) 338-2374
FAX #: (516) 338-2336

Enclosure

0303985.DOC

METCO AMDRY

Form Approved OMB No. 2050-0072

Tier Two
EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: Sulzer Metco (US) Inc.
Street: 1101 Prospect Avenue
City: Westbury County: Nassau State: NY Zip: 11590
SIC Code: 3542 Dun & Bradstreet Number: 87-429-0349

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name
Name: Laurence F. Miles Phone: (516) 334-1300
Mail Address: 1101 Prospect Avenue, Westubury, NY 11590

Emergency Contact
Name: Laurence F. Miles Title: Manager, Facilities
Phone: (516) 334-1300 ext. 2374 24 Hr Phone: (800) 424-9300 CHEMTREC
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CAS 7429905 Trade Secret ☐ Chem. Name: Aluminum Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	X Fire ☐ Sudden Release of Pressure X Reactivity X Immediate (acute) X Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 D 1 4	Engineering Laboratories Warehouse Warehouse	☐
CAS 1344281 Trade Secret ☐ Chem. Name: Aluminum Oxide Check all that apply: Pure ☐, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 D 1 4	Engineering Laboratories Warehouse Warehouse	☐
CAS 7439896 Trade Secret ☐ Chem. Name: Iron Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	X Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 D 1 4	Engineering Laboratories, Warehouse Warehouse	☐

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Tier Two
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CAS 7440 02 0 Trade Secret ☐ Chem. Name: Nickel Check all that apply: Pure ☐ Mix X Solid X Liquid ☐ Gas ☐ EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 D 1 4	Engineering Laboratories, Warehouse Warehouse	☐
CAS 7440 47 3 Trade Secret ☐ Chem. Name: Chromium Check all that apply: Pure X Mix X Solid X Liquid ☐ Gas ☐ EHS ☐ EHS Name:	X Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 D 1 4	Engineering Laboratories, Warehouse Warehouse	☐
CAS 1314 23 4 Trade Secret ☐ Chem. Name: Zirconium Oxide Check all that apply: Pure X Mix X Solid X Liquid ☐ Gas ☐ EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) ☐ Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 D 1 4	Engineering Laboratories, Warehouse Warehouse	☐

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CAS 26099 71 8 Trade Secret ☐ Chem. Name: Polyester "POB" Check all that apply: Pure ☒ Mix ☒ Solid ☒ Liquid ☐ Gas ☐ EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	N 1 4 Engineering Laboratories, Warehouse D 1 4 Warehouse	☐
CAS Trade Secret ☐ Chem. Name: Check all that apply: Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas ☐ EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic)	Max. Daily Amount (code) Avg. Daily Amount (code) No. of Days On-site (days)		☐
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CAS 7440020 Trade Secret ☐ Chem. Name: Nickel Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	Container Type / Temperature / Pressure / Storage Locations D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor, Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Warehouse, Production Floor	☐
CAS 7440473 Trade Secret ☐ Chem. Name: Chromium Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	X Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor, Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Warehouse, Production Floor	☐
CAS 7440484 Trade Secret ☐ Chem. Name: Cobalt Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	X Fire ☐ Sudden Release of Pressure ☐ Reactivity X Immediate (acute) X Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor, Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Warehouse, Production Floor	☐

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☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7429 90 5 Trade Secret ☐ Chem. Name: Aluminum Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	X Fire Sudden Release of Pressure X Reactivity X Immediate (acute) X Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor, Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Warehouse, Production Floor	☐
CAS 1344 28 1 Trade Secret ☐ Chem. Name: Aluminum Oxide Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire Sudden Release of Pressure Reactivity X Immediate (acute) X Delayed (chronic)	03 Max. Daily Amount (code) 03 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor, Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Warehouse, Production Floor	☐
CAS 1314 23 4 Trade Secret ☐ Chem. Name: Zirconium Oxide Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire Sudden Release of Pressure Reactivity X Immediate (acute) Delayed (chronic)	04 Max. Daily Amount (code) 04 Avg. Daily Amount (code) 365 No. of Days On-site (days)	D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor, Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Waerhouse, Production Floor	☐

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3 and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Laurence F. Miles Manager Facilities
Name and official title of owner/operator OR owner/operator's authorized representative

Signature

02/25/98
Date signed

Optional Attachments

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other saleguard measures

Form Approved OMB No 2050-0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: Sulzer Metco (US) Inc.
Street: 220 Miller Place
City: Hicksville County: Nassau State: NY Zip: 11801
SIC Code: 3399 Dun & Brad Number: 15-208-4398

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name

Name: Laurence F. Miles Phone: (516) 334-1300
Mail Address: 1101 Prospect Avenue, Westubury, NY 11590

Emergency Contact

Name: Laurence F. Miles Title: Manager, Facilities
Phone: (516) 334-1300 ext. 2374 24 Hr. Phone: (800) 424-9300 CHEMTREC

Name: Michael S. Lydon Title: Environment, Health & Safet
Phone: (516) 334-1300 ext. 2337 24 Hr. Phone: (800 424-9300 CHEMTREC

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19 97

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) — Storage Locations	Optional
CAS 26099-71-8; Trade Secret ☐ Chem. Name: Polyester "POB" Homopolymer Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 03 Avg. Daily Amount (code): 03 No. of Days On-site (days): 365	D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor, Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Warehouse, Production Floor	☐
CAS 1308-38-9; Trade Secret ☐ Chem. Name: Chromium oxide Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire X Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 04 Avg. Daily Amount (code): 04 No. of Days On-site (days): 365	D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor, Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Warehouse, Production Floor	☐
CAS ☐; Trade Secret ☐ Chem. Name: Check all that apply: Pure ☐, Mix ☐, Solid ☐, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic) ☐	Max. Daily Amount (code): Avg. Daily Amount (code): No. of Days On-site (days):		☐

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 3 and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Laurence F. Miles Manager Facilities
Name and official title of owner/operator OR owner/operator's authorized representative

Signature

02/25/98
Date signed

Optional Attachments

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

P 341 833 575 5

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail *(See reverse)*

Sent to Fire Chief, Hicksville Fire Dept.	
Street & Number East Maine Street	
Post Office, State, & ZIP Code Hicksville, NY 11801	
Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form **3800**, April 1995

Fold at line over top of envelope to the right of the return address

CERTIFIED

P 341 833 575

MAIL

Is your RETURN ADDRESS completed on the reverse side?

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "*Return Receipt Requested*" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date

3. Article Addressed to:
Fire Chief
Hicksville Fire Dept.
East Maine Street
Hicksville, NY 11801

4a. Article Number P 341 833 575

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: *(Print Name)*

6. Signature: *(Addressee or Agent)* X

8. Addressee's Address *(Only if requested and fee is paid)*

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

PS Form **3811**, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

P2SUL004978

Page 1 of 1 pages
Form Approved OMB No. 2050-0072

Tier Two
EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY
Specific Information by Chemical

Facility Identification
Name: METCO DIV. PERKIN-ELMER CORP
Street Address: DUFFY AVE
City: ____ State: NY Zip: ____
SIC Code: ____ Dun & Brad Number: 05-773-1663

FOR OFFICIAL USE ONLY
ID #:
Date Received:

Owner/Operator Name
Name: PATRICK A. TIGHE Phone: (516) 334-1300
Mail Address: 1101 ~~LEE~~ PROSPECT AVE, WESTBURY, NY, 11590

Emergency Contact
Name: PATRICK A. TIGHE Title: SUPERVISOR FACILITY ADMIN.
Phone: (516) 334-1300 24 Hr. Phone: ( ) 798-7249
Name: ____ Title: ____
Phone: ( ) 24 Hr. Phone: ( )

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 19____

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory: Max. Daily Amount (code)	Inventory: Avg. Daily Amount (code)	Inventory: No. of Days On-site (days)	Storage Codes and Locations (Non-Confidential): Storage Code	Storage Locations
CAS 71556 Trade Secret ☐ Chem. Name: 1,1,1, TRICHLORO ETHANE Check all that apply: ☒ Pure ☐ Mix ☐ Solid ☒ Liquid ☐ Gas	☒ Fire ☐ Sudden Release of Pressure ☒ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	02	02	365	C15 D14	DEGREASING PROCESS
CAS ____ Trade Secret ☐ Chem. Name: ____ Check all that apply: ☐ Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic)					
CAS ____ Trade Secret ☐ Chem. Name: ____ Check all that apply: ☐ Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic)					

Certification *(Read and sign after completing all sections)*

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 responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Name and official title of owner/operator OR owner/operator's authorized representative ____ Signature ____ Date signed ____

Optional Attachments *(Check one)*
☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations

B186

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: NYD123131851
2. Page 1 of 1
3. Emergency Response Phone: (800) 433-3718
4. Manifest Tracking Number: 000007147 FLE

5. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590
Generator's Phone: 516 338-2337
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Clean Harbors Env Services Inc — U.S. EPA ID Number: MAD038522250

7. Transporter 2 Company Name: [illegible] — U.S. EPA ID Number: [illegible]

8. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4979 Spring Grove Avenue
Cincinnati, OH, 45232
Facility's Phone: (513) 681-5738
U.S. EPA ID Number: OHD006186229

GENERATOR

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
X	1. WASTE SOLIDS CONTAINING FLAMMABLE LIQUID, N.O.S., (ETHYL ALCOHOL, ISOPROPYL ALCOHOL), 4.1, UN3175, PG II	0001	DT	0001	P	D001		B
X	2. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II	0001	DT	0001	P	D002 D008	D006	D007 T
	3.							
	4.							

14. Special Handling Instructions and Additional Information
1. 112576 1255 ERG#133
2. 110942 1255 ERG#154
[illegible]

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: DAVID WALZAK — Signature: [signature] — Month / Day / Year

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: RANDY OHARA — Signature: [signature] — Month / Day / Year
Transporter 2 Printed/Typed Name: [illegible] — Signature: [signature] — Month / Day / Year

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) — Month / Day / Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name — Signature — Month / Day / Year

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete. **DESIGNATED FACILITY TO GENERATOR**

Keep the copies that are appropriate for you and return the remaining copies to the generator as shipping.

P2SUL007592

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
N Y D 1 3 1 3 1 8 6 5 1	1	(800) 453-3738	000007147 FLE

5. Generator's Name and Mailing Address
Sabra Metco US Inc.
1101 Prospect Avenue
Westbury, NY 11590
Generator's Phone: 516 334-2337

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Clean Harbors Env Services Inc. — U.S. EPA ID Number: M A D 0 3 9 3 2 2 2 2 0

7. Transporter 2 Company Name — U.S. EPA ID Number:

8. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4679 Spring Grove Avenue
Cincinnati, OH 45232
Facility's Phone: (513) 681-5738
U.S. EPA ID Number: O H D 0 0 0 5 1 6 5 2 9

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. WASTE SOLIDS CONTAINING FLAMMABLE LIQUID, N.O.S., (ETHYL ALCOHOL, ISOPROPYL ALCOHOL), 3, UN1325, PG II					D001
X	2. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II					D002 D006 D007 D009
	3.					
	4.					

14. Special Handling Instructions and Additional Information
1. [illegible]
2. [illegible]

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name | Signature | Month | Day | Year

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name | Signature | Month | Day | Year
Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name | Signature | Month | Day | Year

GENERATOR | INT'L | TRANSPORTER | DESIGNATED FACILITY

Land Disposal Restriction Notification Form

Date: 11 / 16 / 2006

CleanHarbors ENVIRONMENTAL SERVICES, INC.

MANIFEST INFORMATION

Generator: Sulzer Metco US Inc
Address: 1101 Prospect Avenue
Westbury, NY 11590
EPA ID#: N Y D 1 3 1 3 1 8 6 5 1

Manifest No
000600147FLE
Sales Order No: D31316957
Manifest Document No:

LINE ITEM INFORMATION

Line Item:	Page No:	Profile No:	Treatability Group:	LDR Disposal Category:
1	1	CH225779	NON- WASTEWATER	2 : This is subject to LDR.

EPA Waste Codes	EPA Waste Subcategory
D001	High TOC Ignitable Liquids

Line Item:	Page No:	Profile No:	Treatability Group:	LDR Disposal Category:
2	1	CH189142	NON- WASTEWATER	2 : This is subject to LDR.

EPA Waste Codes	EPA Waste Subcategory
D002	Corrosive Characteristic
D006	Toxicity characteristic for Cadmium
D007	Toxicity Characteristic for Chromium
D008	Toxicity Characteristic for Lead

LDR Chemical Data

Chemical	Underlying Hazardous Constituents	Constituents of Concern	Contaminants Subject to Treatment
CADMIUM	Y	N	N
Chromium	Y	N	N
LEAD	Y	N	N

Certification — **Applies to Manifest Line Items**

Pursuant to 40 CFR 268.7(a), I hereby notify that this shipment contains waste restricted under 40 CFR Part 268. 1 2

CleanHarbors
ENVIRONMENTAL SERVICES, INC.

Land Disposal Restriction Notification Form

Date: 11 / 16 / 2006

MANIFEST INFORMATION

Generator: Sulzer Metco US Inc
Address: 1101 Prospect Avenue
Westbury, NY 11590
EPA ID#: N Y D 1 3 1 3 1 8 6 5 1

Manifest No
000600147FLE
Sales Order No: D31316957
Manifest Document No:

Waste analysis data, where available, is attached

Signature: [illegible]
Print Name: DMDONALDSON
Title: Facilities Tech
Date: 11/17/06

NYG 3893211

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple

(Hazardous Waste Manifest 1/23/03)

15

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Doc. No.	2. Page 1 of	Information within heavy bold line is not required by Federal Law.
NYD131181651	3893211	1	

3. Generator's Name and Mailing Address
Oxford Metals US Inc
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Telephone Number (516 338-2337

A. NYG 3893211

B. Generator's ID 6AME

5. Transporter 1 (Company Name) Clean Harbors Env Services Inc — 6. US EPA ID Number MAD093222260

C. State Transporter's ID NYM4006

D. Transporter's Telephone (781 849-1900

7. Transporter 2 (Company Name) — 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4570 Spring Grove Avenue
Cincinnati, OH, 45232

10. US EPA ID Number OHD000816929

G. State Facility ID

H. Facility Telephone (513 681-5733

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II	001	DF	00425	P	EPA D002 / STATE
b. HAZARDOUS WASTE, SOLID, N.O.S., (CERAMIC OXIDE, ALUMINUM OXIDE), 9, NA3077, PG III	001	BM	00150	P	EPA D007 / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
a. ERG#154 (L)(G,H) COPPER CLEANER/CHROMIC ACID — c.
b. ERG#171 (5),(B) RCRA METAL & CERAMIC POWDER — d.

K. Handling Codes for Wastes Listed Above
a. F — c.
b. T — d.

15. Special Handling Instructions and Additional Information
11a: CH189142 D006 D007 D009 11b: CH189105
EMERGENCY PHONE #: (800) 483-3713
PUDEP50250 DECALS

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name [illegible] — Signature [illegible] — Mo. 01 Day 07 Year 05

TRANSPORTER — 17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name Louis Irizarry — Signature [illegible] — Mo. 01 Day 07 Year 05

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Mo. Day Year

FACILITY — 19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Mo. Day Year

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

COPY 8—Generator—Retained by Generator

INSTRUCTIONS FOR THE NEW YORK STATE UNIFORM HAZARDOUS WASTE MANIFEST

General Information

New York State regulation requires proper completion of all information on a manifest. Omissions, false coding or illegibility is considered a violation. All generators are responsible under New York State and Federal Law for the proper identification, labeling, manifesting and ultimate disposal of all hazardous waste they generate. The manifest system is designed to track hazardous waste from the point of generation until its final disposal (cradle to grave). In order to accomplish this goal, it is essential that all **items on a manifest be properly completed.**

Distribution

Distribution of each copy of the manifest is indicated on the bottom of the form. Copies of the manifest must be mailed promptly. New York State regulations provide five (5) working days for generator and two (2) for a TSDF. The disposer's state is the state in which the designated TSD facility is located. Generator's state is the state in which the installation generating the hazardous waste is located. TSD facility is a treatment, storage or disposal facility.

Generator Section

Item 1-Enter the US EPA ID number (twelve digit number issued by the federal government). The generator must assign a sequential unique, five digit number different for each manifest, as the manifest document number.

Item 2-If a continuation sheet is used, please enter the total number of sheets here. Any EPA approved continuation sheet may be used, but distribution and completion must meet New York manifest requirements. The document number in Item A must be placed in Item L of each continuation sheet.

Items 3-and **4**-Self explanatory. These must correspond to the generator's US EPA ID number.

Items 5, 6, 7 and **8**- These are self-explanatory. These numbers must be secured from the transporter. If more than one transporter is used, the generator must supply additional copies of this manifest for each transporter copy (#5).

Items 9 and **10**-The designated TSD facility, name, address and ID number should appear here.

NOTE: All US EPA ID numbers are a twelve digit code starting off with the letters corresponding to the state in which the facility or transporter is located.

NOTE: Only New York State authorized transporters and TSD facilities are allowed to transport or receive hazardous waste in New York State. The generator shall check for authorization.

Item 11-USDOT requires the word "waste" before or in the shipping name for all hazardous waste. See 49 CFR 171 thru 177. Contact USDOT office for description assistance. Any waste in this box is considered a hazardous waste.

Item 12-

Number-indicate number of containers (use whole numbers).

Containers/Type

DM-Metal drums, barrels, kegs	DT-Dump trucks
DW-Wooden drums, barrels, kegs	CY-Cylinders
DF-Fiberboard or plastic drums, kegs	CM-Metal boxes, cartons, cases, roll-offs
TP-Tanks, portable	CW-Wooden boxes, cartons, cases
TT-Cargo tank, tank trucks	CF-Fiber or plastic boxes, cartons, cases
TC-Tank cars	BA-Burlap, cloth, paper or plastic bags

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to: Chief Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street S.W., Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503

Item 13-Actual number of units indicated in box 14. (Do not use fractions or decimals).

Item 14-Units (wt/vol)

G-Gallons (liquids only)	L-Liters (liquids only)
P-Pounds	K-Kilograms
T-Tons (2,000 pounds)	M-Metric Tons (1,000 kilograms)
Y-Cubic Yards	N-Cubic Meters

Item 15-Use this space to indicate special transportation, treatment, storage or disposal or Bill of Lading information. If an alternate facility is designated, note it here. For international shipments, enter point of departure. Emergency response telephone numbers, or similar information may be included here.

Item 16-The authorized agent of the generator must read and then sign (by hand) and date this certification. The date is the date of receipt by transporter.

NEW YORK STATE REQUIRES THIS ADDITIONAL INFORMATION

Item A-Number preprinted by New York State Department of Environmental Conservation (NYSDEC).

Item B-Generator site address if different from mailing address. If same, write in same.

Item C and **E**-State of registration and motor vehicle license plate number of waste carrying portion of vehicle used to transport.

Item D and **F**-Telephone number of authorized agent.

Item G-No entry required by NYSDEC

Item H-Telephone number at site of TSD facility.

Item I-Hazardous waste numbers (letter and three digits) as assigned by 6 NYCRR Part 371 or 40 CFR 261 must be used to identify hazardous waste. Enter in top box by EPA. If waste is not hazardous in New York but regulated by another state, enter that state's waste code in bottom box.

Item J-If description in Item 11 (a,b,c,d) contains NOS or other general term, the hazardous waste constituent must be provided here for each. The specific gravity assumed to be one (1.00) unless indicated in lower right of each box.

Item K-Each material **must** be assigned an ultimate disposal method code as follows: L=Landfill, B=Incineration, heat recovery, burning, T=Chemical, physical, or biological treatment, R=Material recovery of more than 75 percent of the total material. Both the generator and the TSDF should agree on codes assigned in this item.

Transporter Section

Items 17 and **18**-Print or type the full name of person accepting responsibility and acknowledging receipt of material as listed on manifest for transport. Enter date of receipt and signature.

TSDF Section

Item 19-The authorized representative of the TSDF must note in the space any discrepancy between waste described on manifest and waste actually received. Any rejected materials should be listed and destination of those materials provided.

Item 20-The signature (by hand) of the authorized TSDF agent indicates acceptance (except for Item 19) and agreement with statements on this manifest. The date is the date of signature and receipt of shipment. A TSDF not providing ultimate disposal agrees to transfer waste to a TSDF authorized to provide ultimate disposal as indicated in Item K.

Additional Information

1. If the disposer state supplies a manifest, that state's form must be used. In any case, New York requires that both the generator and TSDF mail copies to the generator's state and the disposer's state, with the ultimate disposal method indicated in Item K.
2. There may be variations in the requirements between various states regarding Items A thru K, therefore, the generator should contact the disposer's state for specific details.
3. If assistance is needed in completion of this manifest, please contact NYSDEC Data Management Section at 518/402-8738 weekdays from 9:00 a.m. to 4:00 p.m.

GRAYMILLS CORPORATION

MATERIAL SAFETY DATA SHEET

Conforms to OSHA form No. 1218-0072
Complies with OSHA hazard communication standard, 29CFR1910.1200

NFPA HAZARD RATING
HEALTH = 1
FLAMMABILITY = 2
REACTIVITY = 0

IDENTITY: Super Agitene - Cleaning compound, combustible liquid. UN#1268

SECTION I

MANUFACTURERS NAME:
Graymills Corporation

ADDRESS:
3705 N. Lincoln Avenue
Chicago, Illinois 60613

EMERGENCY #: 1-800-424-9300

TELEPHONE #: (312) 477-4100

DATE PREPARED: February 28, 1992

PREPARERS SIGNATURE:

SECTION II - HAZARDOUS INGREDIENTS/IDENTITY INFORMATION

HAZARDOUS COMPONENTS (SPECIFIC CHEMICAL IDENTITY/COMMON NAME(S):	OSHA PEL	ACGIH TLV	CAS#
Aliphatic Petroleum Distillate	100 PPM	100 PPM	64742-47-8
Dipropylene Glycol Methyl Ether	100 PPM	100 PPM	34590-94-8

SECTION III - PHYSICAL/CHEMICAL CHARACTERISTICS

BOILING POINT (F.):		318°-388°	SPECIFIC GRAVITY (WATER=1)	.78
VAPOR PRESSURE (mm Hg):	@25°C	10.0	MELTING POINT:	None
VAPOR DENSITY (AIR=1):		4.8	EVAPORATION RATE (N-BUTYL ACETATE=1)	<0.1
VOC:		780g/l		

SOLUBILITY IN WATER: None

APPEARANCE & ODOR: Clear green, mild mineral spirits odor.

SECTION IV - FIRE AND EXPLOSION HAZARD DATA

FLASH POINT(METHOD USED):	FLAMMABLE LIMITS:	LEL	UEL
110°F Tag CC (ASTM D56)		0.6%	7.0%

EXTINGUISHING MEDIA:
CO(2) foam, dry chemicals, water spray (fog).

SPECIAL FIRE FIGHTING PROCEDURES: Cool sealed drums with water to lessen chance of rupture. Wear self-contained breathing gear. Minimize breathing of gases, vapors or decomposition products.

UNUSUAL FIRE AND EXPLOSION HAZARDS:
Combustible liquid, drums could fracture if heated. Autoignition temperature

SECTION V - REACTIVITY DATA

STABILITY	UNSTABLE		CONDITIONS TO AVOID: Heating strictly forbidden
	STABLE	X	

INCOMPATIBILITY (MATERIAL TO AVOID): Acids, strong oxidizers such as liquid chlorine, concentrated oxygen, sodium hypochlorite, calcium hypochlorite.
HAZARDOUS DECOMPOSITION OF BYPRODUCTS: Carbon dioxide,carbon monoxide, fumes, smoke, aldehydes upon incomplete combustion.

HAZARDOUS POLYMERIZATION	MAY OCCUR		CONDITIONS TO AVOID: None
	WILL NOT OCCUR	X	

SECTION VI - HEALTH HAZARD DATA

ROUTE(S) OF ENTRY	INHALATION	X	SKIN	X	INGESTION	X

HEALTH HAZARDS (ACUTE & CHRONIC): Skin irritation.
Oral: LD 50 >4000 mg/kg - Rat Dermal: LD 50 >2200 mg/kg - Rabbit
Inhalation: LD 50 >5000 ppm - Rat

CARCINOGENICITY	NTP	No	IARC MONOGRAPHS	No	OSHA REGULATED	No

SIGNS & SYMPTOMS OF EXPOSURE:
Skin or eye irritation, dizzyness, headache.
MEDICAL CONDITIONS GENERALLY AGGRAVATED BY EXPOSURE:
Skin allergies; respiratory allergies.
EMERGENCY & FIRST AID PROCEDURES:
Skin contact: Flush with water. Use lanolin cream.
Inhalation: Get oxygen or fresh air, call doctor.
Ingestion: Do not induce vomiting, call doctor.

SECTION VII - PRECAUTIONS FOR SAFE HANDLING AND USE

STEPS TO BE TAKEN IN CASE MATERIAL IS RELEASED OR SPILLED: Use absorbent material or sand. Shovel into waste container. Dispose of properly.
WASTE DISPOSAL METHOD: Reclaim by distillation or have disposal performed by a licensed waste hauler. Waste disposal #D001.
PRECAUTIONS TO BE TAKEN IN HANDLING & STORING:
Store in cool area away from heat or open flames.
OTHER PRECAUTIONS:
Not biodegradable.

SECTION VIII - CONTROL MEASURES

RESPIRATORY PROTECTION (SPECIFY TYPE): None

VENTILATION	LOCAL EXHAUST: None MECHANICAL (GENERAL): General room ventilation	SPECIAL: None OTHER: None

PROTECTIVE GLOVES:	Rubber or Buna	EYE PROTECTION:	Chemical splash goggles

OTHER PROTECTIVE CLOTHING OR EQUIPMENT:
For constant use, rubber gloves and solvent resistant apron are recommended.
WORK/HYGIENIC PRACTICES:
Use lanolin cream if gloves are not worn.

WASTE CONTROL
SPECIALISTS LLC

October 9, 2007

Peter DiPietrantonio
Sulzer-Metco (US), Inc.
1101 Prospect Ave
Westbury, NY 11590

Dear Mr. DiPietrantonio:

Thank you for selecting Waste Control Specialists, LLC as your Treatment, Storage, and Disposal Facility. We value your business and hope to be of future service.

This letter serves as confirmation that we are in receipt of the waste described on the below referenced manifest. Enclosed, please find your signed original manifest indicating that the waste was received at the WCS Facility in Andrews, Texas on 09/28/2007.

WCS is committed to providing a level of customer service unequaled in the industry today. If you have any questions regarding this manifest, please do not hesitate to contact me at (888) 789-2783.

Again thank you for selecting Waste Control Specialists, LLC.

Sincerely,

Victoria Gutierrez
Manifest Coordinator

Re: Manifest
001251031JJK
N/A

Corporate
5430 LBJ Freeway, Ste. 1700
Three Lincoln Centre
Dallas, TX 75240
Ph. 972.715.9800
Fx. 972.448.1419

Facility
P.O. Box 1129
Andrews, TX 79714
Ph. 888.789.2783
Fx. 505.394.3427

NYC 543467-2

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4/97)

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Document No.

2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number NYC 543467-2

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a.	11		77		EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. | c.

b. | d.

K. Handling Codes for Wastes Listed Above

a. | c.

b. | d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR,** if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford

Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

COPY 5-Generator-Mailed by TSD facility

P2SUL005508

NYC 543467-2

2-118-08

Please print or type. DO NOT STAPLE.

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

(Hazardous Waste Manifest 4/97)

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No.: NYD 057731663
Manifest Document No.: 78413
2. Page 1 of 1

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address
SULZER METCO (US), INC
325 DUFFY AVENUE
HICKSVILLE NY 11808
4. Generator's Phone (516) 338-2517

A. State Manifest Document Number: NYC 543467-2
B. Generator's ID: SAME

5. Transporter 1 (Company Name): SAFETY-KLEEN CORP.
6. US EPA ID Number: ILD 984908202
C. State Transporter's ID: E112621 (NY)
D. Transporter's Telephone (516) 842-6311

7. Transporter 2 (Company Name):
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address 211808
SAFETY-KLEEN SYSTEMS, INC
80 SEABRO
NO AMITYVILLE, NY 11701
10. US EPA ID Number: NYD 000708198
G. State Facility ID:
H. Facility's Telephone (516) 842-6311

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a. WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII(D001) (D006, D008, D018, D027D039D040) (ERG#128)	11	DM	97	G	EPA D001 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

GENERATOR

J. Additional Descriptions for Materials Listed Above
I (A) D006 D008
a. (A) D018, D027, D039, D040
c.
b.
d.

K. Handling Codes for Wastes Listed Above
a. R
c.
b.
d.

15. Special Handling Instructions and Additional Information
*
EMERGENCY RESP#1-800-468-1760 24HR
9839 95972775 778413 2-118-08-1500 XX

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Printed/Typed Name: LOUIS A SCAVO
Signature: Louis A Scavo
Mo. Day Year: 10 02 98

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: RICHARD ANDERSON
Signature: R Anderson
Mo. Day Year: 10 02 98

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name:
Signature:
Mo. Day Year:

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name:
Signature:
Mo. Day Year:

A: 10082 B: C: D:

COPY 3-Disposer State-mailed by generator

P2SUL005509

NYC 543467-2

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4/97)

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Document No.

2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number NYC 543467-2

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. | c.

b. | d.

K. Handling Codes for Wastes Listed Above

a. | c.

b. | d.

15. Special Handling Instructions and Additional Information

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Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name | Signature | Mo. Day Year

COPY 8-Generator-retained by generator

P2SUL005510

TO: SAFETY-KLEEN SYSTEMS, INC.
80 SEABRO
NO AMITYVILLE, NY 11701

EPA ID NO. NYD000708198
(DESIGNATED FACILITY)

UNDER MANIFEST/SALES SERVICE NUMBER Nyc543467-2 THE GENERATOR NOTED BELOW IS SHIPPING YOU A WASTE DETERMINED TO BE RESTRICTED UNDER 40 CFR PART 268. IN ACCORDANCE WITH 40 CFR 268.7 AND 6NYCRR 376.4(C), THE GENERATOR HEREBY PROVIDES NOTICE THAT THE WASTE IS RESTRICTED FROM LAND DISPOSAL. A COPY OF THIS FORM MUST BE KEPT BY THE GENERATOR FOR FIVE(5) YEARS FROM THE DATE OF SHIPMENT.

WASTE NAME: 662 SOLVENT 105 D001 SKDOT#: 0010082
WASTE CODE(S): D001 D006 D008 D018 D027 D039 D040
TREATABILITY GROUP: NONWASTEWATERS

EPA WASTE CODE	WASTE DESCRIPTION AND TREATMENT/REGULATORY SUBCATEGORY OR REGULATED HAZARDOUS CONSTITUENT	TREATMENT STANDARD (*) CONCENTRATION OR TECHNOLOGY CODE
D001	HIGH TOC IGNITABLE CHARACTERISTIC WASTE.	RORGS; OR CMBST **
D006	CADMIUM (CD)	1.0 MG/L TCLP
D006	CADMIUM (CD)	0.11 MG/L ******
D006	CADMIUM CONTAINING BATTERIES SUBCATEGORY	RTHRM ******
D008	LEAD (PB)	5.0 MG/L EP OR TCLP
D008	LEAD (PB)	0.75 MG/L ******
D008	LEAD ACID BATTERIES SUBCATEGORY	RLEAD ******
D008	RADIOACTIVE LEAD SOLIDS SUBCATEGORY	MACRO ******
D018	BENZENE	10 MG/KG ****
D027	P-DICHLOROBENZENE (1,4-DICHLOROBENZENE)	6.0 MG/KG ****
D039	TETRACHLOROETHYLENE	6.0 MG/KG ****
D040	TRICHLOROETHYLENE	6.0 MG/KG ****

N O T E S

THE CONSTITUENT COMPOSITION IS BASED ON KNOWLEDGE OF THE WASTE (VIA MATERIAL SAFETY DATA SHEETS FOR THE CHEMICAL(S) USED, AND THE PROCESS WHICH CREATED THE WASTE).

NOTES: * THESE TREATMENT STANDARDS DO NOT PRECLUDE RECLAMATION PRIOR TO FINAL DISPOSITION.
** NEW TREATMENT STANDARDS UNDER FEDERAL RULES EFFECTIVE 12-19-94.
*** TREATMENT STANDARDS APPLICABLE IN CERTAIN HSWA-AUTHORIZED STATES AND MEET UNIVERSAL TREATMENT STANDARDS.
**** NEW TREATMENT STANDARDS UNDER FEDERAL RULES EFFECTIVE 7-8-96.
******NEW TREATMENT STANDARDS UNDER FEDERAL RULES EFFECTIVE 8-24-98.

UHC NOTICE: GENERATOR IS NOT REQUIRED TO LIST UNDERLYING CONSTITUENTS WHEN TREATER MONITORS FOR ALL REGULATED CONSTITUENTS PRIOR TO DISPOSAL.

EXP NOTICE: THIS LDRN EXPIRES ON 12/31/98.

GENERATOR NAME: SULZER METCO (US), INC EPA ID: NYD057731663

SEQ#: 2356 LOC: 211808 CUST: 2-118-08-1500 TERR: XX RTF#: 778413 SW: 9839

TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFER

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to: State of NY
Department of Env. Conservation
Division of Solid & Haz. Matls.
Manifest Section
P.O. Box 12820
Albany, NY 12212

4a. Article Number
Z 593 811 007

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: *(Print Name)*

6. Signature: *(Addressee or Agent)*
X

8. Addressee's Address *(Only if requested and fee is paid)*

Thank you for using Return Receipt Service.

PS Form **3811**, December 1994 102595-98-B-0229 Domestic Return Receipt

Z 593 811 007

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail *(See reverse)*

Sent to NYS DEC./Div.Solid & Haz. Manifest Section	
Street & Number P.O. Box 12820	
Post Office, State, & ZIP Code Albany, NY 12212	
Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form **3800**, April 1995

Fold at line over top of envelope to the right of the return address

CERTIFIED

Z 593 811 007

MAIL

UNITED STATES POSTAL SERVICE

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Print your name, address, and ZIP Code in this box •

Mr. Michael S. Lydon
Sulzer Metco Inc.
1101 Prospect Avenue
Westbury, NY 11590-0201

TO EXPOSE ADHESIVE REMOVE LINER

P2SUL005514

NYC 585621-0

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4/97)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Document No.

2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number: NYC 585621-0

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. | c.

b. | d.

K. Handling Codes for Wastes Listed Above

a. | c.

b. | d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

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Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

COPY 5-Generator-Mailed by TSD facility

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

NYC 585621-0

2-118-08

Please print or type. DO NOT STAPLE.

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

(Hazardous Waste Manifest 4/97)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No.: NYD 131318651
Manifest Document No.: 32645
2. Page 1 of 1

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address
SULZER METCO INC
1101 PROSPECT AVE
WESTBURY NY 11590

4. Generator's Phone (516) 999-9999

A. State Manifest Document Number: NYC 585621-0

B. Generator's ID: SAME

5. Transporter 1 (Company Name): SAFETY-KLEEN SYSTEMS, INC
6. US EPA ID Number: ILD 984908202

C. State Transporter's ID: NY 137154

D. Transporter's Telephone: (516) 842-6311

7. Transporter 2 (Company Name):
8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address: 211808
SAFETY-KLEEN SYSTEMS, INC
80 SEABRO
NO AMITYVILLE, NY 11701

10. US EPA ID Number: NYD 000708198

G. State Facility ID:

H. Facility's Telephone: (516) 842-6311

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a. HAZARDOUS WASTE, LIQUID, N.O.S. 9 NA3082 PG III (D039)(ERG#171) AQUEOUS PARTS WASHER SOLUTION	1	DM	21	G	EPA D039 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
a.
b.
c.
d.

K. Handling Codes for Wastes Listed Above
a. T
b.
c.
d.

15. Special Handling Instructions and Additional Information

EMERGENCY RESP#1-800-468-1760 24HR

9929 97424174 0000432645 2118081642 01

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Bill Bouchard
Signature: B. Bach
Mo. 07 Day 26 Year 99

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: Eugene Carroll
Signature: Eugene Carroll
Mo. 07 Day 26 Year 99

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name:
Signature:
Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name:
Signature:
Mo. Day Year

COPY 3 - Disposer State-mailed by generator

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

NYC 585621-0

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4/97)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Document No.

2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number NYC 585621-0

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. c.

b. d.

K. Handling Codes for Wastes Listed Above

a. c.

b. d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR,** if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford

Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

COPY 8-Generator-retained by generator

K54474-R5732 SAFETY-KLEEN 06/28/99 PAGE: 1
LOCATION: 211808 LDR NOTIFICATION FORM 20:49:24

GENERATOR NAME: SULZER METCO INC MANIFEST NO.: MC 565621-0
OR SALES SERVICE NO.: 432645

CUST#: 2-118-08-1642

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01A SK PROFILE NO.: 0000
SKDOT#: 0010070

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D039

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSITITUENT NOTIFICATION - LEGEND CONSITITUENT#NONE

11-a

N O T E S

EXP NOTICE: THIS LDR EXPIRES ON 12/31/1999.

B. Bouchard Bill Bouchard MGR 7, 26, 99

GENERATOR'S AUTHORIZED SIGNATURE | NAME & TITLE (PRINTED OR TYPED) | DATE

SEQ#: 1349 LOC: 211808 TERR: 01 REF#: 432645 SW: 9929

TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFE

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
Division of Solid & Hazarous Waste
Manifest Section
P.O.Box 12820
Albany, N.Y. 12212

4a. Article Number
P 341 833 744

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: *(Print Name)*

6. Signature: *(Addressee or Agent)*
X

8. Addressee's Address *(Only if requested and fee is paid)*

Thank you for using Return Receipt Service.

PS Form **3811**, December 1994 102595-98-B-0229 Domestic Return Receipt

P 341 833 744

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail *(See reverse)*

Sent to
Division of Solid&Haz.Waste
Street & Number
Manifest Section/P.O.Box 12820
Post Office, State, & ZIP Code
Albany, N.Y. 12212

Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form **3800**, April 1995

Fold at line over top of envelope to the right of the return address

CERTIFIED

P 341 833 744

MAIL

ESI Form 540 (6/99) — This form contains all of the information required in the NRC form 540 (3 95)

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST SHIPPING PAPER

5. Shipper - Name and Facility
Ecology Services, Inc. C/O
Sulzer-Metco (US), Inc.
1101 Prospect Ave.
Westbury, NY 11590

Shipper I.D. Number: N/A
Collector
Processor

7. NRC Form 540 and 540A — Page 1 of 2 Page(s)
NRC Form 541 and 541A — 4 Page(s)
NRC Form 542 and 542A — 0 Page(s)
Additional Information — 0 Page(s)

8. Manifest Number (Use this number on all continuation pages): 70219-05

Emergency Telephone Number (Include Area Code): (410) 377-3742

User Permit Number: N/A

Shipment Number: 70219

☒ Generator type (specify)
Other

9. Consignee - Name and Facility Address
Energy Solutions, Inc. Bear Creek Facility
1560 Bear Creek Road
Oak Ridge, TN 37831-2530

Contact: Donnie Brackett
Telephone Number: (865) 220-1628

Organization: ECOLOGY SERVICES, INC.

Contact: Peter DiPietrantonio

Telephone Number (Include Area Code): (516) 338-2337

Signature - Authorized consignee acknowledging waste receipt

Date

2. Is this an "Exclusive Use" shipment?
☐ YES
☒ NO

3. Total number of packages identified on this manifest ==> 25

Carrier - Name and Address
Tri State Motor Transit Co.
PO Box 113
Joplin, MO 64802

EPA ID Number: MOD095038998
Shipping Date: 02/21/07

10. Certification
This is to certify that the herein named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation. This also certifies that the materials are classified, packaged, marked, and labeled and are in proper condition for transportation and disposal as described in accordance with the requirements of 10 CFR Parts 20 and 61, or equivalent state regulations.

4. Does EPA regulated waste requiring a manifest accompany this shipment? ☐ YES ☒ NO
If "yes" provide manifest number ==========>

EPA Manifest Number: N/A

Contact: Cassie Gardner

Signature - Authorized carrier acknowledging waste receipt

Telephone Number (Include Area Code): 800-234-8768

Date: 2-21-07

Authorized Signature: Marion Feldhusen

Title: EH+S Specialist

Date: 2-21-07

11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (including proper shipping name, hazard class, UN ID number, and any additional information)	12. DOT LABEL "RADIOACTIVE"	13. TRANSPORT INDEX	14. PHYSICAL AND CHEMICAL FORM	15. INDIVIDUAL RADIONUCLIDES			16. TOTAL PACKAGE ACTIVITY IN SI UNITS	17. LSA/SCO CLASS	18. TOTAL WEIGHT OR VOLUME (use appropriate units)	19. IDENTIFICATION NUMBER OF PACKAGE
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	29.0 kg	01
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	38.1 kg	02
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	31.8 kg	03
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	19.5 kg	04
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	29.5 kg	05
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	26.3 kg	06
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	29.0 kg	07
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	26.8 kg	08

For Consignee Use Only

ESI Form 540A
(6/99)

This form contains all of the information required in the NRC form 540A

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST
SHIPPING PAPER
Continuation Sheet

8. Manifest Number
(Use this number on all continuation pages)
70219-05

11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (including proper shipping name, hazard class, UN ID number, and any additional information)	12. DOT LABEL "RADIOACTIVE"	13. TRANSPORT INDEX	14. PHYSICAL AND CHEMICAL FORM	15. INDIVIDUAL RADIONUCLIDES			16. TOTAL PACKAGE ACTIVITY IN SI UNITS	17. LSA/SCO CLASS	18. TOTAL WEIGHT OR VOLUME (use appropriate units)	19. IDENTIFICATION NUMBER OF PACKAGE
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	29.5 kg	09
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	27.2 kg	10
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	26.3 kg	11
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	24.5 kg	12
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	21.8 kg	13
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	31.8 kg	14
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	29.0 kg	15
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	24.0 kg	16
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	26.3 kg	17
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	20.0 kg	18
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	30.9 kg	19
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	29.0 kg	20
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	25.4 kg	21
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	19.5 kg	22
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	17.2 kg	23
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	29.0 kg	24
Radioactive Material, Excepted Package – Limited Quantity of Material, 7, UN 2910	N/A	N/A	Solid: salts	Th-nat			5.550 MBq (150.000 µCi)	N/A	38.1 kg	25

ESI Form 541
(3/95)

This form contains all of the information required in the NRC form 541

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

CONTAINER AND WASTE DESCRIPTION

Additional Nuclear Regulatory Commission (NRC) Requirements for Control, Transfer and Disposal of Radioactive Waste

1. MANIFEST TOTALS

Number of packages/ disposal containers	Net Waste Volume (m^3)	Net Waste Weight (kg)	Special Nuclear Material (grams) U-233	U-235	Pu	Total
25	0.450	650.5	None	None	None	None

Activity (MBq) All Nuclides	Tritium	C-14	Tc-99	I-129	Source (Kg)
138.750 MBq (3.750 mCi)	None	None	None	None	0.825

2. Manifest Number: 70219-05

3. Page 1 of 4 Page(s)

4. Shipper Name
Sulzer-Metco (US), Inc.

Shipper ID Number:
N/A

Disposal Container Description							Waste Description for Each Waste Type in Container							
							Physical Description			14. Chemical Description		15. Radiological Description		16. Waste Classification
5. Container Identification Number/ Generator ID Number(s)	6. Container Description (See Note 1)	7. Volume (m^3)	8. Waste And Container Weight (kg)	9. Surface Radiation Level (μSv/hr)	10. Surface Contamination MBq/100 cm^2 Alpha	Beta-Gamma	11. Waste Descriptor (See Note 2)	12. Approximate Waste Volume(s) in Container	13. Sorbent Solidifcation, Stabilization, Media (See Note 3)	Chemical Form/ Chelating Agent	Weight % Chelating Agent If > 0.1%	Individual Radionuclides and Activity (MBq) and Container Total; or Container Total Activity and Radionuclide Percent		AS-Class A Stable AU-Class A Unstable B-Class B C-Class C
01	03	0.018	29.0	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 μCi)	Total Activity: 5.550 MBq (150.00 μCi)	AU
02	03	0.018	38.1	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 μCi)	Total Activity: 5.550 MBq (150.00 μCi)	AU
03	03	0.018	31.8	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 μCi)	Total Activity: 5.550 MBq (150.00 μCi)	AU
04	03	0.018	19.5	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 μCi)	Total Activity: 5.550 MBq (150.00 μCi)	AU
05	03	0.018	29.5	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 μCi)	Total Activity: 5.550 MBq (150.00 μCi)	AU
06	03	0.018	26.3	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 μCi)	Total Activity: 5.550 MBq (150.00 μCi)	AU
07	03	0.018	29.0	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 μCi)	Total Activity: 5.550 MBq (150.00 μCi)	AU

NOTE 1 Container Description Codes. For containers wastes requiring disposal in approval structural overpacks, the numerical code must be followed by "-OP".

1. Wooden Box or Crate
2. Metal Box
3. Plastic Drum or Pail
4. Metal Drum or Pail
5. Metal Tank or Liner
6. Concrete Tank or Liner
7. Polyethylene Tank or Liner
8. Fiberglass Tank or Liner
9. Demineralizer
10. Gas Cylinder
11. Bulk, Unpackaged Waste
12. Unpackaged Components
13. High Integrity Container
14. Corrugated Box
19. Other Describe in item 6. or additional page
20. SeaLand Container

NOTE 2: Waste Description Codes. (Chose up to three, which predominate by volume.)

20. Charcoal
21. Incinerator Ash
22. Soil
23. Gas
24. Oil
25. Aqueous Liquid
26. Filter Media
27. Mechanical Filter
28. EPA or State Hazardous
29. Demolition Rubble
30. Cation Ion-exchange Media
31. Anion Ion-exchange Media
32. Mixed Bed Ion-exchange Media
33. Contaminated Equipment
34. Organic Liquid (except oil)
35. Glassware or Labware
36. Sealed Source Device
37. Paint or Plating
38. Evaporator Bottoms Sludges Concentrates
39. Compactible Trash
40. Noncompactible Trash
41. Animal Carcass
42. Biological Material (except animal Carcass)
43. Activated Material
50. LS Vials
59. Other Describe in item 11. or additional page

NOTE 3. Sorption, Solidification, Stabilization Media Codes. (Choose up to three, which predominate by volume.) For media meeting disposal site structural stability requirements, the numerical code must be followed by "-S" and the media vendor and brand name must also be identified in item 13. Code 100 = NONE REQUIRED.

Sorption

60. Speedi Dri
61. Celetom
62. Floor Dry/ Superfine
63. Hi Dri
64. Safe T Sorb
65. Safe N Dri
66. Floorco
67. Floorco X
68. Solid A Sorb
69. Chemsil 30
70. Chemsil 30
71. Chemsil 3030
72. Dicaperl HP200
73. Dicaperl HP500
74. Petroset
75. Petroset II
76. Adjunset
77. Adjunset II
78. Vermiculite
89. Other Describe in item 13 or additional page

Solidification

90. Cement
91. Concrete (encapsulation)
92. Bitumen
93. Vinyl Chloride
94. Vinyl Ester Styrene
99. Other Describe in item 13 or additional page
100. None Required

ESI Form 541 A
541A (3.95)

This form contains all of the information required in the NRC form

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

CONTAINER AND WASTE DESCRIPTION

Additional Nuclear Regulatory Commission (NRC) Requirements for Control, Transfer and Disposal of Radioactive Waste

CONTINUATION PAGE

Disposal Container Description							Waste Description for Each Waste Type in Container							
							Physical Description			14. Chemical Description		15. Radiological Description		16. Waste Classification
5. Container Identification Number/ Generator ID Number(s)	6. Container Description (See Note 1)	7. Volume (m^3)	8. Waste And Container Weight (kg)	9. Surface Radiation Level (µSv/hr)	10. Surface Contamination MBq/100 cm^2 Alpha	Beta-Gamma	11. Waste Descriptor (See Note 2)	12. Approximate Waste Volume(s) in Container	13. Sorbent Solidifcation, Stabilization, Media (See Note 3)	Chemical Form/ Chelating Agent	Weight % Chelating Agent If > 0.1%	Individual Radionuclides and Activity (MBq) and Container Total; or Container Total Activity and Radionuclide Percent		AS-Class A Stable AU-Class A Unstable B-Class B C-Class C
08	03	0.018	26.8	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 µCi)	Total Activity: 5.550 MBq (150.00 µCi)	AU
09	03	0.018	29.5	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 µCi)	Total Activity: 5.550 MBq (150.00 µCi)	AU
10	03	0.018	27.2	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 µCi)	Total Activity: 5.550 MBq (150.00 µCi)	AU
11	03	0.018	26.3	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 µCi)	Total Activity: 5.550 MBq (150.00 µCi)	AU
12	03	0.018	24.5	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 µCi)	Total Activity: 5.550 MBq (150.00 µCi)	AU
13	03	0.018	21.8	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 µCi)	Total Activity: 5.550 MBq (150.00 µCi)	AU
14	03	0.018	31.8	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 µCi)	Total Activity: 5.550 MBq (150.00 µCi)	AU

NOTE 1 Container Description Codes. For containers waste requiring disposal in approved structural overpacks, the numerical code must be followed by "-OP".

1. Wooden Box or Crate
2. Metal Box
3. Plastic Drum or Pail
4. Metal Drum or Pail
5. Metal Tank or Liner
6. Concrete Tank or Liner
7. Polyethylene Tank or Liner
8. Fiberglass Tank or Liner
9. Demineralizer
10. Gas Cylinder
11. Bulk, Unpackaged Waste
12. Unpackaged Components
13. High Integrity Container
14. Corrugated Box
19. Other. Describe in item 6. or additional page
20. SeaLand Container

NOTE 2: Waste Description Codes. (Chose up to three, which predominate by volume.)

20. Charcoal
21. Incinerator Ash
22. Soil
23. Gas
24. Oil
25. Aqueous Liquid
26. Filter Media
27. Mechanical Filter
28. EPA or State Hazardous
29. Demolition Rubble
30. Cation Ion-exchange Media
31. Anion Ion-exchange Media
32. Mixed Bed Ion-exchange Media
33. Contaminated Equipment
34. Organic Liquid (except oil)
35. Glassware or Labware
36. Sealed Source Device
37. Paint or Plating
38. Evaporator Bottoms Sludges Concentrates
39. Compactible Trash
40. Noncompactible Trash
41. Animal Carcass
42. Biological Material (except animal Carcass)
43. Activated Material
50. LS Vials
59. Other. Describe in item 11. or additional page

NOTE 3 Sorption, Solidification, Stabilization Media Codes. (Choose up to three, which predominate by volume.) For media meeting disposal site structural stability requirements, the numerical code must be followed by "-S" and the media vendor and brand name must also be identified in item 13. Code 100 = NONE REQUIRED.

Sorption

60. Speedi Dri
61. Celsorb
62. Floor Dry Superfine
63. Hi Dri
64. Safe T Sorb
65. Safe N Dri
66. Floroc
67. Floroc X
68. Solid A Sorb
69. Chemsil 30
70. Chemsil 50
71. Chemsil 3030
72. DuaPerl HP200
73. DuaPerl HP500
74. Petrosat
75. Petrosat II
76. Aquaset
77. Aquaset II
78. Vermiculite
89. Other. Describe in item 13 or additional page

Solidification

90. Cement
91. Concrete (encapsulation)
92. Bitumen
93. Vinyl Chloride
94. Vinyl Ester Styrene
99. Other. Describe in item 13 or additional page
100. None Required

ESI Form 541 A
541A (3 95)

This form contains all of the information required in the NRC form

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

CONTAINER AND WASTE DESCRIPTION

Additional Nuclear Regulatory Commission (NRC) Requirements for Control, Transfer and Disposal of Radioactive Waste

CONTINUATION PAGE

Disposal Container Description							Waste Description for Each Waste Type in Container							16. Waste Classification
							Physical Description			14. Chemical Description		15. Radiological Description		
5. Container Identification Number/ Generator ID Number(s)	6. Container Description (See Note 1)	7. Volume (m^3)	8. Waste And Container Weight (kg)	9. Surface Radiation Level (µSv/hr)	10. Surface Contamination MBq/100 cm^2 Alpha	Beta-Gamma	11. Waste Descriptor (See Note 2)	12. Approximate Waste Volume(s) in Container	13. Sorbent Solidifcation, Stabilization, Media (See Note 3)	Chemical Form/ Chelating Agent	Weight % Chelating Agent If > 0.1%	Individual Radionuclides and Activity (MBq) and Container Total; or Container Total Activity and Radionuclide Percent		AS-Class A Stable AU-Class A Unstable B-Class B C-Class C
15	03	0.018	29.0	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten, Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 µCi)	Total Activity: 5.550 MBq (150.00 µCi)	AU
16	03	0.018	24.0	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten, Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 µCi)	Total Activity: 5.550 MBq (150.00 µCi)	AU
17	03	0.018	26.3	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten, Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 µCi)	Total Activity: 5.550 MBq (150.00 µCi)	AU
18	03	0.018	20.0	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten, Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 µCi)	Total Activity: 5.550 MBq (150.00 µCi)	AU
19	03	0.018	30.9	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten, Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 µCi)	Total Activity: 5.550 MBq (150.00 µCi)	AU
20	03	0.018	29.0	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten, Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 µCi)	Total Activity: 5.550 MBq (150.00 µCi)	AU
21	03	0.018	25.4	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten, Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 µCi)	Total Activity: 5.550 MBq (150.00 µCi)	AU

NOTE 1 Container Description Codes. For containers waste requiring disposal in approved structural overpacks, the numerical code must be followed by "-OP".

1. Wooden Box or Crate
2. Metal Box
3. Plastic Drum or Pail
4. Metal Drum or Pail
5. Metal Tank or Liner
6. Concrete Tank or Liner
7. Polyethylene Tank or Liner
8. Fiberglass Tank or Liner
9. Demineralizer
10. Gas Cylinder
11. Bulk, Unpackaged Waste
12. Unpackaged Components
13. High Integrity Container
14. Corrugated Box
19. Other. Describe in item 6 or additional page
20. SeaLand Container

NOTE 2 Waste Description Codes. (Chose up to three, which predominate by volume.)

20. Charcoal
21. Incinerator Ash
22. Soil
23. Gas
24. Oil
25. Aqueous Liquid
26. Filter Media
27. Mechanical Filter
28. EPA or State Hazardous
29. Demolition Rubble
30. Cation Ion-exchange Media
31. Anion Ion-exchange Media
32. Mixed Bed Ion-exchange Media
33. Contaminated Equipment
34. Organic Liquid (except oil)
35. Glassware or Labware
36. Sealed Source Device
37. Paint or Plating
38. Evaporator Bottoms Sludges Concentrates
39. Compactable Trash
40. Noncompactable Trash
41. Animal Carcass
42. Biological Material (except animal Carcass)
43. Activated Material
50. LS Vials
59. Other. Describe in item 11. or additional page

NOTE 3 Sorption, Solidification, Stabilization Media Codes (Choose up to three, which predominate by volume.) For media meeting disposal site structural stability requirements, the numerical code must be followed by "-S" and the media vendor and brand name must also be identified in item 13. Code 100 = NONE REQUIRED.

Sorption

60. Speedi Dri
61. Celatom
62. Floor Dry Superfine
63. Hi Dri
64. Safe T Sorb
65. Safe N Dri
66. Floroo
67. Floroo X
68. Solid A Sorb
69. Chemsil 30
70. Chemsil 50
71. Chemsil 3030
72. Diapsal HP200
73. Diapsal HP500
74. Petroset
75. Petroset II
76. Aquaset
77. Aquaset II
78. Vermiculite
89. Other. Describe in item 13 or additional page

Solidification

90. Cement
91. Concrete (encapsulation)
92. Bitumen
93. Vinyl Chloride
94. Vinyl Ester Styrene
99. Other. Describe in item 13 or additional page
100. None Required

ESI Form 541 A
541A (3 95)

This form contains all of the information required in the NRC form

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

CONTAINER AND WASTE DESCRIPTION

Additional Nuclear Regulatory Commission (NRC) Requirements for Control, Transfer and Disposal of Radioactive Waste

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22	03	0.018	19.5	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 µCi)	Total Activity: 5.550 MBq (150.00 µCi)	AU
23	03	0.018	17.2	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 µCi)	Total Activity: 5.550 MBq (150.00 µCi)	AU
24	03	0.018	29.0	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 µCi)	Total Activity: 5.550 MBq (150.00 µCi)	AU
25	03	0.018	38.1	<5.0	<4.0E-06	<4.0E-05	39	0.018 cu. m.	100	Thoriated Tungsten Scrap Metal	N/A	Th-nat 5.550 MBq (150.000 µCi)	Total Activity: 5.550 MBq (150.00 µCi)	AU

NOTE 1 Container Description Codes. For containers waste requiring disposal in approved structural overpacks, the numerical code must be followed by "-OP".

1. Wooden Box or Crate
2. Metal Box
3. Plastic Drum or Pail
4. Metal Drum or Pail
5. Metal Tank or Liner
6. Concrete Tank or Liner
7. Polyethylene Tank or Liner
8. Fiberglass Tank or Liner
9. Demineralizer
10. Gas Cylinder
11. Bulk, Unpackaged Waste
12. Unpackaged Components
13. High Integrity Container
14. Corrugated Box
19. Other. Describe in item 6 or additional page
20. SeaLand Container

NOTE 2: Waste Description Codes. (Chose up to three, which predominate by volume.)

20. Charcoal
21. Incinerator Ash
22. Soil
23. Gas
24. Oil
25. Aqueous Liquid
26. Filter Media
27. Mechanical Filter
28. EPA or State Hazardous
29. Demolition Rubble
30. Cation Ion-exchange Media
31. Anion Ion-exchange Media
32. Mixed Bed Ion-exchange Media
33. Contaminated Equipment
34. Organic Liquid (except oil)
35. Glassware or Labware
36. Sealed Source Device
37. Paint or Plating
38. Evaporator Bottoms Sludges Concentrates
39. Compactible Trash
40. Noncompactible Trash
41. Animal Carcass
42. Biological Material (except animal Carcass)
43. Activated Material
50. LS Vials
59. Other. Describe in item 11. or additional page

NOTE 3. Sorption, Solidification, Stabilization Media Codes (Choose up to three, which predominate by volume.) For media meeting disposal site structural stability requirements, the numerical code must be followed by "-S" and the media vendor and brand name must also be identified in item 13. Code 100 = NONE REQUIRED

Sorption

60. Speedi Dri
61. Celetom
62. Floor Dry Superfine
63. Hi Dri
64. Safe T Sorb
65. Safe N Dri
66. Floroc
67. Floroc X
68. Solid A Sorb

Solidification

69. Chemsil 30
70. Chemsil 50
71. Chemsil 3030
72. Dicapsul HP200
73. Dicapsul HP500
74. Petroset
75. Petroset II
76. Aquaset
77. Aquaset II
78. Vermiculite
89. Other. Describe in item 13 or additional page
90. Cemsil
91. Concrete (encapsulation)
92. Bitumen
93. Vinyl Chloride
94. Vinyl Ester Styrene
99. Other. Describe in item 13 or additional page
100. None Required

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COUNSELLORS AT LAW

230 PARK AVENUE, SUITE 615
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June 18, 1999

BY TELECOPY & REGULAR MAIL

Richard G. Rudolf, Esq.
Vice President, General Counsel
Sulzer US Industries Holding, Inc.
555 Fifth Avenue
New York, New York 10017

Re: **325 Duffy Avenue, Hicksville, New York**

Dear Mr. Rudolf:

This will respond to your letter dated June 16, 1999.

On behalf of First Industrial, L.P., we hereby approve the remedial approach articulated by Arcadis Geraghty & Miller ("Arcadis") in its letters dated May 25 and June 16, 1999. As we have noted previously, First Industrial requires a copy of the final letter report of Arcadis documenting the results of the post-excavation sampling and the proper disposal of soils removed from the area of Sump 3.

Thank you for your cooperation in this matter.

Very truly yours,

Sarah P. Flanagan

Sarah P. Flanagan

cc: Jeff Cohen
Harry Szenicer, Esq.
Jorg Kilchmann

DL ROTHBERG & ASSOCIATES, P.C.
COUNSELLORS AT LAW

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TELECOPIER TRANSMITTAL COVER SHEET

June 14, 1999

PLEASE DELIVER THE FOLLOWING MATERIAL AS SOON AS POSSIBLE

To: Richard Rudolf, Esq.
Jorg Kilchman
Fax: 212-661-0533

From: Sarah P. Flanagan
Tel. No.: 212-490-2220

Number of Pages Including This Cover Sheet: 1

Message: This is just to let you know that I have not received any further correspondence from Arcadis Geraghty & Miller. After the conversation last week between Mike Teetsel (ERM) and Glen Netuschil (Arcadis), we were expecting to receive a letter from the latter regarding several points discussed with Mr. Teetsel, but to date have received nothing. I mention this only because I know that Sulzer Metco is anxious to obtain the approval of First Industrial so that Arcadis can proceed with the soil excavation.

THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS ATTORNEY PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, OR THE EMPLOYEE OR AGENT RESPONSIBLE TO DELIVER IT TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPYING OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE, AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE U.S. POSTAL SERVICE. THANK YOU. PLEASE NOTIFY US IMMEDIATELY IF ALL PAGES ARE NOT RECEIVED. CALL:(212) 490-2220.

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COUNSELLORS AT LAW

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June 3, 1999

BY TELECOPY & REGULAR MAIL

Richard G. Rudolf, Esq.
Vice President, General Counsel
Sulzer US Industries Holding, Inc.
555 Fifth Avenue
New York, New York 10017

Re: 325 Duffy Avenue, Hicksville, New York

Dear Mr. Rudolf:

This will respond on behalf of First Industrial, L.P. ("First Industrial") to the revised proposal of Sulzer Metco with respect to completion of the remedial tasks at the above-referenced property, as set forth in the letter dated May 25, 1999 of Arcadis Geraghty & Miller ("Arcadis"). Our response incorporates the comments of ERM-Northeast, consultant to First Industrial with respect to this matter.

Generally, First Industrial agrees with the proposed approach of Arcadis. However, the proposal is somewhat unclear on one important point, that is, how Arcadis will determine when sufficient soils have been removed in the area surrounding and beneath Sump 3. We wish to clarify that the acceptance of First Industrial is conditioned on a satisfactory resolution of this point.

As you know, the concern with respect to Sump 3 is that samples taken by Arcadis show the soil to contain concentrations of chromium, lead, nickel and zinc above the New York State Department of Environmental Conservation ("NYSDEC") TAGM levels. The purpose of the excavation is to remove these soils.

In describing the extent of the soil removal, Arcadis states that it will be determined "based on odor or color of impacted soil or until the limits of the excavation (to edge of saw cut and to approximately 7 feet below floor level)." We understand where metals-impacted soils are concerned, odor and color are not indicators of contamination. Therefore, we object to any attempt on the part of Arcadis to use these factors to determine the extent of the contamination.

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COUNSELLORS AT LAW

Further, insofar as the "edge of the saw cut" will determine the width of the excavation, it would have been helpful for Arcadis to articulate what the width of the saw cut will be. The only statement made in this regard is that the sump will be saw cut "approximately 3 feet beyond its limits." Without knowing what the limits of the sump are, we cannot judge what the width of the saw cut will be.

ERM has advised that in order to reach the proposed excavation depth of 7 feet, Arcadis will likely require an excavation that is also 7 feet wide. If that is indeed what Arcadis is proposing, ERM further advises that in all likelihood, the excavation will be sufficient to remove the metals-impacted soils with concentrations over TAGM levels. However, Arcadis does nt clearly state that this is the intention. Instead, it states that "When endpoint samples indicated that impacted soils have been *adequately removed*, the existing interconnecting pipelines between Sumps 1, 2 and 3 will be filled with concrete along with existing Sump 1 as requested by Sulzer Metco (US) Inc." (Emphasis added).

We wish to stress that First Industrial will consider the impacted soils to have been *adequately removed* if the endpoint samples show metals below TAGM levels. If, upon receipt of the samples, Sulzer Metco would like to consult with First Industrial as to the adequacy of the results, we would be pleased to do so. First Industrial will not be satisfied, however, if the endpoint samples show concentrations over the TAGM levels, and yet Sulzer Metco unilaterally makes the decision to backfill the excavation and restore the concrete floor, presenting the results to First Industrial after the work is complete.

In summary, First Industrial is primarily concerned that, in performing the soil removal in the vicinity of Sump 3, the excavation be sufficient to remove all impacted soils above TAGM levels. Assuming the soils are properly removed and disposed of, the remainder of the proposal is satisfactory, i.e., concerning the backfilling and compacting of the Sump 3 excavation, the restoration of the concrete floor above Sumps 2 and 3, and the filling of Sump 1 and the interconnecting piping. Finally, First Industrial does, of course, expect to receive a copy of the final letter report of Arcadis.

Please do not hesitate to call with any questions you may have. We look forward to receipt of the final report.

Very truly yours,

Sarah P. Flanagan

Sarah P. Flanagan

cc: Jeff Cohen
Harry Szenicer, Esq.
Jorg Kilchman

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COUNSELLORS AT LAW

230 PARK AVENUE, SUITE 615
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May 17, 1999

BY TELECOPY & REGULAR MAIL

Richard G. Rudolf, Esq.
Vice President, General Counsel
Sulzer US Industries Holding, Inc.
555 Fifth Avenue
New York, New York 10017

Re: 325 Duffy Avenue, Hicksville, New York

Dear Mr. Rudolf:

This will respond to the proposal of Sulzer Metco with respect to completion of the remedial tasks at the above-referenced property, as set forth in the letter-report dated April 20, 1999 of Arcadis Geraghty & Miller ("Arcadis") and the letter of Arcadis dated April 30, 1999 responding to our queries.

First Industrial, L.P. ("First Industrial") does not agree with your proposal to leave in place the soil adjacent to and beneath Sump 3, which Arcadis has reported to contain concentrations of chromium, lead, nickel and zinc above the New York State Department of Environmental Conservation ("NYSDEC") TAGM levels.

We are not aware of any rationale for treating the metals-impacted soils around Sump 3 differently from the impacted soils adjacent to Sumps 1 and 2. The Sump 3 soils should be excavated and properly disposed of.

With respect to Sump 2, we understand that Sulzer Metco was not able to remove all metals-impacted soils due to concerns with structural damage to the building. If that is the case, while First Industrial will not require removal of additional soils despite the continued presence of nickel and copper at concentrations above TAGM levels, this should in no way be construed as a waiver of any rights of First Industrial pursuant to the lease with Sulzer Metco (US), Inc., or the Purchase Agreement dated October 7, 1997, in the event of future liability in connection with these soils.

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COUNSELLORS AT LAW

In addition to the removal of metals-impacted soils adjacent to and beneath Sump 3 and backfilling of the excavation with clean fill, First Industrial requires that the floor slab be restored above the former locations of Sumps 2 and 3.

Please do not hesitate to call with any questions you may have. We look forward to receipt of confirmation that the soil removal and floor repair has been performed as described above.

Very truly yours,

Sarah P. Flanagan

Sarah P. Flanagan

cc: Jeff Cohen
Harry Szenicer, Esq.

PERICONI & ROTHBERG, P.C.

ATTORNEYS AT LAW

DEBRA L. ROTHBERG*
JAMES J. PERICONI

*ALSO MEMBER OF NJ BAR

SUITE 615
230 PARK AVENUE
NEW YORK, NEW YORK 10169
(212) 490-2220
FAX (212) 490-2030

June 19, 1998

BY TELECOPY & REGULAR MAIL

Richard G. Rudolf, Esq.
General Counsel
Sulzer (US) Holding, Inc.
200 Park Avenue
New York, New York 10166

Re: 325 Duffy Avenue, Hicksville, New York

Dear Mr. Rudolf:

This will respond to your letter dated May 27, 1998 to this firm, as representative of First Industrial, L.P. ("FILP"), transmitting the Summary Report for Drywell Remediation and Sump Investigation prepared by Arcadis Geraghty & Miller ("AG&M"), regarding the performance of the remedial work at the above-referenced property.

We have reviewed the Report with ERM-Northeast, environmental consultants to FILP. We concur with AG&M's conclusions and recommendations, with the following comments:

1. Please provide documentation of the disposal of the catch basin sediments and wash water.

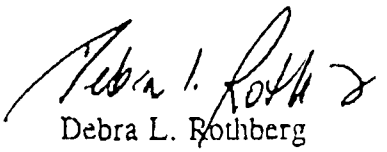
2. Though not indicated, we assume that excavation of soil surrounding the sumps will proceed until endpoint samples indicate that all soil exceeding New York State Recommended Soil Cleanup Objectives has been removed, as previously agreed by Sulzer Metco (US) Inc.

We understand that Sulzer Metco will proceed promptly with the remedial work recommended in the Report and look forward to documentation of the completion thereof.

PERICONI & ROTHBERG, P.C.
ATTORNEYS AT LAW

Thank you for your continuing attention to this matter.

Very truly yours,



Debra L. Rothberg

cc: Mr. Jon Raleigh
Harry Szenicer, Esq.

PERICONI & ROTHBERG, P.C.

ATTORNEYS AT LAW

DEBRA L. ROTHBERG*
JAMES J. PERICONI

*ALSO MEMBER OF NJ BAR

SUITE 615
230 PARK AVENUE
NEW YORK, NEW YORK 10169
(212) 490-2220
FAX (212) 490-2336

January 16, 1998

BY FEDERAL EXPRESS

Sulzer Metco (US) Inc.
325 Duffy Avenue
Hicksville, NY 11801
Attn: Michael Lydon

Re: 325 Duffy Avenue, Hicksville, New York

Dear Mr. Lydon:

This will respond to the January 8, 1998 letter from Richard Rudolf, Sulzer Inc. General Counsel, to First Industrial, L.P. ("FILP") transmitting the proposed Scope of Work ("SOW") for the performance of the remedial work at the above-referenced property, prepared by Geraghty & Miller for Sulzer Metco (US) Inc.

We have reviewed the SOW with ERM-Northeast, environmental consultants to FILP, and have the following two comments:

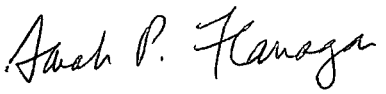
1. Under the heading "Sump Investigation" on the second page, the SOW should clearly indicate that one sample **per boring** will be sent for analysis for VOCs and priority pollutant metals, for a total of six samples. We assume that this is what the SOW is meant to indicate (as opposed to the analysis of just one sample overall), and have marked up the SOW to clarify what we believe is the intent of both FILP and Sulzer Metco.

2. ERM advises that in testing the integrity of the shallower sump, it would be prudent to run the test with as high a water level as possible, as one potential source of leaking could be in the area where the sump meets the floor. (The other sump has already been found to be leaking at that location.) Again, we have suggested language to include in the SOW.

With the above changes, the SOW is approved. We would appreciate your forwarding a revised SOW for our records.

We understand that Sulzer Metco will proceed with the work described therein and look forward to receipt of the results of the investigation.

Very truly yours,



Sarah P. Flanagan

Enclosure

cc: Sulzer Inc.
200 Park Avenue
New York, New York 10166
Attn: General Counsel, Richard G. Rudolf, Esq.

Michael Brennan
Bryan Segal, Esq.
Harry Szenicer, Esq.

PERICONI & ROTHBERG, P.C.

ATTORNEYS AT LAW

DEBRA L. ROTHBERG*
JAMES J. PERICONI

*ALSO MEMBER OF NJ BAR

SUITE 610
250 PARK AVENUE
NEW YORK, NEW YORK 10169
(212) 490-3200
FAX (212) 490-2000

November 20, 1997

BY TELECOPY & REGULAR MAIL

Andrew P. Seidman, Esq.
Bachner, Tally, Polevoy & Misher LLP
380 Madison Avenue
New York, NY 10017-2590

Re: Sulzer Metco with F.R. Acquisitions, Inc.
325 Duffy Avenue, Hicksville, NY – Remedial Work

Dear Mr. Seidman:

Pursuant to Paragraph 19.03 of the Contract for the above referenced property, this will advise of certain remedial work required to be performed at the property by Sulzer Metco ("Seller").

As you are aware, on behalf of F.R. Acquisitions, Inc. ("Purchaser"), ERM-Northeast sampled the following locations at the property: 1) one sample was taken from each of two drywells located by the east wall of the building at the property (medium sampled -- sediment); and 2) three soil samples were taken from borings installed around each of two sumps inside the facility maintenance area, which formerly received discharges from the spray booth and tumbling operations.

As indicated in the enclosed report prepared by ERM-Northeast, the drywell samples showed significantly elevated levels of metals, in excess of New York State Soil Cleanup Objectives (found in New York State Technical Advice Guidance Memorandum 94-4060). These soils must be excavated and properly disposed of and the drywells fully cleaned. In order to inspect the drywells, which were found to have concrete bottoms, ERM removed some of the sediments and staged them onsite in plastic bags placed in a drum. These materials, along with any sediments remaining inside the dry wells, should be sampled and shipped off-site to an appropriate disposal location.

In addition to the contamination within the drywells, ERM detected the presence of elevated Volatile Organic Compounds ("VOCs") in the samples taken from the soil surrounding the sumps. Further, the results of ERM's sampling show elevated metals in the soils adjacent to the sumps. Because of the presence of structural fill under the slab, ERM was not able to obtain samples at sufficient depth to fully assess the contamination. However,

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ATTORNEYS AT LAW

based on visual observation, one of the two sumps has separated from the slab and therefore released materials to the soil beneath the slab. The other sump has a hand-made appearance which, coupled with the sampling results, raises a question concerning its integrity.

With respect to the sumps, Sulzer Metco should take the following steps: 1) investigate the extent to which the leaking sumps have impacted the surrounding soils; 2) evaluate whether Sulzer Metco is obliged to report the condition to the New York State Department of Environmental Conservation ("NYSDEC"), *i.e.*, whether "reportable quantities" of hazardous substances have been released; 3) remove contaminated soils as necessary; 4) repair the sump that has separated from the slab, ascertain the integrity of the other sump and repair as necessary.

Cost

The cost of cleaning out the drywells and properly disposing of the sediments is estimated by ERM Northeast to be $2,252.04. ERM has not been able to formulate an estimate for the investigation, remediation and repair of the sumps because of the need for further data. However, the cost of testing performing a "constant head" test of the sump to test its integrity is estimated by ERM to be approximately $4000.

Performance of Work

Before Seller performs the remedial work described above, Seller (or seller's consultant or contractor, as appropriate) must provide evidence of sufficient insurance, to Purchaser's reasonable satisfaction. In addition, Purchaser must have an opportunity to review Seller's scope of work. The drywell remediation and investigation of the sumps should be performed within thirty (30) days following Purchaser's approval of the scope of work. Repair of the sump (or sumps) and any necessary soil excavation should thereafter be performed within the subsequent sixty (60) days. Upon completion of the work, Seller must promptly provide complete documentation and copies of any correspondence with regulatory agencies. We will prepare an Amendment to the Lease to address the above requirements.

PERICONI & ROTHBERG, P.C.

ATTORNEYS AT LAW

Please do not hesitate to call me if you have any further questions, when you have had an opportunity to review the enclosed and consult with your client.

Very truly yours,

Debra L. Rothberg

Enclosure

cc: Mr. Jeff Schwartzberg
Harry Szenicer, Esq.
Howard Stein, Esq.

Powder Division

Material Safety Data Sheet

Aluminum Company of America, Powder Division, P.O. Box 472, Rockdale, TX 76567

ALCOA

NO. 123J

Common Name	Phone	Date	Revised
Atomized Powders	Emergency: 412-553-4001	1980-09-17	1989-05-05

Prepared by the Hazardous Materials Control Committee. Phone 412-553-2881 for routine information.

SECTION I. Material Description

Chemical Name & Formula: Aluminum, Al

Other Designation: Alcoa Atomized Powders 12, 12C, 101, 102, 104, 105, 108, 110, 115, 119, 120, 123, 126, 132, 1126, 1202, 1203, 1204, 1220, 1221,1222, 1224, 1230, 1231, 1233, 1235, 1261, 1401, 1620, 1622

CAS No.: Al (7429-90-5); Fe (7439-89-6); Si (7440-21-3)

Manufacturer: Alcoa

Product Use: Various metallurgical, refractory and explosives uses

SECTION II. Ingredients

	% by Weight Typical
Al.	99.7
Fe.	0.2
Si.	0.1

No LD_{50} or LC_{50} found for oral, dermal, or inhalation routes of administration.

Occupational Exposure Limits

TWA in mg/m^3

	ACGIH TLV	OSHA PEL
Aluminum dust:	10 (Total)	15 (Total)
		5 (Respirable)

ALCOA PEL

Respirable fraction - 5

For more detailed information on maximum trace levels of other metal contaminants in Alcoa Aluminum powder, see "Quality Control and Analytical Test Methods for Alcoa Aluminum Powders" (Section FA2D-2, page 4).

SECTION III. Physical Data

Physical Form: Finely divided aluminum powder in nodular form

Boiling Temperature: NA

Freeze-Melt Temperature: 1195-1215°F (646-657°C)

Vapor Pressure (mm): NA

Vapor Density (air = 1): NA

Evaporation Rate: NA

Specific Gravity: NA

Density: 50 - 81 lb/ft^3 (0.8 - 1.3 g/cc)

Water Solubility: Insoluble; insoluble in organic solvents

pH: NA

Color: Varies from dull gray to metallic silvery color

Odor: None

Odor Threshold (ppm): NA

Coefficient of water/oil distribution: NA

SECTION IV. Fire and Explosion Data

Flashpoint:	Auto-Ignition Temp.:	Flammability Limits in Air: Upper:	Lower:
None	650°C (layered)	Minimum Explosive Concentration in Air	40 mg/L

Aluminum powder may be explosive when dispersed in air. Even a minor dust cloud can explode violently.

In case of fire: Use extreme care to prevent dust cloud formation. Use gentle surface application of Class D extinguishing agent or dry inert granular material (e.g., sand) to cover and ring the burning powder. Do not use fire extinguishers rated for Class A, B, or C fires. Do not use water or halogenated fire extinguishing agents. Do not disturb the burning powder or cause mixing of the agent with the burning powder. Do not disturb the powder until completely cool.

Firefighters should wear NIOSH approved self-contained breathing apparatus and protective clothing when appropriate.

SECTION V. Reactivity Data

With water: Generates hydrogen and heat slowly. Water/aluminum powder mixtures may be especially hazardous when confined.
With heat: Oxidizes at a rate dependent on temperature.
With strong oxidizers: Violent reaction with much heat generated.
With halogenated compounds: Many halogenated hydrocarbons, including halogenated fire extinguishing agents, can react violently with finely divided aluminum.

SECTION VI. Health Hazard Information (See Section II for exposure limits.)

Low health risk by inhalation. Treat as a nuisance dust as specified by the American Conference of Governmental Industrial Hygienists (ACGIH).
According to AIHA Guide, Aluminum:
Toxicity by ingestion: None expected
Skin and eyes: Not an irritant

SECTION VII. Spill, Leak & Disposal Procedures

Avoid all ignition sources around spill area. Prohibit smoking. Do not use water for spill clean-up. Avoid dusting of powder to the greatest extent possible. Sweep spilled powder with natural bristle broom (push type recommended). Pick up material with non-sparking shovel. Place carefully in dry, water-tight containers. Seal containers. Waste aluminum powder should be sent to a reclamation facility for reuse or recycling. After complete clean-up by sweeping, area may be washed down with copious quantities of water, if necessary.

RCRA Hazardous Waste No. Not Federally Regulated

SECTION VIII. Special Protection Information

Use with adequate explosion-proof ventilation to meet the exposure limits as listed in Section II. Use non-sparking handling equipment, including vehicle wheels. Cover and reseal partially empty containers. Keep absolutely dry. Storage rooms must be of fire resistant construction. It is preferable not to store powder in the same room as other combustible materials. Smoking is prohibited.

Where respiratory protection is necessary, NIOSH approved respiratory protection should be used. Select the appropriate respiratory protection (dust respirator, etc.) based on the actual or potential airborne contaminants and their concentrations present.

SECTION IX. Special Precautions & Comments

Chemical substance components have been reported to the EPA Office of Toxic Substances in accordance with the requirements of the Toxic Substances Control Act (Title 40 CFR Part 710).

All electrical equipment must be suitable for use in hazardous atmospheres involving aluminum powder in accordance with 29 CFR 1910.307. The National Electrical Code, NFPA 70, contains guidelines for determining the type and design of equipment and installation which will meet this requirement.

None of the materials in this mixture are on the EPA list of extremely hazardous substances (Section 302 of SARA).

For purposes of SARA III reporting, this substance contains the following listed ingredients:

Aluminum (fume and dust) -- Section 313 List

This material fits the EPA Hazard Category definitions of Reactive and Sudden Release of Pressure Hazards, under SARA Sections 311, 312.

D.O.T. Shipping Name, Hazard Class, I.D. No. (if applicable) Aluminum, Metallic Powder (Not Regulated by 49 CFR)

Canadian TDG Hazard Class & PIN -- 4.3, UN1396

SECTION X. References

Aluminum Association Bulletin TR-2, "Recommendations for Storage and Handling of Aluminum Pigments and Powders"

ANSI Z12.19

Bureau of Mines #6516, "Explosibility of Metal Powders (1964)"

NFPA 651, "Standard for the Manufacture of Aluminum and Magnesium Powder"

NFPA 65, "Standard for the Processing and Finishing of Aluminum"

American Industrial Hygiene Association (AIHA) Hygienic Guide Series (revised June 1978)

U.S. Dept. of Health and Human Services, NIOSH: Registry of Toxic Effects of Chemical Substances, 1985-86 Edition

Sax, N. Irving: Dangerous Properties of Industrial Materials, Van Nostrand Reinhold Co., Inc., 1984

Information herein is given in good faith as authoritative and valid; however, no warranty, express or implied, can be made.

ALUMINUM COMPANY OF AMERICA
1501 ALCOA BUILDING
PITTSBURGH, PENNSYLVANIA 15219

ALCOA

MATERIAL SAFETY DATA SHEET NOTIFICATION

METCO INC.
DIVISION OF PERKIN ELMER
220 MILLER PLACE
HICKSVILLE NY 11801

1989-10-06

RECEIVED
OCT 30 1989

ALCOA SALES ORDER-PD 21628
PURCHASE ORDER----88418 P
MSDS NO. & DATE---123 1989-05-05

ATTN: MANAGER OF SAFETY

The enclosed ALCOA Material Safety Data Sheet (MSDS) contains health, safety, and regulatory information for a product that your company has purchased from ALCOA.

This product may contain toxic chemicals subject to the reporting requirements of Section 313 of the Emergency Planning and Community Right-To-Know Act of 1986 (SARA III) and of 40 CFR 372. Review Section IX of this MSDS for the name(s) of those ingredients subject to reporting and Sections I and II for the CAS numbers and percents by weight.

If you repackage or otherwise redistribute this product to other customers, an MSDS and notice similar to this one should be sent to them.

Some of these same ingredients are regulated by the Canadian Right-To-Know Law (WHMIS). Pertinent data has been added to the enclosed MSDS to comply with those requirements.

For your convenience, beginning with revisions dated June 2, 1989, all additions, or deletions to MSDS's will have the changes in information identified by an arrow in the margin opposite the new information.

Raymond W. Sauer, Jr.
Manager of Product Safety

NYG 3919194

Please type or print. Do not staple

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

[illegible] Waste Manifest 1/23/03]

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. [illegible]
Manifest Doc. No. [illegible]
2. Page 1 of 1
Information within heavy bold line is not required by Federal Law.

3. Generator's Name and Mailing Address [illegible]
4. Generator's Telephone Number ([illegible])

A. NYG 3919194
B. Generator's ID [illegible]

5. Transporter 1 (Company Name) [illegible]
6. US EPA ID Number MAD [illegible]
C. State Transporter's ID [illegible]
D. Transporter's Telephone ([illegible])

7. Transporter 2 (Company Name)
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address [illegible]
10. US EPA ID Number [illegible]
G. State Facility ID
H. Facility Telephone ([illegible])

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. [illegible]	001	DT	1468	P	EPA [illegible] / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above [illegible]

a.	c.
b.	d.

K. Handling Codes for Wastes Listed Above

a.	c.
b.	d.

15. Special Handling Instructions and Additional Information [illegible]

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Mo. [illegible] Day [illegible] Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name [illegible] | Signature [illegible] | Mo. [illegible] Day [illegible] Year [illegible]

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Mo. Day Year

P2SUL007411

COPY 8—Generator—Retained by Generator

NYG 3919194

Please type or print. Do not staple

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

D3943928
PPW 03/10/2005 Waste Manifest 1/23/03)

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD131318851
Manifest Doc. No.: 19194
2. Page 1 of: 1

Information within heavy bold line is not required by Federal Law.

A. NYG 3919194

B. Generator's ID: SAME

3. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Telephone Number (516) 338-2337

5. Transporter 1 (Company Name): Clean Harbors Env Services Inc
6. US EPA ID Number: MAD039322250

C. State Transporter's ID: NYMA 006
D. Transporter's Telephone (781) 849-1800

7. Transporter 2 (Company Name)
8. US EPA ID Number

E. State Transporter's ID
F. Transporter's Telephone ( ) .

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4979 Spring Grove Avenue
Cincinnati, OH, 45232

10. US EPA ID Number: OHD000816829

G. State Facility ID
H. Facility Telephone (513) 681-5738

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II	001	DF	00468	P	EPA D002 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
ERG#154 (L)(C,E)
a. c.
b. d.

K. Handling Codes for Wastes Listed Above
a. D8 T
c.
b.
d.

15. Special Handling Instructions and Additional Information
EMERGENCY PHONE # (800) 483-3718
11a: CH189142 D008 D007 D008

1X55

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
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GENERATOR — Printed/Typed Name: PETER DI PIETRANTONIO — Signature: [signature] — Mo. 04 Day 01 Year 05

TRANSPORTER — 17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: FRANK RICCIARDELLI — Signature: [signature] — Mo. 04 Day 01 Year 05

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Mo. Day Year

FACILITY — 19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Mo. Day Year

NYG 3919194

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple

(Waste Manifest 1/23/03)

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD131131851
Manifest Doc. No.: 14194
2. Page 1 of: 1

Information within heavy bold line is not required by Federal Law.

A. NYG 3919194

GENERATOR

3. Generator's Name and Mailing Address
Sutter Metro US Inc
1101 Prospect Avenue
Westbury NY 11590

4. Generator's Telephone Number (516) 338-2337

B. Generator's ID: SAME

5. Transporter 1 (Company Name): Clean Harbors Env Services Inc
6. US EPA ID Number: MAD003222250

C. State Transporter's ID: NYMA 006
D. Transporter's Telephone (781) 848-1800

7. Transporter 2 (Company Name)
8. US EPA ID Number

E. State Transporter's ID
F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4679 Spring Grove Avenue
Cincinnati OH 45232

10. US EPA ID Number: OHD000318629

G. State Facility ID
H. Facility Telephone (513) 681-4739

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CHROMIC ACID SOLUTION 8 UN1755 PGII	001	DF	00464	P	EPA D002 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
a. D007 D008 D009
b.
c.
d.

K. Handling Codes for Wastes Listed Above
a. T
b.
c.
d.

15. Special Handling Instructions and Additional Information
EMERGENCY PHONE # (800) 483-1718
11a CH18914 D006 D007 D009

1x55 gal Nonhazardous

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
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Printed/Typed Name: Peter DiPietro
Signature:
Mo. 04 Day 01 Year 05

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Frank Recianelli
Signature:
Mo. 04 Day 01 Year 05

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Rick Varady
Signature:
Mo. 04 Day 07 Year 05

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name
Signature
Mo. Day Year

COPY 5—Generator—Mailed by TSD Facility

P2SUL007413

CleanHarbors ENVIRONMENTAL SERVICES, INC.

Land Disposal Restriction Notification Form

Date: 03 / 31 / 2005

MANIFEST INFORMATION

Generator: Sulzer Metco US Inc
Address: 1101 Prospect Avenue
Westbury, NY 11590
EPA ID#: N Y D 1 3 1 3 1 8 6 5 1

Manifest No
NYG3919194
Sales Order No: D3943928
Manifest Document No:

LINE ITEM INFORMATION

Line Item:	Page No:	Profile No:	Treatability Group:	LDR Disposal Category:
11a	1	CH189142	NON- WASTEWATER	2 : This is subject to LDR.

EPA Waste Codes	EPA Waste Subcategory
D002	Corrosive Characteristic
D006	Toxicity characteristic for Cadmium
D007	Toxicity Characteristic for Chromium
D008	Toxicity Characteristic for Lead

LDR Chemical Data

Chemical	Underlying Hazardous Constituents	Constituents of Concern	Contaminants Subject to Treatment
CADMIUM	Y	N	N
Chromium	Y	N	N
LEAD	Y	N	N

Certification

Applies to Manifest Line Items

Pursuant to 40 CFR 268.7(a), I hereby notify that this shipment contains waste restricted under 40 CFR Part 268. **11a**

CleanHarbors®
ENVIRONMENTAL SERVICES, INC.

Land Disposal Restriction Notification Form

Date: 03 / 31 / 2005

MANIFEST INFORMATION

Generator: Sulzer Metco US Inc
Address: 1101 Prospect Avenue
Westbury, NY 11590
EPA ID#: N Y D 1 3 1 3 1 8 6 5 1

Manifest No NYG3919194
Sales Order No: D3943928
Manifest Document No:

Waste analysis data, where available, is attached

Signature: [signature]
Print Name: P. DiPietrantonio
Title: EH&S Specialist
Date: 4/1/05

ECOLOGY SERVICES, INC.

10220 Old Columbia Road
Columbia, Maryland 21046
(410) 381-2600
1-800-932-7299
Fax (410) 381-2602

FACSIMILE TRANSMISSION

COVER SHEET

Date: May 13, 2002

To: Mr. Peter DiPietrantonio, Sulzer Metro, Inc.

From: Brenda J. Klug, Account Manager

Fax No. (516) 388-2123 No. of Pages: 2 (including cover sheet)

Quote for radioactive waste disposal

THE INFORMATION IN THIS FACSIMILE TRANSMISSION IS INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY TO WHICH IT IS ADDRESSED, AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL AND EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAW. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, OR THE EMPLOYEE OR AGENT RESPONSIBLE FOR DELIVERING THE MESSAGE TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPYING OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE (410) 381-2600 AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE U.S. POSTAL SERVICE. THANK YOU.

ECOLOGY SERVICES, INC.

10220 Old Columbia Road
Columbia, Maryland 21046
(410) 381-2600
1-800-932-7299
Fax (410) 381-2602

May 13, 2002

Peter DiPietrantonio
Sulzer Metro, Inc.
1101 Prospect Ave.
Westbury, NY

RE: Quote for Disposal of Thoriated tungsten

Dear Mr. DiPietrantonio:
Ecology Services, Inc. is pleased to provide the following quotation for the packaging and disposal of low-level radioactive wastes from the above referenced facility. This quotation is based on volumes and concentrations per your fax to Ruth Rilee dated 5/7/02.

Item Disposal (Processor/Waste Stream)	Cost	Est. Units	Est. Line Total
RACE, LLC / Thoriated tungsten per pound	$4.00	1000.0	$4,000.00
Labor & Materials	$350.00	1	$350.00
Travel expense	$250.00	1	$250.00
Transportation from generator to processor	$1,450.00	1	$1,450.00
Estimated Total			$6,050.00
Supplies delivered concurrent with shipment			
5-gal pail	$15.00	10	$150.00

All waste must meet the acceptance criteria of Ecology Services, Inc. and any relevant processor and/or disposer. Residual material will be shipped to EnviroCare in Clive, UT for final burial. Invoice is based on the gross weight of the containers. All containers must be in DOT shippable condition, without external contamination.

ESI will provide a Radiation Worker and Hazardous Waste Operations trained technician to prepare this material for shipment. Pricing includes labeling, manifest preparation, loading, transportation, processing and disposal. ESI will schedule this project on a mutually agreeable date upon receiving your approval.

These prices are valid for ninety days from the date of this quotation. Thank you for providing this opportunity to Ecology Services, Inc. We look forward to providing services to your organization.

Sincerely,

Brenda J. Klug
Account Manager

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

NYG 0731862

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple. (Rev. 3/97)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Doc. No.

2. Page 1 of 1

Information within heavy bold line is not required by Federal Law.

A. NYG 0731862

B. Generator's ID: Same

C. State Transporter's ID: PX 3140

D. Transporter's Telephone (516) 360-0333

E. State Transporter's ID

F. Transporter's Telephone ( )

G. State Facility ID

H. Facility Telephone (516) 360-0333

3. Generator's Name and Mailing Address
Bulova Sound
325 Duffy Avenue, Hicksville, NY 11801

4. Generator's Telephone Number (516) 338-2570

5. Transporter 1 (Company Name): Chemical Pollution Control Inc.

6. US EPA ID Number: NYD982184549

7. Transporter 2 (Company Name)

8. US EPA ID Number

9. Designated Facility Name and Site Address
Chemical Pollution Control Inc.
129 South Fourth Street
Bay Shore, NY 11706

10. US EPA ID Number: NYD982184549

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste paint related material, Hazardous waste (solvents - thinners)	01	DM	0100	G	EPA D001 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
a. Flash-Point 180
b.
c.
d.

K. Handling Codes for Wastes Listed Above
a. H
b.
c.
d.

15. Special Handling Instructions and Additional Information
PB 3376-17 EPG 127 Emergency Response 516-360-0333

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
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Printed/Typed Name: Bill Bouchard | Signature: [signature] | Mo. 06 Day 01 Year 95

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: T D Smith | Signature: [signature] | Mo. 06 Day 01 Year 95

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Mo. Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Frank Fano | Signature: [signature] | Mo. 06 Day 01 Year 95

GENERATOR
TRANSPORTER
FACILITY

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

COPY 5 — Generator — Mailed by TSD Facility

P2SUL005371

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

NYG0731862

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple. (Rev. 3/97)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. NYD057731653 Manifest Doc. No. 31862

2. Page 1 of 1

Information within heavy bold line is not required by Federal Law.

3. Generator's Name and Mailing Address
Sulzer Metco
325 Duffy AVenue, Hicksville, nY 11801

4. Generator's Telephone Number (516) 338-2570

5. Transporter 1 (Company Name): Chemical Pollution Control Inc
6. US EPA ID Number: NYD082783429

7. Transporter 2 (Company Name)
8. US EPA ID Number

9. Designated Facility Name and Site Address
Chemical Pollution Control Inc
120 South Fourth Street
Bay Shore, NY 11706

10. US EPA ID Number: NYD082783429

A. NYG0731862
B. Generator's ID: Same
C. State Transporter's ID: PX 3640
D. Transporter's Telephone (516) 586-0333
E. State Transporter's ID
F. Transporter's Telephone ( )
G. State Facility ID
H. Facility Telephone (516) 586-0333

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. waste paint related material 3 UN1263 PG II (solvents-thinners)	004	DH	00220	G	EPA D001 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
a F003 - F005 0816
b
c
d

K. Handling Codes for Wastes Listed Above
a B
b
c
d

15. Special Handling Instructions and Additional Information
A3376-F ERG 127
Emergency Response 516-586-0333

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Y Bill BOUCHARD Signature: Y B. Bouchard Mo. 06 Day 04 Year 98

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: T D Sneyd Signature: [signature] Mo. 06 Day 04 Year 98

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name Signature Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name Signature Mo. Day Year

GENERATOR

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

COPY 3 — Disposer Site — Mailed by Generator

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

NYG0731862

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple. (Rev. 3/97)

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Doc. No.

2. Page 1 of

Information within heavy bold line is not required by Federal Law.

3. Generator's Name and Mailing Address

[illegible]
[illegible] Alexandria, [illegible] 13607

4. Generator's Telephone Number (516) 338-2570

A. NYG0731862

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

[illegible]

C. State Transporter's ID

D. Transporter's Telephone (516) 568-4333

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address

Chemical Formulation Control Inc
120 South Ridge Street
[illegible], NY 11704

10. US EPA ID Number

G. State Facility ID

H. Facility Telephone (516) 568-4333

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above

a | c

b | d

K. Handling Codes for Wastes Listed Above

a | c

b | d

15. Special Handling Instructions and Additional Information

Emergency Response 516-568-4333

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
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Printed/Typed Name: Bill Bouchard | Signature | Mo. | Day | Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Mo. | Day | Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Mo. | Day | Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name | Signature | Mo. | Day | Year

P2SUL005373

COPY 8 — Generator — Retained by Generator

CHEMICAL POLLUTION CONTROL, INC. OF NEW YORK - A PHILIP SERVICES CORPORATION COMPANY

NOTIFICATION FOR WASTES RESTRICTED FROM LAND DISPOSAL

Generator Name: Salzer Manifest # 0731863 Line Item # (s) 11A

1) **Identify** by placing the line item number(s) in the corresponding box(es) which wastes are wastewaters or non-wastewaters according to the definition in 6 NYCRR 376.1(b)(1)(vi) Wastewater____ Non-wastewater ✓

2) **Identify** all of the NY State/USEPA waste codes* and subcategories that apply to this shipment, as defined by 6 NYCRR 371 / 6 NYCRR 376 / 40 CFR 261/40 CFR 268.

*For waste streams which carry the waste codes D001, D002 or D012 through D043, the Underlying Hazardous Constituents (UHC) found in 40 CFR 268.48 must be identified. Include a copy of the Underlying Hazardous Constituents (U.H.C.) Form or list the U.H.C. on this form for the waste stream. If the waste requires identification of the U.H.C. but none are present, place an 'X' in the space provided under 'No UHC'.
*For waste where the NY 376 regulations are more stringent include either a completed NY 376 attachment indentifying the constituents regulated under NY 376 or list the information in the section provided below.

Line Item	Waste Code	Description	No UHC	If NY 376 is more restrictive list the applicable treatment level or technology next to the applicable NY 376 section.		
11A	D001	solvents - thinners		376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)

3) **List the line item number next to the applicable category.**

A **A. RESTRICTED WASTE REQUIRES TREATMENT**
This waste must be treated to the applicable standards set forth in 6 NYCRR 376, 40 CFR 268.32 or RCRA 3004(d).

___ **B. RESTRICTED WASTE IS SUBJECT TO A VARIANCE**
This waste is subject to exemption from a prohibition on the type of land disposal utilized for the waste, such as a case-by-case extension under 268.5, an exemption under 268.6, or a nationwide capacity variance [see 268.7(a)(3)]. All variances are regulated under 6 NYCRR 376.1(a)(5).
Please list the date the waste is subject to the prohibitions____

___ **C. LAB PACK QUALIFYING FOR ALTERNATIVE TREATMENT UNDER 6 NYCRR 376.4(C)/40 CFR 268.42(C)**
This waste contains wastes listed in 6 NYCRR 376, Appendix 38 and 39, as applicable.
"I certify under penalty of law that I personally have examined and am familiar with the waste and that the lab pack contains only wastes which have not been excluded under appendix IV to 40 CFR 268 or solid wastes not subject to regulation under 40 CFR 261. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."

4) **Identify** the line item(s) in the corresponding space(s) below for which attachments are included in this notification by writing in the line item number next to the applicable attachment.

____ U.H.C. ____ NY376 ____ ANALYSIS ____ OTHER (SPECIFY) ____

Waste analysis is attached where available, otherwise, the information contained herein is based upon my thorough knowledge of the waste(s).
I hereby certify that I believe that the information I submitted is true, accurate and complete.

Signature S. Bowles Title MFGR SUP. Date 6-1-98
(Rev. 5/95)

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL
CONSERVATION
DIV SOLID & HAZARDOUS MATERIALS
MANIFEST SECTION
PO BOX 12820
ALBANY NY 12212

4a. Article Number

P 341 831 101

4b. Service Type

☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: *(Print Name)*

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature: *(Addressee or Agent)*

X

PS Form **3811**, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

P 341 831 101

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail *(See reverse)*

Sent to STATE OF NEW YORK
DEC DIV SOLID & HAZ MATERIALS
Street & Number
PO BOX 12820
Post Office, State, & ZIP Code
ALBANY NY 12212
Postage $

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL
CONSERVATION
DIV SOLID & HAZARDOUS MATERIALS
MANIFEST SECTION
PO BOX 12820
ALBANY NY 12212

4a. Article Number

P 341 831 101

4b. Service Type

☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: CHARLES CALVIN

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature: *(Addressee or Agent)*

X

PS Form **3811**, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

P2SUL005375

METCO DIVISION PERKIN-ELMER
DUFFY AVENUE
HEALTH AND SAFETY ISSUES

Respiratory Protection Program -

The Metco respiratory protection program does not meet OSHA requirements. Federal regulations (OSHA) require employers issuing repirators to develop and maintain comprehensive respiratory program which includes evaluation of exposure levels, select the appropriate protective equipment and performance of routine testing and training in the proper use and maintenance of respiratory protective equipment. Metco is issuing respiratory equipment without implementing a comprehensive program as defined by the OSHA regulations. Employee exposures have not been fully evaluated and documented by an industrial hygiene survey.

Management met with a technical representative from 3M and discussed the various types of materials used at the facility, employee exposures and OSHA regulations. 3M services include training and fit testing of employees on site, and a written respirator program that can be adapted to any facility.

OSHA Recordkeeping -

OSHA 200 Accident and Illness Logs facility must be separated for each Metco facility. Additionally, incidents of employee hearing loss should be recorded as an occupational illness.

The Human Resources staff has already separated the OSHA 200 Accident and Illness Logs by location.

Hazard Communication Program -

Hazard Communication plan does not meet OSHA requirements. The written plan is not specific to the individual chemicals and hazards found in each of the three Metco facilities. New employees have not been trained (since 1986) in chemical hazards before entering the work place.

The Hazardous Communication Program with its various requirements, site specific written plan, employee training and notification to contractors is currently being addressed. If necessary, an environmental consulting firm proficient in this area will assist us.

Hearing Conservation Program -

Potential noise exposures may be associated with the operation of plasma spray booths, turret and grinding machines. Written documentation (memos to corporate) indicate noise levels in the spray booth exceed 130 dB. OSHA is authorized to cite noise exposures in excess of 115 dB, and to require a hearing conservation program for levels above 85 dB. Metco may not be in compliance with OSHA requirements for a hearing conservation program.

We have all of the components in place for a hearing conservation program. We are currently working with Liberty Mutual to assess indoor noise levels and Perkin-Elmer to prepare a written program.

Employees Exposed To Toxic Substances -

Employees are exposed to a variety of hazardous chemicals including oils, solvents, toxic metals, dusts and particulates. OSHA holds employers responsible for ensuring employees are adequately protected from hazards in the work place. Metco has not documented that its current program is protective of employees. All of Metco's protection programs (hearing, respiratory and medical monitoring) should be supported by accurate measures of exposure levels.

With the assistance of Liberty Mutual and if necessary an environmental consulting firm, industrial monitoring can be performed and action taken based upon the results.

Personal Protective Equipment -

OSHA requires personal protective equipment to be used whenever it is necessary to protect employees from process hazards including environmental, chemical or mechanical hazards. Employees were found to be using protective equipment in a sporadic manner. Some employees were not sure what equipment was required for specific jobs.

Working with technically proficient representatives from 3M and Liberty Mutual, we can evaluate personal protection requirements and train employees on the proper usage of the equipment.

Frequent Injuries -

Accident reports indicate frequent lacerations and back injuries are occuring at Metco's Duffy Avenue facility. Evaluating the cause of these injuries and instituting preventative measures, could significantly reduce future accidents.

Management will review the recommendations and possibly incorporate a safe lifting training program into the hazardous communication training program. Additionally, at the regularly scheduled safety meetings the accident reports can be reviewed.

Inappropriate Fire Extinguishers -

Class A,B, and C fire extinguishers are provided in areas where metal fires are likely to occur. These types of extinguishers are incompatible with metals. Continued use of these cylinders is in violation of NFPA standards and use could result in increasing the spread of a fire. Hydrostatic testing by trained

persons with adequate equipment facilities of fire extinguishers is not conducted. Some systems have not been tested since 1979, as evidenced by a lack of tags and stamps on extinguisher cylinders.

A fire extinguisher company that provides sales and recharging services was contracted to service and if necessary perform hydrostatic testing on the fire extinguishers at our three facilities. Additionally, we have setup an inventory of the fire extinguishers at our three facilities which is currently being reviewed.

Machine Guarding -

OSHA requires that one or more methods of machine guarding be provided to protect employees from the point of operation of the machine, in running nip points, rotating parts, flying chips and sparks. Machines plant wide were found to be unguarded.

We are actively working with a technical director from Liberty Mutual to assist us in reviewing our current machine guards and make recommendations where necessary.

Safety Meeting -

Safety meetings should be routinely conducted.

Management will review recommendations and routinely schedule safety meetings in the future.

Suspected Asbestos Containing Materials -

Small quantities of material suspected to contain asbestos were observed in the boiler room and warehouse.

Upon receiving management approval, we will contract the services of an environmental consulting firm to assist us.

Employee Work Practices -

OSHA prohibits employer from allowing food or drink in any area exposed to toxic material. Employees were observed eating and drinking at work benches. This practice potentially exposes employees through ingestion and inhalation to hazardous substances in work areas.

Management has addressed the employee work habit of eating and drinking at their work benches. The training portion of the Hazardous Communication Program will include proper employee work practices.

Storage of Flammable Chemicals -

Storage and management of flammable chemicals in the paint room presents a potential fire and explosion hazard. Uncontrolled ignition sources from electrical plugs, wires and equipment are present.

The paints currently in use at the facility are water base. The oil based paints were removed by an EPA permitted hazardous waste removal company in accordance with federal, state, and local regulations. Management will review current storage procedures and if necessary relocate materials into the Flammable Storage Room.

17. (Continued)

q. Rate of process sludge discharge from this operation:

volume: none gal per batch
weight: _____ lbs per batch
frequency: _____ batches per _____
% solids: _____

r. If make-up water volume does not equal discharge volume, account for method of loss (such as evaporation, drag out, or wet sludge removal from recycle loop) and indicate ultimate destination (e.g., offsite hazardous waste landfill, onsite hazardous waste incinerator). The total rate of loss should equal the make-up water flow to the operation minus the rate of water discharge from the operation.

Method of Loss	Rate of Loss (include units)	Ultimate Destination
Evaporation	≈ 80 gallons / 2-3 months	

s. Are process water additives used in this operation? Yes ✓ No ___
If yes, indicate below the concentration of those additives in process water (example additives: biocide, detergent, cleaning agent, antifoaming agent, alkali, emulsified oil). For each additive also indicate the general purpose (use) and chemical name. (If chemical name is not known, provide the trade name.)

Additive	Trade Name	Chemical Name	Purpose or Use	Concentration of Additive in Solution (~~mg/l~~) %
EXAMPLE: cleaning agent	METCLENZ	sodium gluconate	rust removal	250
Cutting fluid	Proline DEI	Hydrotreated mineral oil and Petroleum hydrocarbons	lubricant/coolant	.03

48-14-1 (3-89)–7f

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

Please print or type. DO NOT STAPLE.

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-96

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.
Manifest Document No.
2. Page 1 of
Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
4. Generator's Phone ( )

A. State Manifest Document Number: NY C 387579-3
B. Generator's ID: SAME

5. Transporter 1 (Company Name)
6. US EPA ID Number
C. State Transporter's ID
D. Transporter's Phone

7. Transporter 2 (Company Name)
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone ( )

9. Designated Facility Name and Site Address
10. US EPA ID Number
G. State Facility's ID
H. Facility's Phone: (518) 842-5311

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	1		15		EPA D001 / STATE
b.	1		15		EPA D001 / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
a. 1 DRUM D001 WASTE PAINT
b. 1 DRUM D001 WASTE PAINT
c.
d.

K. Handling Codes for Wastes Listed Above
a. F
b. F
c.
d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

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Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name | Signature | Mo. Day Year

NY C 387579-3

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 5-Generator-Mailed by TSD facility

P2SUL005897

48-14-1 (3-89)--7f

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

Form Approved OMB No. 2050-0039, Expires 9-30-96

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: [illegible]
Manifest Document No.: [illegible]
2. Page 1 of
Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
[illegible]
4. Generator's Phone ([illegible])

A. State Manifest Document Number: NY C 387579-3
B. Generator's ID: SAME

5. Transporter 1 (Company Name): SAFETY-KLEEN CORP.
6. US EPA ID Number: [illegible]
C. State Transporter's ID: [illegible]
D. Transporter's Phone: (516) [illegible]

7. Transporter 2 (Company Name)
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone ( )

9. Designated Facility Name and Site Address: [illegible]
SAFETY-KLEEN CORP.
[illegible]
10. US EPA ID Number: [illegible]
G. State Facility's ID
H. Facility's Phone: (516) 842-6311

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA, MAYBE FULL) [illegible]	11	DT	75	G	EPA D001 STATE D039
b. NA WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA, MAYBE FULL) [illegible]	1	DT	15	G	EPA D001 STATE D039
c.					EPA STATE
d.					EPA STATE

J. Additional Descriptions for Materials Listed Above
a. (1A) D018 D006 (1B) D008, D035, D040
b. (1B) D018 D006 (1B) D008, D035, D040
c
d

K. Handling Codes for Wastes Listed Above
a: F
b: F
c
d

15. Special Handling Instructions and Additional Information
[illegible]
EMERGENCY RESPONSE 1-700-800-4660 24HR
[illegible]

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

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Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

NY C 387579-3

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 8-Generator-retained by generator

P2SUL005898

safety-kleen.

LAND DISPOSAL RESTRICTION AND WASTE ANALYSIS CRITERIA FORM

PHASE II LDR NOTICE: GENERATOR NOT REQUIRED TO LIST UNDERLYING CONSTITUENT BECAUSE TREATER WILL MONITOR FOR THE CONSTITUENTS BEFORE LAND DISPOSAL.

TO: SAFETY-KLEEN CORP. (DESIGNATED FACILITY) EPA ID NO. NYD000708198 (DESIGNATED FACILITY)

2-118-08-1500 01 341458 9520

ADDRESS: 80 SEABRO NO AMITYVILLE, NY 11701

Under manifest / sales service number NYC 387579-3 the generator noted below is shipping to you a waste determined to be restricted under 40 CFR Part 268. In accordance with 40 CFR Part 268.7, the generator hereby provides notice that the waste is restricted from land disposal. A copy of this form must be kept by the generator and facility for five (5) years from the date of waste shipment. * SEE BELOW MG/KG

PLEASE ✓ THE APPROPRIATE BOXES

WASTE NAME (FOR NON-WASTE WATER)	WASTE CODE	THE WASTE MAY CONTAIN THE FOLLOWING RESTRICTED CONSTITUENTS	TREATMENT STANDARD (mg/l) OR METHOD
☑ Waste Petroleum Naphtha 105	D001,	Ignitable Liquid (High TOC Subcategory)	Incineration (INCIN), fuel substitution (FSUBS) or recovery (RORGS) (40 CFR 268.42) (non-waste water)
		Halogenated Organic Compounds (HOC's) ≥ 1000 mg/l	INCIN (40 CFR 268.42)(non-waste water)
	D006,	Cadmium	1.0 (non-waste water) MG/L
	D008,	Lead	5.0 (non-waste water) MG/L
	D018,	Benzene	Not Established
	D035,	Methyl Ethyl Ketone	10 (NON-WASTE WATER)
	D039,	Tetrachloroethylene	36 (NON-WASTE WATER) Not Established
	D040,	Trichloroethylene	6.0 (NON-WASTE WATER) Not Established
			6.0 (NON-WASTE WATER) Not Established
☐ Waste Petroleum Naphtha 140	D001,	Ignitable Liquid (High TOC Subcategory)	INCIN, FSUBS, or RORGS (40 CFR 268.42)(non-waste water)
	D006,	Cadmium	1.0 (non-waste water) MG/L
	D008,	Lead	5.0 (non-waste water) MG/L
	D018,	Benzene	10 (NON-WASTE WATER) Not Established
	D039,	Tetrachloroethylene	6.0 (NON-WASTE WATER) Not Established
☐ Cyclonic, 150 Premium Solvent OR Actrel Solvent (If customer specific TCLP is not available) OR AQUEOUS BRAKE CLEANER	D006,	Cadmium	1.0 (non-waste water)
	D008,	Lead	5.0 (non-waste water)
	D018,	Benzene	Not Established
	D039,	Tetrachloroethylene	6.0 (NON-WASTE WATER) Not Established
	D040,	Trichloroethylene	Not Established
☐ Waste Petroleum Naphtha (sludges from Safety-Kleen Service Center Operations)	D001,	Ignitable Liquid (High TOC Subcategory)	INCIN, FSUBS, or RORGS (40 CFR 268.42)(non-waste water)
	D006,	Cadmium	1.0 (non-waste water) MG/L
	D008,	Lead	5.0 (non-waste water) MG/L
	D018,	Benzene	10 (NON-WASTE WATER) Not Established
	D039,	Tetrachloroethylene	6.0 (NON-WASTE WATER) Not Established
☐ Waste Compound Cleaning Liquid/ Immersion cleaner 699	D006,	Cadmium	1.0 (non-waste water) MG/L
	D008,	Lead	5.0 (non-waste water) MG/L
	D018,	Benzene	10 (NON-WASTE WATER) Not Established
	D021,	Chlorobenzene	Not Established
	D027,	1, 4-Dichlorobenzene	6.0 (NON-WASTE WATER) Not Established
	D035,	Methyl Ethyl Ketone	36 (NON-WASTE WATER) Not Established
	D039,	Tetrachloroethylene	6.0 (NON-WASTE WATER) Not Established
	D040,	Trichloroethylene	6.0 (NON-WASTE WATER) Not Established

OPTIONAL STATE INFO.

MACHINE NUMBER	SPECIFIC GRAVITY	EXCESS FLUID IN DRUM? (MS>2/3)(IC>1/3)(Y/N)	OFF - COLOR? (Y/N)	MORE THAN 30% SOLIDS?(Y/N)	UNUSUAL ODOR? (Y/N)	UNUSUAL MATERIALS INCLUDED/ADDED? (Y/N)
172-35811						
172-37237						
172-37242						
173-02444						
173-02468						
173-02475						
173-02493						
173-02695						
173-09781						
173-10374						
173-41669						
SPECIFIC GRAVITY ACCEPTANCE GUIDELINES						

SALES REPRESENTATIVE SIGNATURE ** NO SIGNATURE REQUIRED **

The constituent composition is based on knowledge of the waste (via Material Safety Data Sheets for the chemical(s) used, and the process which created the waste).
*These treatment standards do not preclude reclamation prior to final disposition.

Generator Company: METCO ~~* ALSO IN ACCORDANCE WITH 6NYCRR 376.4(E)~~ EPA ID NO.: NYD057731663

Safety-Kleen Corp. manages the above waste through its recycling and fuels programs in accordance with all applicable elements of the land disposal restrictions.

printed on recycled

GENERATOR

FORM 1339 (10/94)

48-14-1 (3-89)-7t

2-118-08

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

Form Approved OMB No. 2050-0039. Expires 2-28-94

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD 057731663
Manifest Document No.: 41456
2. Page 1 of 1

Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
METCO
325 DUFFY AVE
HICKSVILLE NY 11801--367
4. Generator's Phone (516) 938-1661

A. State Manifest Document Number: NY C 387579-3
B. Generator's ID: SAME

5. Transporter 1 (Company Name): SAFETY-KLEEN CORP.
6. US EPA ID Number: ILD 984908202
C. State Transporter's ID: MU4523
D. Transporter's Phone: (516) 842-6311

7. Transporter 2 (Company Name):
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone ( )

9. Designated Facility Name and Site Address: 211808
SAFETY-KLEEN CORP.
BO SEABRO
NO AMITYVILLE, NY 11701
10. US EPA ID Number: NYD 000708198
G. State Facility's ID:
H. Facility's Phone: (516) 842-6311

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII(D001) (D006, D008, D018, D035, D039, D040)(ERG#27)	11	DM	73	G	EPA D001 STATE D039
b. RQ WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII(D001) (D006, D008, D018, D035, D039, D040)(ERG#27)	1	DM	15	G	EPA D001 STATE D039
c					EPA / STATE
d					EPA / STATE

J. Additional Descriptions for Materials Listed Above
a. 1(A) D018 D006 (A) D008, D035, D040
b. 1(B) D018 D006 (B) D008, D035, D040

K. Handling Codes for Wastes Listed Above
a. R c.
b. R d.

15. Special Handling Instructions and Additional Information
9520 81188138 341456 2-118-08-1500 01
EMERGENCY RESP#1-708-888-4660 24HR
SKDOT# A: 501 B: 585 C: D:

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: [illegible] Signature: [illegible] Mo. Day Year: 05 11 6 95

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: Chris Rohrbaugh Signature: Chris Rohrbaugh Mo. Day Year: 05 11 6 95

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: Signature: Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: Signature: Mo. Day Year

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

NY C 387579-3

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 3-Disposer State-mailed by generator

P2SUL005900

Z 314 694 164

Receipt for Certified Mail

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

UNITED STATES POSTAL SERVICE

Sent to NYS Dept. of Env. Cons.
Div. Hazardous Sub. Reg.
Street, Apt. No., or PO Box No. Hazardous Waste Manif.
P.O. Box 12820
P.O., State and ZIP Code Albany, NY 12212

Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form 3800, March 1993

Fold at line over top of envelope to the right of the return address

CERTIFIED MAIL

Z 314 694 164

Is your RETURN ADDRESS completed on the reverse side?

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
State of New York
Dept. of Env. Conservation
Div. of Hazardous Substances Reg.
Hazardous Waste Manifest
P.O. Box 12820
Albany, NY 12212

4a. Article Number
Z 314 694 164

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

PS Form 3811, December 1991 ☆U.S. GPO: 1993—352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

ER METCO

Sulzer Metco (US) Inc.
1101 Prospect Avenue
PO Box 1006
Westbury, NY 11590-0201

State of New York
Department of Environmental Conservation
Division of Hazardous Substances Regualtion
P.O. Box 12820
Albany, NY 12212

MARYLAND DEPARTMENT OF THE ENVIRONMENT

2500 Broening Highway Baltimore, Maryland 21224

(410) 631-3344 1-800-633-6101 (within Maryland) http://www.mde.state.md.us

HAZARDOUS WASTE PROGRAM

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) HAZARDOUS WASTE MANIFEST Form Approved. OMB No. 2050-0039.

In case of an emergency or spill, immediately call the National Response Center at (800) 424-8802 and the MDE at (410) 631-3400. Nights and Holidays at (410) 974-3551.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. MYD133155 Manifest Document No. 3163

2. Page 1 of

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590-0000

4. Generator's Phone (516) 338-2337

A. State Manifest Document Number MDC 1026431

B. State Generator's ID

C. State Transporter's ID HWH DC

5. Transporter 1 Company Name: Clean Harbors Env Services Inc

6. US EPA ID Number: MAD981505518

D. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID HWH DC

9. Designated Facility Name and Site Address
Clean Harbors Of Baltimore Inc
1910 Russell Street
Baltimore, MD 21230-0000

10. US EPA ID Number: MDD982055518

F. Transporter's Phone

G. State Facility ID

H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CHROMIC ACID SOLUTION , 8, UN1755, II	XX1	DF	1300	P	D002
b. HAZARDOUS WASTE SOLID, N.O.S. (CHROMIUM), 9, NA3077, III	XX3	DM	1575	P	D007
c.					
d.					

J. Additional Descriptions for Materials Listed Above

	Haz. Code	Physical State	Specific Gravity	Percentage
a.		L		
b.		S		
c.				
d.				

K. Handling Codes for Wastes Listed Above: a. T b. D c. d.

15. Special Handling Instructions and Additional Information
11a CH189142 D005, D007, D008 4x55 ERG - 9TH EMERGENCY, CALL CHES [illegible]
11b CH189108 3x55 ERG [illegible]

16. GENERATORS CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and Maryland Statutes or Regulation.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Peter D. Pietrantonio Signature: [signature] Month Day Year 12 2 92

GENERATOR

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: Richard Engel Signature: [signature] Month Day 12 2

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name Signature Month Day

TRANSPORTER

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. — Date

Printed/Typed Name: Jacqueline [illegible] Signature: [signature] Month Day 12 2

FACILITY

EPA Form 8700-22 (9-99) COPY 1 - FACILITY DETACH & RETURN THIS COPY TO GENERATOR

WASTE CONTROL
SPECIALISTS LLC

December 5, 2005

Peter DiPietrantonio
Sulzer-Metco (US), Inc.
1101 Prospect Ave
Westbury, NY 11590

Dear Mr. DiPietrantonio:

Thank you for selecting Waste Control Specialists, LLC as your Treatment, Storage, and Disposal Facility. We value your business and hope to be of future service.

This letter serves as confirmation that we are in receipt of the waste described on the below referenced manifest. Enclosed, please find your signed original manifest indicating that the waste was received at the WCS Facility in Andrews, Texas on 11/29/2005.

WCS is committed to providing a level of customer service unequaled in the industry today. If you have any questions regarding this manifest, please do not hesitate to contact me at (888) 789-2783.

Again thank you for selecting Waste Control Specialists, LLC.

Sincerely,

Victoria Cukiery

Manifest Coordinator

Re: Manifest
3642224
N/A

Corporate
5430 LBJ Freeway, Ste. 1700
Three Lincoln Centre
Dallas, TX 75240
Ph. 972.715.9800
Fx. 972.448.1419

Facility
P.O. Box 1129
Andrews, TX 79714
Ph. 888.789.2783
Fx. 505.394.3427

WASTE CONTROL
SPECIALISTS LLC

Certificate of Disposal

Date of Certificate: 12/05/05

WCS
9998 W Hwy 176
Andrews, TX 79714
EPA ID No. TXD988088464

Reference
Sulzer-Metco (US), Inc.
1101 Prospect Ave
Westbury, NY 11590

WCS Profile #:	WP-019353
Manifest:	3642224
Received On:	11/29/05

This is to certify that the waste shipped to WCS on the above mentioned manifest was disposed of on 02-DEC-2005 in accordance with all applicable state, federal, and local regulations. The waste was disposed of in a WCS permitted chemical waste landfill.

I certify that the information contained in or accompanying this document is true, accurate, and complete. As to the identified section(s) of this document for which I cannot personally verify truth and accuracy, I certify as the company official having supervisory responsibility for the persons who, acting under my direct instructions, made the verification that this information is true, accurate, and complete.

Sincerely,
WCS

Anna Dean
for Technical Services Manager

Corporate
5430 LBJ Freeway, Ste. 1700
Three Lincoln Centre
Dallas, TX 75240
Ph. 972.715.9800
Fx. 972.448.1419

Facility
P.O. Box 1129
Andrews, TX 79714
Ph. 888.789.2783
Fx. 505.394.3427

Tab 99041
Van 548097
05-88830 –
05-88876
#8151

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY
P.O. Box 13087
Austin, Texas 78711-3087

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No. N/A	Manifest Document No. 5171 21	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: SULZER METCO (US), INC. 1101 PROSPECT AVE. WESTBURY, NY 11590

4. Generator's Phone (516)-338-2337

A. State Manifest Document Number: 3642224

B. State Generator's ID: ~~NHA~~ UC D0036

5. Transporter 1 Company Name: TRI-STATE MOTOR TRANSIT, CO.

6. US EPA ID Number: MOD095038998

C. State Transporter's ID: ~~[illegible]~~ 340355

D. Transporter's Phone: 1800 234 8768

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address: WASTE CONTROL SPECIALISTS, LLC. 9998 W. HWY. 176 ANDREWS, TX 79714

10. US EPA ID Number: TXD988088464

G. State Facility's ID: 50858

H. Facility's Phone: (505) 394-4300

11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
X	a. RADIOACTIVE MATERIAL, EXCEPTED PACKAGE – LIMITED QUANTITY OF MATERIAL, (7), UN2910	047	BM	0.8936	K	D011 3191
	b.					
	c.					
	d.					

J. Additional Descriptions for Materials Listed Above: 11A. NON-HAZ ZIRCONIUM OXIDE WASTE

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information: 24 HR EMERGENCY CONTACT # 410-377-3742

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name: TIM ZIK — Signature: [signature] — Month Day Year: 11 23 05

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name: ED PANKEY — Signature: [signature] — Month Day Year: 11 23 05

18. Transporter 2 Acknowledgement of Receipt of Materials — Date

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. — Date

Printed/Typed Name: Erin Tippett — Signature: Erin Tippett — Month Day Year: 11 29 05

TCEQ-0311 (Rev. 09/01/02) White - original Pink-TSD Facility Yellow-Transporter Green-Generator's first copy

When using the Uniform Waste Manifest for rail or water (bulk shipment) or international shipments refer to the applicable TCEQ regulations.

REPORT SPILLS AND/OR DISCHARGES TO THE TEXAS SPILL RESPONSE CENTER AT 512/463-7727 (24 HOURS)

INSTRUCTIONS TO GENERATOR (Please Type or Print Clearly)

(1) Enter the Generator's U.S. EPA twelve digit identification number and the unique five digit number assigned to this manifest by the generator if you are shipping hazardous waste.

(2) Enter the total number of pages used to complete this manifest.

(3) Enter the company name and mailing address of the generator of the waste.

(4) Provide a phone number where an authorized agent of your firm may be reached in the event of an emergency.

(5) Enter the company name of the first transporter and their U.S. EPA ID Number.

(6) If applicable, enter the company name of the second transporter and their U.S. EPA ID Number. If more than two transporters are used, enter each additional transporter's information on the Continuation Sheet (EPA form 8700-22A) or in box 15 of this form.

(7) Enter the company name, site address, and U.S. EPA ID Number of the facility designated to receive the waste listed on this manifest.

(8) **COMPLETE ALL STATE OF TEXAS INFORMATION A. THROUGH H. IN THE SHADED AREAS.**

(9) Complete the waste description table as follows:

(A) ITEM 11A - When shipping an EPA/DOT regulated hazardous waste or material in conjunction with solely state regulated waste enter an "x" in the HM box before each EPA/DOT regulated waste/material description.

(B) ITEM 11 - Enter the U.S. DOT Proper Shipping Name, Hazard Class or Division, and ID Number (UN/NA) for each waste identified. If it is a Class I nonhazardous waste use the Texas Waste Code description.

(C) ITEM 12 - Enter the number of containers for each waste and the appropriate abbreviation for type located in Subchapter A of the TCEQ Industrial Solid Waste Rules.

(D) ITEM 13 - Enter the total quantity of waste described on each line.

(E) ITEM 14 - Enter the appropriate letter from the table below for the unit of measure.

G = Gallons (liquids only)	Y = Cubic Yards	M = Metric Tons (1000 kg.)
P = Pounds	L = Liter (Liquids Only)	N = Cubic Meters
T = Tons (2000 lbs.)	K = Kilograms	

(F) ITEM I - Enter the appropriate TCEQ State Waste Code for each waste you are shipping.

(10) The Generator must read, sign (by hand), and date the certification statement. If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water or air) inserted in the space below. In signing the waste minimization certification statement, those generators shipping hazardous waste who have not been exempted by statute or regulation from the duty to make a waste minimization certification are also certifying that they have complied with the waste minimization requirements.

(11) The manifest must be signed and dated by the first transporter in the presence of the Generator. If more than one transporter is to be used, the Generator must provide additional copies for their use.

*(12) Generator retains green copy, sending remaining copies with the driver.

INSTRUCTIONS FOR THE TRANSPORTER (Please Type or Print Clearly)

(1) As driver of the transport vehicle, you are responsible for ensuring that all waste received by you arrives at the specified destination.

(2) Sign and date the space provided, certifying the waste amounts in **PART I** were received for transport. **NOTE:** If you are unable to carry out the delivery of the shipment as specified, dial the emergency phone numbers given in **PART I** notifying the **GENERATOR.**

(3) Upon delivery of the shipment, the TSD Facility Owner/Operator is to sign for the shipment in your presence and fill in "date received".

*(4) Separate the yellow copy and retain for your records. Leave the remaining copies with the **TSD** Facility Owner/Operator.

INSTRUCTIONS TO TREATMENT, STORAGE AND DISPOSAL (TSD) FACILITY OWNER/OPERATOR (Please Type or Print Clearly)

(1) The authorized representative of the designated (or alternate) facility's owner or operator must note in **ITEM 19** any significant discrepancy between the waste described on the manifest and the waste actually received at the facility.

(2) Enter date received and sign in the presence of the driver declaring receipt of the wastes and verifying the quantities in the table in **PART I.**

(3) Retain the pink copy for your records and return the completed original (white) copy to the **GENERATOR.**

* U.S. EPA and TCEQ regulations require that copies of this Uniform Hazardous Waste Manifest be retained for a period of three (3) years in your company records. Do **not** send to TCEQ unless otherwise notified by these departments.

BURDEN STATEMENT

The public reporting burden for this collection of information is estimated to average 31 minutes for generators, 16 minutes for transporters, and 16 minutes for treatment, storage and disposal facilities. The recordkeeping burden per response for this collection of information is estimated to average 6 minutes for generators, 6 minutes for transporters, and 6 minutes for treatment, storage and disposal facilities. The burden associated with reading the regulations is estimated at 1 hour and 15 minutes annually. Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal agency.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number . The OMB numbers for EPA's regulations are listed in 40 CFR Part 9 and 48 CFR Chapter 15. Send comments regarding these burden statements or any other aspect of this collection, including suggestions for reducing the burden, including through the use of automated collection techniques to the Director, OPPE Regulatory Information Division, U.S. Environmental Protection Agency (2137), 401 M St., S.W., Washington, D.C., 20460 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Attention: Desk Officer for EPA, 725 17th Street, N.W. Washington, D.C. 20503. Include the OMB control number in any correspondence.

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0442
RUN DATE: 08/03/93

C 282200 1828 00040 W I
LOCATION FAC EP

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

PAGE 2
CONTINUED FROM PREVIOUS PAGE

NOTE - SHOULD NEW EVIDENCE REQUIRE LOWER AMBIENT LEVELS BE MET FOR THE ABOVE UNDERSCORED CAS NUMBER(S), THE SOURCE OWNER MAY BE REQUIRED TO REDUCE EMISSIONS.

GENERAL CONDITIONS

1. SHOULD SIGNIFICANT NEW SCIENTIFIC EVIDENCE FROM A RECOGNIZED INSTITUTION RESULT IN A DECISION BY DEC THAT LOWER AMBIENT POLLUTION LEVELS MUST BE ESTABLISHED, IT MAY BE NECESSARY TO REDUCE EMISSIONS FROM THIS SOURCE PRIOR TO THE EXPIRATION OF THIS CERTIFICATE TO OPERATE.

SPECIAL CONDITIONS (151)CONDITION 1. AG-1 COMPLIANCE REQUIRED

PROCESSING FEE $ 75

(15)PRIOR COMMENTS (16)BY 428VSI (17)DATE 09/07/91	(18)CURRENT COMMENTS (19)BY 428VSI (20)DATE 10 21 93	(27)LAST INSPECTION DATE 10/21/93
1.	1. 4th PM EXCEEDS AGC	(21)INSPECTION STATUS
2.	2.	(22)DATE OF NEXT ACTION 11/15/94
3.	3.	(23)ISSUE DATE / /
4.	4.	(24)EXPIRATION DATE / /
5.	5.	(25)CO FEE

FIRM REP'S SIGNATURE: Joseph Mann DATE: 10/21/93 ISSUING OFFICER'S SIGNATURE: M. Harmann DATE: NOV 10 1994

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0441
RUN DATE: 08/03/93

C 282200 1828 00040 W I
LOCATION FAC EP

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

FACILITY EMIS-CLASS / PGM-CODE: A2 POINT EMIS-CLASS / PGM-CODE:

EMISSION POINT 00040
(41)UTM-E: 622.2 KM. (42)STACK HEIGHT: 35 FT. (43)EXIT VELOCITY: 50.00 FT/SEC (44)SIC: 3569 (45)AGENCY-CODE-1: C (COUNTY)
(46)UTM-N: 513.4 KM. (47)HT ABV STRUC: 19 FT. (48)EXIT FLOW: 1975.00 ACFM (49)CO FEE: $75.00 (50)AGENCY-CODE-2: C (COUNTY)
(51)GRND ELEV: 140 FT. (52)STK DIAM: 11 IN. (53)EXIT TEMP: 70 DEGR F (54)CO CONDITIONS: 1 3 EDIT: REV. REQ.

UNIT I
(55)HOURS/DAY: 2.5 (56)DAYS/YEAR: 231 (57)% OP BY SEASON: 25 25 25 25 (58)SOURCE CODE: 1303 SPRAYING (OTHER THAN
(59)BLDG: (60)FLOOR NAME: (61)RULE 1: 212.00 (62)RULE 2:

PROCESS/UNIT DESCRIPTION (72)DESCRIPTION 1. THIS UNIT PROVIDES VENTILATION FOR A SPRAY BOOTH
2. USED FOR TESTING POWDERS.

CONTROL EQUIPMENT (73)TYPE: 098 OTHER (74)MFG: METCO WET COLLECTOR, 4CW (75)ID: 40 (76)DATE INSTALLED: 04/91
(77)DISPOSAL METHOD: 06 SOLD (78)USEFUL LIFE: 20 YEARS

CONTROL EQUIPMENT (79)TYPE: 012 IMPINGEMENT PLATE (80)MFG: IMPINGEMENT PLATE (81)ID: 41 (82)DATE INSTALLED: 04/91
(83)DISPOSAL METHOD: 06 SOLD (84)USEFUL LIFE: 20 YEARS

AIR CONTAMINANTS	CAS NUMBER	ENV RATING	EMISSIONS ACTUAL	UNIT	HOW DET	PERMISSIBLE	% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR	ANNUAL EMISSIONS (LBS/YEAR) ACTUAL	10x	PERMISSIBLE
NICKEL AS METAL	(085) 07440-02-0	(086) A	(087) .049	(088) 01	(089) 06	(090) .049	(091) 95.0	(092) .049	(093) 2.832	(094) 1	(095) 2.832
COBALT	(096) 07440-48-4	(097) B	(098) .006	(099) 01	(100) 06	(101) .006	(102) 95.0	(103) .006	(104) 3.290	(105) 0	(106) 3.290
MOLYBDENUM (8CI9CI)	(107) 07439-98-7	(108) C	(109) .043	(110) 01	(111) 06	(112) .043	(113) 95.0	(114) .043	(115) 2.485	(116) 1	(117) 2.485
TITANIUM OXIDE	(118) 13463-67-7	(119) C	(120) .011	(121) 01	(122) 06	(123) .011	(124) 95.0	(125) .011	(126) 6.360	(127) 0	(128) 6.360
CHROMIUM VI	(129) 07440-47-3	(130) A	(131) .004	(132) 01	(133) 06	(134) .004	(135) 95.0	(136) .004	(137) 2.310	(138) 0	(139) 2.310
BORON NITRIDE	(140) 10043-11-5	(141) C	(142) .500	(143) 02	(144) 06	(145) .500	(146) 95.0	(147) .001	(148) 2.900	(149) -1	(150) 2.900
CONTINUATION FORM J											
TUNGSTEN CARBIDE	(085) 12070-12-1	(086) B	(087) .014	(088) 01	(089) 06	(090) .014	(091) 95.0	(092) .014	(093) 8.090	(094) 0	(095) 8.090
COPPER	(096) 07440-50-8	(097) C	(098) .004	(099) 01	(100) 06	(101) .004	(102) 95.0	(103) .004	(104) 2.310	(105) 0	(106) 2.310
CHROMIUM OXIDE	(107) 01308-38-9	(108) B	(109) .009	(110) 01	(111) 06	(112) .009	(113) 95.0	(114) .009	(115) 5.200	(116) 0	(117) 5.200
IRON	(118) 07439-89-6	(119) C	(120) .005	(121) 01	(122) 06	(123) .005	(124) 95.0	(125) .005	(126) 2.890	(127) 0	(128) 2.890
ALUMINUM OXIDE	(129) 01344-28-1	(130) C	(131) .008	(132) 01	(133) 06	(134) .008	(135) 95.0	(136) .008	(137) 4.620	(138) 0	(139) 4.620
PARTICULATES	(140) NY075-00-0	(141) B	(142) .230	(143) 01	(144) 06	(145) .230	(146) 95.0	(147) .230	(148) 1.329	(149) 2	(150) 1.329

CONTINUED ON NEXT PAGE

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0443
RUN DATE: 08/03/93

C 282200 1828 00040 W I
LOCATION FAC EP

T O X I C I T Y A N A L Y S I S

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

EMISSION POINT 00040

(41)UTM-E: 622.2 KM. (42)STACK HEIGHT: 35 FT. (43)EXIT VELOCITY: 50.00 FT/SEC RATIO STK HT / BLDG HT: 2.18
(46)UTM-N: 513.4 KM. (47)HT ABV STRUC: 19 FT. (48)EXIT FLOW: 1975.00 ACFM PLUME RISE: 3.32 FT.
(51)GRND ELEV: 140 FT. (52)STK DIAM: 11 IN. (53)EXIT TEMP: 70 DEGR F EFFECTIVE STACK HEIGHT: 38.32 FT.

N O T E - S O U R C E C O D E I N D I C A T E S C A S E S P E C I F I C E X A M I N A T I O N N E C E S S A R Y

AIR CONTAMINANTS	CAS NUMBER	EMISSIONS ACTUAL	UNIT	PERMISSIBLE	% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR	AAL DATA (UG/M3) AAL	TOXIC LVL	SOURCE	MAX CALC AMB LEVEL	REMARKS
NICKEL AS METAL	(085) 07440-02-0	(087) .049	(088) 01	(090) .049	(091) 95.0	(092) .049	.0042	HIGH		.07854	AAL EXCEEDED
COBALT	(096) 07440-48-4	(098) .006	(099) 01	(101) .006	(102) 95.0	(103) .006	.12	MODERATE		.009	SEE NOTE ABV
MOLYBDENUM (8CI9CI)	(107) 07439-98-7	(109) .043	(110) 01	(112) .043	(113) 95.0	(114) .043					
TITANIUM OXIDE	(118) 13463-67-7	(120) .011	(121) 01	(123) .011	(124) 95.0	(125) .011					
CHROMIUM VI	(129) 07440-47-3	(131) .004	(132) 01	(134) .004	(135) 95.0	(136) .004	.00008	HIGH	FEDERAL	.006411	AAL EXCEEDED
BORON NITRIDE	(140) 10043-11-5	(142) .500	(143) 02	(145) .500	(146) 95.0	(147) .001					
CONTINUATION FORM J											
TUNGSTEN CARBIDE	(085) 12070-12-1	(087) .014	(088) 01	(090) .014	(091) 95.0	(092) .014					
COPPER	(096) 07440-50-8	(098) .004	(099) 01	(101) .004	(102) 95.0	(103) .004	2.3999	LOW		.00641	SEE NOTE ABV
CHROMIUM OXIDE	(107) 01308-38-9	(109) .009	(110) 01	(112) .009	(113) 95.0	(114) .009	1.1999				
IRON	(118) 07439-89-6	(120) .005	(121) 01	(123) .005	(124) 95.0	(125) .005					
ALUMINUM OXIDE	(129) 01344-28-1	(131) .008	(132) 01	(134) .008	(135) 95.0	(136) .008					
PARTICULATES	(140) NY075-00-0	(142) .230	(143) 01	(145) .230	(146) 95.0	(147) .230	64		FEDERAL		

E N D O F T O X I C I T Y A N A L Y S I S

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0444
RUN DATE: 08/03/93

C 282200 1828 00040 W I
LOCATION FAC EP

E R R O R A N A L Y S I S

N O N - M I N O R

O W N E R	F A C I L I T Y	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

FORM TYPE	LINE NUMBER	BOX NUMBER	ERROR NUMBER	FATAL/ WARNING FLAG	DESCRIPTION	SIZE OF FIELD
I		059	0430	W	BUILDING NAME OR NUMBER NOT SPECIFIED	
I		060	0435	W	FLOOR NAME OR NUMBER NOT SPECIFIED	
I			0440	W	START-UP DATE NOT SPECIFIED	
I	1	085	0982	W	MCAL (MAX CALC AMBIENT LEVEL) EXCEEDS AAL	
I	5	129	0982	W	MCAL (MAX CALC AMBIENT LEVEL) EXCEEDS AAL	

E N D O F E R R O R A N A L Y S I S

LOW-LEVEL RADIOACTIVE WASTE REPORT FORM 1995 02-27-96

TUESDAY

SPOKE TO PETE PASTORELLE NDL (914) 737-7200

SULZER HEICO DID NOT TRANSPORT/HAVE BURIED ANY MATERIAL BY NDL.

FILE REPORT WITH ZERO BALANCES BUT INDICATE WILL HAVE FUTURE YEARS BURIED MATERIAL.

GALLON DRUM	CUBIC FEET
55	7.5
35	4.01
5	.67

AS PER VICTOR ANDRADE ON SITE AS OF 02-27-96

7 - 5 GALLON PAILS

7 PAILS X .67 .80 = 4.69 ft^3 = 4.7 ft^3

7 - 5 GAL @ .25 EACH = 1.75 mCi

1.75 mCi X 10^3 1000 = 1750 μCi 1 mCi = 1000 μCi

THEN 1750 μCi ÷ 0.11 μCi/g = 15 909 g

THEN 15909 g ÷ 453.6 = 35 #

WORK COPY

RETURN BY MARCH 1, 1996

NEW YORK STATE ENERGY RESEARCH AND DEVELOPMENT AUTHORITY
Radioactive Waste Policy and Nuclear Coordination

1995 LOW-LEVEL RADIOACTIVE WASTE
REPORT FORM

NOTE: Please refer to the **Instructions** before completing this form. Also, see Public Authorities Law, Section 1854-d(1) and Part 502 of Chapter XI of Title 21 NYCRR (Reporting Regulations) provided with this form.

FOR THE PERIOD: JANUARY 1 THROUGH DECEMBER 31, 1995

PLEASE TYPE OR PRINT LEGIBLY

CODE (official use only) | | | | | |

SECTION I. Generator Information

- **Place label from the front of this packet in the space to the right.**
- **Mark any corrections in the table below.**

PLACE MAILING LABEL HERE

A **Updated Generator Information**

Licensing Agency/ies	License No(s).
Your Facility Phone No.: (516) 334-1300 extension 2500	
Contact JAMES J. ZANETTI	Title VICE PRESIDENT COMPONENT MANUFACTURING
Facility Name SULZER METCO (US) INC.	
Street Address 325 DUFFY AVENUE	

City	County	State	Zip Code
HICKSVILLE	NASSAU	NY	11801

B Name and principal office of generator if different from A (above)

Street address			
City	County	State	Zip Code

C	Preparer's Name	Title	Telephone and Extension
	CONSTANCE L. CONROY	ENVIRONMENT, HEALTH AND SAFETY	(516) 338-2337

D Identify, by issuing authority and number, permits that authorize transfer of your LLRW to a licensed LLRW disposal facility:

Disposal Site Location	Disposal Site Use Permit Number

E FACILITY TYPE CODE H 8

Refer to page 2 of instructions to determine the facility type code that best describes your facility. **Use only one code** consisting of one letter and one number.

F Briefly describe the activities, processes, or uses of radioactive material that result in LLRW generation at your facility.

MANUFACTURER OF THERMAL SPRAY EQUIPMENT

SECTION II. Information on LLRW Disposal

Enter all volumes in ft^3 and activities in mCi. 55 gallon = 7.5 ft^3 30 gallon = 4.01 ft^3 5 gallon = .67 ft^3

A	Was any LLRW from your facility **received** by a licensed LLRW disposal facility during 1995?	☒ No. Skip to Section III. ☐ Yes. Continue with this section.
B	Complete this page for LLRW from your facility that was received by a licensed LLRW disposal facility during 1995. **NOTE: If more than one broker was used, photocopy this page to provide additional information.**	

CLASS A

	Barnwell, SC Chem-Nuclear		Clive, UT Envirocare			
	Volume	Activity	Volume	Activity		
Via Broker or Agent (Name)						
DIRECT TRANSFER					TOTAL VOLUME	TOTAL ACTIVITY
	ft^3	mCi	ft^3	mCi	ft^3	mCi

Did any Class A waste meet 10 CFR 61.56(b) stability requirements?

☐ No

☐ Yes. Enter the Volume which met the requirements: ft^3

CLASS B

	Barnwell, SC Chem-Nuclear			
	Volume	Activity		
Via Broker or Agent (Name)				
DIRECT TRANSFER			TOTAL VOLUME	TOTAL ACTIVITY
	ft^3	mCi	ft^3	mCi

CLASS C

	Barnwell, SC Chem-Nuclear			
	Volume	Activity		
Via Broker or Agent (Name)				
DIRECT TRANSFER			TOTAL VOLUME	TOTAL ACTIVITY
	ft^3	mCi	ft^3	mCi

TOTALS FOR ALL CLASSES

TOTAL VOLUME	TOTAL ACTIVITY
ft^3	mCi

Enter the sums of Classes A, B, and C

WORK COPY

C Complete by listing the radionuclides contained in LLRW from your facility that was received by licensed LLRW disposal facilities during 1995. **Use additional sheets as necessary.**

Radionuclide	Activity (mCi)	Radionuclide	Activity (mCi)	Radionuclide	Activity (mCi)

Total activity for all radionuclides listed above:
(Total activity should equal total for all classes on previous page.)

TOTAL ACTIVITY _____ mCi

D Complete for the LLRW reported in Section II-B. Use one line for each "Physical Form" of waste. Do not include liquid scintillation fluids shipped for incineration. Use additional sheets as necessary. Refer to instructions for code listings.

Physical Form	Chemical Form	Radionuclides	S/S Code (See D.1)	Hazardous Property Code(s) (See D.2)	Volume (ft^3)

Total volume should equal total for all classes on previous page.

TOTAL VOLUME _____ ft^3

D.1	Did you enter Physical Form Codes S9 or S10?	☐ No ☐ Yes. Complete the "S/S Code" (Sorption/Solidification Code) column.
D.2	Does any of the LLRW reported in the table above have any known hazardous properties **other than radioactivity**?	☐ No ☐ Yes. Complete the "Hazardous Property Code(s)" column.

WORK COPY

E Did any of the LLRW reported in Section II-B contain more than 0.1% by weight chelating agents?

☐ No ☐ Yes. Complete the following table for such waste. Refer to instructions for code listing.

Chelating Agent Code	Chelate Percent by Weight of Unprocessed LLRW	Weight (lbs.) of Unprocessed LLRW	Volume (ft^3) of Unprocessed LLRW

F Was any of the LLRW reported in Section II-B treated in preparation for transfer?

☐ No
☐ Yes, it was treated on site. Indicate the treatment(s) used and complete F.1.
☐ Yes, it was treated off site. Indicate the treatment(s) used and complete F.1 and F.2.

F.1

On/Off Site	Treatment (Refer to instructions for code listing.) Code	Description	Effectiveness

F.2

Name of Off-Site Treatment Facility	Address City State	Broker

G Was any LLRW reported in Section II-B consolidated with other LLRW during off-site processing or treatment?

☐ No ☐ Yes. Please take this into consideration in filling out the next table.

H Container Information: Complete table for the LLRW reported in Section II-B. Complete a separate entry for each type of container used. Refer to instructions for code listing.

Container Code	Container Material Code	Average Weight (lbs.)	Specifications or Dimensions (Other)	Number of Containers	High-Integrity Container Yes or No	High-Integrity Container Approving Agency

I Please enter the highest surface-radiation level of any single container transferred for disposal: _____ millirems(mR)/hour

I.1 Is your response 200 mR/hour or greater? ☐ No. Skip to question J. ☐ Yes. Complete the rest of this question.

I.2 Enter the total number of containers transferred for disposal that had surface radiation levels of 200 mR/hour or greater: _____ containers

I.3 Please complete the following table for each such container. Attach separate sheets if necessary.

Volume (ft^3)	Class	Activity by Radionuclide (mCi)

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J	Did the LLRW reported in Section II-B contain any Source Material (SM)?
	☐ No ☐ Yes. Complete the following table for such material. Refer to instructions for code listing.

SM Type Code	Weight (lbs.)	SM Type Code	Weight (lbs.)

K	Did the LLRW reported in Section II-B contain any Special Nuclear Material (SNM)?
	☐ No ☐ Yes. Complete the following table for such material.

SNM Description and %	Total (Grams)	SNM Description and %	Total (Grams)

MAXIMUM, Single shipment	Total Grams	Contained U-233 Grams	Contained U-235 Grams	Contained Pu Grams

SECTION III. Information on LLRW Held in Storage for Decay or Interim Storage

Storage for Decay

A.1	Are you storing LLRW **at your facility** for decay and eventual disposal as non-radioactive waste?	☒ No. Skip to question A.3. ☐ Yes. Complete question A.2.

A.2 Complete the following table for LLRW being stored **at your facility** for decay.

Radionuclide Half-Lives	Radionuclides Held for Decay	Estimated Maximum Volume in Storage at Any One Time
Up to 14 days (e.g., Tc-99m, Ga-67, P-32, I-131)		
15 days to 59 days (e.g., P-33, Cr-51)		
60 to 90 days (e.g., I-125, S-35)		

A.3	Are you storing LLRW **at an off-site location** for decay and eventual disposal as non-radioactive waste?	☒ No. Skip to question B.1. ☐ Yes. Complete questions A.4 and A.5.

A.4 Complete the following table for LLRW being stored **at an off-site location** for decay.

Radionuclide Half-Lives	Radionuclides Held for Decay	Estimated Maximum Volume in Storage at Any One Time
Up to 14 days (e.g., Tc-99m, Ga-67, P-32, I-131)		
15 days to 59 days (e.g., P-33, Cr-51)		
60 to 90 days (e.g., I-125, S-35)		

A.5 Name of Off-site Storage Facility:

Address

Contact Person

Telephone
( ) Extension

WORK COPY

Interim Storage

B.1	Are you storing LLRW that will require eventual disposal in a licensed LLRW disposal facility?	☐ No. Skip to question L. ☒ Yes. Complete questions B through L.
B.2	Complete the following table for LLRW being stored as of December 31, 1995. Enter the actual volume and activity, as reduced or increased by treatment, of LLRW that was put into extended storage by your facility. If applicable, include any reduction in activity due to radioactive decay.	

CLASS A

	Volume	Activity		
LLRW Stored On Site	4.7	1.75		
LLRW Stored Off Site			TOTAL VOLUME	TOTAL ACTIVITY
	4.7 ft^3	1.75 mCi	4.7 ft^3	1.75 mCi

CLASS B

	Volume	Activity		
LLRW Stored On Site				
LLRW Stored Off Site			TOTAL VOLUME	TOTAL ACTIVITY
	ft^3	mCi	ft^3	mCi

CLASS C

	Volume	Activity		
LLRW Stored On Site				
LLRW Stored Off Site			TOTAL VOLUME	TOTAL ACTIVITY
	ft^3	mCi	ft^3	mCi

TOTALS FOR ALL CLASSES

TOTAL VOLUME	TOTAL ACTIVITY
4.7 ft^3	1.75 mCi

Enter the sums of Classes A, B, and C

B.3	Name of Off-site Storage Facility:
	Address
	Contact Person
	Telephone ( ) Extension

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C.1 List the radionuclides contained in the LLRW in interim **on-site** storage as of December 31, 1995. **Use additional sheets as necessary.**

Radionuclide	Activity (mCi)	Radionuclide	Activity (mCi)	Radionuclide	Activity (mCi)
TH - 232	1.75				

Total activity for all radionuclides listed above:
(Total activity should equal total for LLRW stored on site on previous page.)

TOTAL ACTIVITY 1.75 mCi

C.2 List the radionuclides contained in the LLRW in interim **off-site** storage as of December 31, 1995. **Use additional sheets as necessary.**

Radionuclide	Activity (mCi)	Radionuclide	Activity (mCi)	Radionuclide	Activity (mCi)

Total activity for all radionuclides listed above:
(Total activity should equal total for LLRW stored off site on previous page.)

TOTAL ACTIVITY mCi

C.3 If any of the radionuclides listed in Table C.1 or C.2 have half-lives of less than 90 days, please explain why these are not being held for decay and eventual disposal as non-radioactive waste.

WORK COPY

D Complete the following for LLRW in interim storage as of December 31, 1995. Separately identify liquid wastes, gaseous wastes, and animal wastes. Refer to the instructions for physical form, chemical form, treatment, and container codes.

D.1 LLRW Stored On Site

Physical Form Code	Chemical Form Code	Radionuclides	Volume (ft^3)	Activity (mCi)	Treatment Code	SS Code	Hazardous Property Code(s)	Container Code	Container Material Code
53	ME	TH-232	4.7	1.75	N/A	N/A	N/A	5D	OT METAL

TOTAL ACTIVITY 1.75 mCi

TOTAL VOLUME 4.7 ft^3

D.2 LLRW Stored Off Site

Physical Form Code	Chemical Form Code	Radionuclides	Volume (ft^3)	Activity (mCi)	Treatment Code	SS Code	Hazardous Property Code(s)	Container Code	Container Material Code

TOTAL ACTIVITY mCi

TOTAL VOLUME ft^3

WORK COPY

E.1 Please complete the following table for the treatments identified in D.1 and D.2. Refer to instructions for code listing.

On- or Off-Site Treatment	Treatment Code	Description	Impact on Generated LLRW Volume

E.2

Name of Off-Site Treatment Facility	Address City	State	Broker

F Does any of the LLRW reported in Section III-B contain more than 0.1% by weight chelating agents?

☒ No ☐ Yes. Complete the following table for such waste. Refer to instructions for code listing.

Chelating Agent Code	Chelate Percent by Weight of Unprocessed LLRW	Weight (lbs.) of Unprocessed LLRW	Volume (ft^3) of Unprocessed LLRW

G Did the LLRW reported in Section III-B contain any Source Material (SM)?

☐ No ☒ Yes. Complete the following table for such material. Refer to instructions for code listing.

SM Type Code	Weight (lbs.)	SM Type Code	Weight (lbs.)
NT	35		

H Did the LLRW reported in Section III-B contain any Special Nuclear Material (SNM)?

☒ No ☐ Yes. Complete the following table for such material.

SNM Description and %	Total (Grams)	SNM Description and %	Total (Grams)

I Are you storing any sealed sources that are no longer used because you could not return them to the manufacturer or find any other means of disposal?

☒ No ☐ Yes. Complete the following table for such sources. **Use additional sheets as necessary.**

Radionuclide	Activity (mCi)

J Are you storing any sources in fixed gauges or other equipment that are no longer being used because you could not return them to the manufacturer or find any other means of disposal?

☒ No ☐ Yes. Complete the following table for such sources. **Use additional sheets as necessary.**

Gauge or Equipment Description/Radionuclide	Activity (mCi)

WORK COPY

K Are you storing LLRW at your facility that will not meet the acceptance criteria at waste disposal facilities (e.g., mixed waste)?

☒ No ☐ Yes. If yes, complete the following table. Refer to instructions for code listing. Use additional sheets if necessary.

Class	Volume (ft^3)	Activity (mCi)	Radionuclides	Hazardous Property Code(s)	Container Code	Container Material Code

Briefly describe LLRW listed in the table above:

L Complete the following table for LLRW you expect to generate that will require disposal in a licensed facility.

Year	Class	Activity	Volume	Radionuclides
1996	A	.75	2.01	TH-232
	B			
	C			
	Total			
1997	A	.75	2.01	TH-232
	B			
	C			
	Total			
1998	A	.75	2.01	TH-232
	B			
	C			
	Total			
1999	A	.75	2.01	TH-232
	B			
	C			
	Total			
2000	A	.75	2.01	TH-232
	B			
	C			
	Total			

WORK COPY

SECTION IV. On-Site Storage Facilities

A.1 Briefly describe your on-site LLRW storage facilities. Include facilities you have for storage of special LLRW forms such as freezers, shielded areas for high-radiation-level wastes, or bermed storage areas for liquid wastes, and estimate the storage capacity for each.

BERMED STORAGE AREA WITH EXPLOSION PROOF FIXTURES

A.2 Total Storage Capacity: 1540 ft^3

A.3 Of the total in A.2, estimate relative capacity reserved for LLRW held for decay in storage: N/A %

A.4 Based on the total in A.2, estimate relative capacity reserved for interim LLRW storage: 2 %

B Do you have any plans for increasing your on-site storage capacity?

- ☒ No. Skip to B.2
- ☐ Yes. Complete this section.

Describe such plans and indicate your expected new storage capacity.

C Based on your anticipated LLRW generation rate and your anticipated capacity to store waste as of December 31, 1995, how long can you continue to produce and store LLRW? 24 months

D Please provide any information you feel is pertinent regarding the impact(s) that on-site storage of LLRW has had on your facility's operations.

SIGNATURE OF PREPARER:

DATE: FEBRUARY 28, 1996

2.8 Thoriated Tungsten Area Closure

Sulzer Metco is not required to be licensed by the Nuclear Regulatory Commission and therefore is not required to submit a closure plan for approval by the Commission. The decommissioning plan for the radioactively contaminated equipment has been designed in accordance with 10 CFR 835.202. Decontamination of the thoriated tungsten machining area will be performed by a qualified outside contractor. Personnel will be equipped with chemical resistant coveralls, head protection, gloves, boots and respiratory protective devices. All machining and polishing/buffing equipment and the contaminated filter baghouse will be decontaminated as follows:

1. All thorium oxide residue will be swept up and placed in suitable containers labeled 'Caution - Radioactive Waste' according to regulatory guidelines, prior to off-site disposal.
2. All process equipment and ductwork will be flushed with a compressed air stream while baghouse is in operation.
3. The contaminated baghouse will be shut down and carefully emptied. All entrained material must be collected in suitable containers labeled 'Caution - Radioactive Waste' prior to off-site disposal.
4. All contaminated equipment will be carefully removed to a containment area as to provide collection of rinsewaters during decontamination.
5. The floor area around the subject equipment is to be steam cleaned and clean rinsed. Washwaters are to be collected and stored in suitable containers prior to off-site disposal.
6. Two lathes and two buffers will be washed down with a mild soap solution, steam cleaned, and clean rinsed.
7. All ductwork will be washed with a mild soap solution, followed by steam cleaning, and clean rinsing.
8. Filter material will be disposed of in accordance with applicable regulatory codes.
9. Baghouse will be decontaminated by steam cleaning and followed by a clean rinse.

SULZER

Sulzer Metco (US) Inc.
1101 Prospect Avenue
Westbury, NY 11590
United States of America
www.sulzermetco.com

FAX

Date 7/31/02

To Bob Verola
Cedar Creek
Phone +1 (516) 571-7354, Fax +1 (516) 571-7357

From Peter DiPietrantonio
Phone +1 (516) 338-2337, Fax +1 (516) 338-2123
E-mail: peter.dipietrantonio@sulzer.com
Environmental, Health & Safety

Document No. of pages 3 (including this one)

Subject: 2001 Hazardous Waste

Bob,

As discussed, here is a summary of all hazardous waste shipped off site from Sulzer Metco's Prospect Avenue and Miller Place facilities.

Please call if you have any questions.

Sincerely,

Peter DiPietrantonio
Environmental, Health & Safety Specialist

Prospect Avenue HazWaste Generation 2001, Consolidated Report

Profile #	Pounds	Waste Name	TSDF EPA ID#	EPA Waste Codes
CH13495	N/a	Super Agitene (Parts Cleaning)		D001
CH189108	800 2,048 1,744 **4,592**	RCRA Metals & Ceramic Powder (Powder Coating Operations)	OHD 000816629 CTD 000604488 CTD 000604488	D007
CH189112	N/a	Mixed Spent Acids (Cleaning of Metals)		D002, D007
CH189132	502 **502**	Paint Related Material (Waste Paint/Adhesives)	MDD 980555189	D001, D035, F003, F005
CH189135	469 **469**	Filters w/RCRA Metals (Changing of Filters)	OHD 000816629	D007
CH189142	2,850 800 1,891 945 2,285 SK 1,954 **10,725**	Copper Cleaner/Chromic Acid	CTD 000604488 CTD 000604488 CTD 000604488 CTD 000604488 CTD 000604488 MDD 980554653	D002, D006, D007, D008
SK	**1,212**	Aqueous Parts Washer	NYD 000708198	D039
SK	**8,730**	Non Aqueous Parts Washer (P-105)	NYD 000708198	D001, D018, D039, D040
Total HW = **Tons =**	**26,230** **13.12**			

Miller Place HazWaste Generation 2001, Consolidated Report

Profile #	Pounds	Waste Name	TSDF EPA ID#	EPA Waste Codes
CH13495	650 **650**	Super Agitene (Parts Cleaning)	MDD 980555189	D001
CH189108	11,000 40,000 486 2,096 **53,582**	RCRA Metals & Ceramic Powder (Powder Coating Operations)	CTD 000604488 CTD 000604488 CTD 000604488 CTD 000604488	D007
CH189112	533 **533**	Mixed Spent Acids (Cleaning of Metals)	CTD 000604488	D002, D007
CH189132	N/a	Paint Related Material (Waste Paint/Adhesives)		D001, D035, F003, F005
CH189135	2,693 **2,693**	Filters w/RCRA Metals (Changing of Filters)	OHD 000816629	D007
CH189142	N/a	Copper Cleaner/Chromic Acid		D002, D006, D007, D008
Total HW = **Tons =**	**57,458** **28.73**			

Hazardous Waste No. 3	Hazardous Waste No. 4	Hazardous Waste No. 5
01	01	01
02	02	02
03	03	03
04	04	04
05	05	05
06	06	06
07	07	07
(specify)	(specify)	(specify)
01	01	01
02	02	02
(specify)	(specify)	(specify)
03	03	03
(specify)	(specify)	(specify)
04 (Skip to Q.1e)	04 (Skip to Q.1e)	04 (Skip to Q.1e)
01	01	01
02	02	02
03	03	03

(continued)

ALLIED-SIGNAL, INC. GENESOLV/BARON-BLAKESLEE

ENVIRONMENTAL DATA SHEET

SUPPLEMENT TO PSDS: BLACO TRON® TF

CURRENT ISSUE DATE: October 1987 PSDS# M007940 (2nd ED)

****

SARA - TITLE III (40 CFR 300)

1. THIS PRODUCT CONTAINS THE FOLLOWING EXTREMELY HAZARDOUS SUBSTANCE (S) (SELECTIONS 302 AND 304):

COMPONENT	TPQ (LBS)	RQ (LBS)
NONE		

2. THIS PRODUCT CONTAINS THE FOLLOWING CERCLA HAZARDOUS SUBSTANCE (S) (SECTIONS 302 AND 304):

COMPONENT	RQ (LBS)
NONE	

NOTE: THE FOLLOWING INFORMATION PROVIDED IN SECTION 1 AND 2 IS REQUIRED FOR EMERGENCY RESPONSE REPORTING.

3. THIS PRODUCT HAS THE FOLLOWING HAZARDS (SECTION 311 AND 312):

	YES	NO
IMMEDIATE	X	—
DELAYED	X	—
FIRE	—	X
PRESSURE	—	X
REACTIVE	—	X

4. THESE PRODUCTS CONTAIN THE FOLLOWING TOXIC CHEMICALS (SECTION 313):

	WT %
112 TRICHLORO 122 TRIFLUOROETHANE CAS 76-13-1	100

FOR ADDITIONAL INFORMATION ON THE ABOVE CHEMICALS, SEE SECTION 5 OF THE MATERIAL SAFETY DATA SHEET.

DATE: 11-7-88

95

Material Safety Data Sheet

Approved by U.S. Dept. of Labor as Essentially similar to Form OSHA 20

Date: November 1983	Edition: 2nd
Chemical Name and Synonyms: 1,1,1-trichloroethane; methylchloroform CAS No. 71-55-6	Trade Name and Synonyms: Blaco-Thane
Chemical Family: Halogenated Hydrocarbons	Formula: CH_3CCl_3
DOT Shipping Name: 1,1,1-trichloroethane	DOT Hazard Class: ORM-A
Reportable Quantity:	I. D. Number: UN 2831

SECTION 1 · PHYSICAL DATA

Boiling Point @ 760 mm Hg:	Vapor Density (Air=1):	Specific Gravity (H_2O=1):	pH of Solutions:
165.4°F	4.54	1.300-1.320 @ 25°/25°C	6.0 to 7.5
Freezing/Melting Point: -49°F -45°C	Solubility (Weight % in Water): Negligible	Bulk Density: 10.80-10.97 lbs/gal @ 25°C	Volume % Volatile: 100
Vapor Pressure: @25°C = 135 mmHg	Evaporation Rate (ethyl ether = 1): 0.35	Heat of Solution: Not Applicable	Appearance and Odor: Clear, colorless liquid - ether-like odor.

SECTION 2 · HAZARDOUS INGREDIENTS

	%	Hazard Data
1,1,1-trichloroethane (Stabilized)	100	See Below

SECTION 3 · FIRE AND EXPLOSION HAZARD DATA

Flash Point °F (Method Used)	Flammable Limits in Air (% by Volume)	Extinguishing Media:
None when tested in accordance with DOT requirements.	LEL: 7% UEL: 15% See Below	water, dry chemical or carbon dioxide

Special Fire Fighting Procedures: Fire fighters should wear a NIOSH/MSHA-approved pressure-demand, self-contained breathing apparatus for possible exposure to hydrogen chloride and possibly traces of phosgene.

Unusual Fire and Explosion Hazards: Vapors concentrated in a confined or poorly ventilated area can be ignited upon contact with a spark, flame, or high intensity source of heat. This can occur at concentrations ranging between 7-15% by volume. Decomposition or burning can produce hydrogen chloride or possibly traces of phosgene.

SECTION 4 · HEALTH HAZARD DATA

Toxicity Data	Classification (Poison, Irritant, Etc.)
LC_{50} Inhalation rat 8,000 ppm/7 hours	Inhalation: Toxic
LD_{50} Dermal rabbit > 15g/kg	Skin: Not significantly toxic
Skin/Eye Irritation: See Section 5	Skin/Eye: Liquid mildly irritating to skin; eye irritant
LD_{50} Ingestion rat 10-12g/kg (See Section 5)	Ingestion: Not significantly toxic
Fish, LC_{50} (Lethal Concentration) Not determined	Aquatic:

24-HOUR EMERGENCY ASSISTANCE:

Monday-Friday 9:00 a.m. - 5:00 p.m. (CST) 312-450-3900 — Other than shown 213-634-3300

MSDS: BLACO-TRON TF

Material Safety Data Sheet

Baron Blakeslee, – 2001 N. Janice Ave., – Melrose Park, IL 60160 (312)450-3900

DATE: October, 1987
EDITION: 2nd (M007940)

CHEMICAL NAME AND SYNONYMS:
Trichlorotrifluoroethane

TRADE NAME AND SYNONYMS:
Blaco-Tron TF

CHEMICAL FAMILY:
Halogenated Hydrocarbons

FORMULA: $C_2Cl_3F_3$

DOT SHIPPING NAME: Not regulated

DOT HAZARD CLASS: Not Applicable

SECTION 1 - PHYSICAL DATA

BOILING POINT @ 760 MM Hg: 117.5°F	VAPOR DENSITY(AIR=1): 6.5	SPEC. GRAV. 1.57 (liquid)	pH OF SOLUTIONS: Neutral
FREEZING/MELTING POINT: Below -35°C	SOLUBILITY (WEIGHT % IN WATER): 0.1	BULK DENSITY: Approx. 13.1 lbs./gal.	VOLUME % VOLATILE: 100
VAPOR PRESSURE: at 70°F 5.5 PSIA	EVAPORATION RATE: (Ether = 1) (time to evaporate): 2.0	HEAT OF SOLUTION: Not available	

APPEARANCE AND ODOR: Colorless liquid with ethereal and faint sweetish odor.

SECTION 2 - HAZARDOUS INGREDIENTS

	%	HAZARD DATA
Trichlorotrifluoroethane-CAS No.76-13-1	100	See Section 5

SECTION 3 - FIRE AND EXPLOSION HAZARD DATA

FLASH POINT F (METHOD USED)	FLAMMABLE LIMITS IN AIR (% BY VOLUME)	EXTINGUISH. MEDIA:
Non-Flammable (Closed Cup)	Not Available	Carbon dioxide; dry chemical or water spray

SPECIAL FIRE FIGHTING PROCEDURES:
Fire fighters should wear NIOSH pressure demand self-contained breathing apparatus for possible exposure to hydrochloric and hydrofluoric acids and phosgene. Use water spray to keep containers cool.

UNUSUAL FIRE AND EXPLOSION HAZARDS:
Will decompose at temperatures above 250°F. Decomposition products can include hydrochloric and hydrofluoric acid and phosgene.

24-HOUR EMERGENCY ASSISTANCE: 201/455-2000

SECTION 7 - SPILL OR LEAK PROCEDURES

STEPS TO BE TAKEN IF MATERIAL IS SPILLED OR RELEASED: Immediately evacuate the area and provide maximum ventilation. Unprotected personnel should move upwind of spill. Only personnel equipped with proper respiratory and skin/eye protection should be permitted in area. Dike area to contain spill. Take precautions as necessary to prevent contamination of ground and surface waters. Recover or absorb spilled material on sawdust or vermiculite and sweep into closed containers for disposal. After all visible traces have been removed, thoroughly wet vacuum the area. **DO NOT** flush to sewer. If area of spill is porous, remove as much contaminated earth and gravel, etc. as necessary and place in closed containers for disposal. (See Below.)

WASTE DISPOSAL METHOD: Contaminated sawdust, vermiculite or porous surface must be disposed of in a permitted hazardous waste management facility. Recovered liquids may be reprocessed or incinerated or must be treated in a permitted hazardous waste management facility. Care must be taken when using or disposing of chemical materials and/or their containers to prevent environmental contamination. It is your duty to dispose of the chemical materials and/or their containers in accordance with the Clean Air Act, the Clean Water Act, the Resource Conservation and Recovery Act as well as any other relevant federal, state or local laws/regulations regarding disposal.

SECTION 8 - SPECIAL PROTECTION INFORMATION

RESPIRATORY PROTECTION: None required for adequately vented work situations. Use NIOSH approved self-contained or supplied-air respirators for emergencies and in situations where air may be displaced by vapors.

VENTILATION (TYPE): Local exhaust: At filling zones and where leakage is probable. Mechanical (General): Adequate for storage areas.
EYE PROTECTION: Splashproof Goggles
GLOVES: Protective gloves and full protective clothing if there is prolonged or repeated contact of liquid with skin.

OTHER PROTECTIVE EQUIPMENT: Safety shower and eye-wash fountain in immediate area. Personal protective clothing and use of equipment must be in accordance with 29 CFR 1910.133 and 29 CFR 1910.132.

SECTION 9 - SPECIAL PRECAUTIONS

PRECAUTIONS TO BE TAKEN DURING HANDLING AND STORING:

* **DO NOT** use in poorly ventilated or confined spaces.
* Trichlorotrifluoroethane vapors are heavier than air and will collect in low areas.
* Keep container closed when not in use.
* **DO NOT** store in open, unlabeled or mislabeled containers.
* This material or its vapors when in contact with flames, hot glowing surfaces or electric arcs can decompose to form hydrogen chloride gas hydrofluoric acid and traces of phosgene.

IMPORTANT NOTICE!!

New OSHA Permissible Exposure Limits (PEL's) and/or Short Term Exposure Limits (STEL's)

Effective March 1, 1989, the OSHA PEL and/or STEL for one or more of the components of Blaco-Tron TF were revised. The following chart lists the current OSHA and ACGIH Exposure Limits for the component(s) of Blaco-Tron TF and where applicable a revised calculated PEL for the product. You should utilize this exposure data in your review of the product and disregard the OSHA values listed in the attached PSDS sheet.

		OSHA Values		ACGIH Values	
Component	WT%	8-Hour PEL	15 Min STEL	8-Hour TLV	15 MIN STEL
112-Trichloro 122 Trifluoroethane CAS. No. 76-13-1	100	1000 ppm	1250 ppm	1000 ppm	1250 ppm

Blaco Tron TF

SECTION 4 - HEALTH HAZARD DATA

PERMISSIBLE EXPOSURE LIMITS (TLV):

TOXICITY DATA: Trichlorotrifluoroethane

LC LO INHALATION: Human: 4,500 ppm Central Nervous System Effects

SKIN - RABBIT: 500 mg-open

LD_{50} RAT: 43 gm/kg

CLASSIFICATION (POISON, IRRITANT, ETC.)

INHALATION: Low Toxic

SKIN/EYE: Mild irritant

INGESTION: Mildly Toxic

HUMAN EXPOSURE INFORMATION/DATA:

Blaco-Tron TF (trichlorotrifluoroethane) is not listed as a carcinogen by OSHA, IARC, or NTP. Trichlorotrifluoroethane is listed in the TSCA Inventory.

SECTION 5 - EFFECTS OF OVEREXPOSURE

This section covers effects of overexposure for inhalation, eye/skin contact, ingestion and other types of overexposure information in the order of the most hazardous and the most likely route of overexposure.

A. Trichlorotrifluoroethane, CAS NO. 76-13-1

PERMISSIBLE EXPOSURE LIMITS (TLV)

Current Federal OSHA permissible exposure limit (29 CFR 1910.1000) is 1,000 ppm (8-hour TWA)

ACGIH has adopted a permissible exposure limit of 1,000 ppm (8-hour TLV)

ROUTES/EFFECTS OF EXPOSURE:

INHALATION: At low level of concentration (human: 2,500 ppm fluorocarbon component, 0.5-1.0 hour exposure) headache, dizziness, nausea, loss of concentration have been experienced. With high exposure levels: intoxication, cardiac effects, and CNS depression (loss of concentration or even death) may occur. Vapors can displace air, resulting in an asphyxiation hazard.

EYE OR SKIN CONTACT: Irritant to skin and eyes: excessive contact may cause defatting.

INGESTION: Similar symptoms as for inhalation. In large doses, respiratory failure can occur.

EFFECTS OF OVEREXPOSURE

ACUTE: Primarily a central nervous system depressant. Inhalation can cause irritation of the respiratory tract, dizziness, nausea, headache, loss of coordination and equilibrium, unconsciousness and even death in confined or poorly ventilated area. Liquid splashed in the eye can result in discomfort, pain and irritation. Prolonged or repeated contact with liquid on the skin can cause irritation and dermatitis. The problem may be accentuated by liquid becoming trapped against the skin by contaminated clothing and shoes. Skin absorption can occur.

ADDITIONAL INFORMATION

EXPOSURE TO TRICHLOROTRIFLUOROETHANE:

Animal studies in various species have observed cardiac arrythmia at the following concentrations:

Monkey - 25,000 - 50,000 ppm
Mouse - 100,000 ppm

Myocardial depression was observed in the dog at 50,000 ppm.

Subacute data: Rats exposed at 2,520 ppm, 7 hours/day, 5 days/wk, 30 days - no apparent effects.
At 5,000 ppm and same time exposure, mild liver effects, prevention of weight gain.

EMERGENCY AND FIRST AID PROCEDURES

INHALATION: Remove patient to fresh air. Give mouth to mouth resuscitation if breathing has stopped. Give oxygen as necessary if a qualified operator is available. **DO NOT** give adrenalin (epinephrine). Call a physician.

INGESTION: If conscious, induce vomiting immediately by giving 2 to 4 glasses of water and touching finger to back of throat. Call a physician. **NEVER** give anything by mouth to an unconscious person. Take immediately to hospital or physician.

EYE CONTACT: Flush with large amounts of water for at least 15 minutes, lifting eyelids occasionally. If eye symptoms persist, consult physician.

SKIN CONTACT: Wash promptly with soap and water for at least 15 minutes while removing contaminated clothing and shoes. If irritation occurs, see a physician. Thoroughly clean contaminated clothing and shoes before reuse or discard.

SECTION 6 - REACTIVITY DATA

STABILITY: Stable **CONDITIONS TO AVOID:** Will decompose at temperatures above 250°F. Avoid sparks, hot spots, welding, flames and cigarettes.

HAZARDOUS POLYMERIZATION: Will not occur. **CONDITIONS TO AVOID:** None

INCOMPATIBILITY(MATERIALS TO AVOID): Strong acids and alkalis reactive metals e.g. powdered aluminum, magnesium, zinc, molten aluminum, barium and lithium shavings. Strong oxidizing agents.

HAZARDOUS DECOMPOSITION PRODUCTS: Hydrochloric and hydrofluoric acids, phosgene.

* **AVOID CONTAMINATION OF WATER SUPPLIES:** Handling, storage and use procedures must be carefully monitored to avoid spills or leaks. Any spill or leak has the potential to cause underground water contamination which may, if sufficiently severe, render a drinking water source unfit for human consumption. Contamination that does occur cannot be easily corrected.

OTHER PRECAUTIONS:

* **AVOID PROLONGED OR REPEATED BREATHING OF VAPORS.** High vapor concentrations can cause dizziness, unconsciousness or death.
* **USE ONLY WITH ADEQUATE VENTILATION.** Ventilation must be sufficient to limit employee exposure to product below OSHA permissible exposure limits (8-hour TWA).
* **AVOID CONTACT WITH EYES.** Will cause irritation and pain.
* **AVOID PROLONGED OR REPEATED CONTACT WITH SKIN.** May cause irritation or dermatitis.
* **DO NOT TAKE INTERNALLY.** Swallowing may cause injury or death.
* **DO NOT EAT, DRINK OR SMOKE IN WORK AREAS.**
* **NEVER** enter a pit or tank without observing safety procedures:
* Never alone, always with a life line, and always with positive supply of fresh air.
* Employ respiratory protection when exposure to vapors is possible.

REFERENCES:

1. NIOSH Registry of Toxic Effects of Chemical Substances, 1978.
2. Industrial Hygiene and Toxicology, Volume 11, Second Edition, F.A. Patty, 1986.
3. Dangerous Properties of Industrial Materials, Sixth Edition, N.I. Sax, 1984.
4. Federal Register, 45FR Hazardous Waste Management Systems Part III, Identification and Listing of Hazardous Wastes, Page 33084, May 19, 1980.
5. EPA Science Advisory Board, Subcommittee on Airborne Carcinogens, September, 1980.

THIS MATERIAL SAFETY DATA SHEET IS OFFERED SOLELY FOR YOUR INFORMATION, CONSIDERATION AND INVESTIGATION.

BARON-BLAKESLEE PROVIDES NO WARRANTIES, EITHER EXPRESS OR IMPLIED, AND ASSUMES NO RESPONSIBILITY FOR THE ACCURACY OR COMPLETENESS OF THE DATA CONTAINED HEREIN.

Remedial Alternatives

- Soil Alternatives
- Groundwater Alternatives

Soil Alternatives

No.1

- No Action / Institutional Controls

No.2

- Excavation
- Off-Site Disposal
- Building Demolition

NYG 1913904

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

D3811024

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple

(Hazardous Waste Manifest 1/5/99)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD131318651
Manifest Doc. No.: 13904
2. Page 1 of 2
Information within heavy bold line is not required by Federal Law.

3. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Telephone Number (516) 338-2337

A. NYG 1913904
B. Generator's ID: SAME

5. Transporter 1 (Company Name): Clean Harbors Env Services Inc
6. US EPA ID Number: MAD039322250
C. State Transporter's ID: NYMA006
D. Transporter's Telephone (781) 849-1800

7. Transporter 2 (Company Name): Maine Energy
8. US EPA ID Number: NJD986607380
E. State Transporter's ID:
F. Transporter's Telephone ( ) 94 EAL

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4879 Spring Grove Avenue
Cincinnati, OH, 45232
10. US EPA ID Number: OHD000816629
G. State Facility ID:
H. Facility Telephone (513) 681-5738

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II	002	DF	00949	P	EPA D002 / STATE
b. HAZARDOUS WASTE, SOLID, N.O.S., (CERAMIC OXIDE, ALUMINUM OXIDE), 9, NA3077, PG III	006	DM	02737	P	EPA D007 / STATE
c. NON DOT REGULATED MATERIAL, (ABSORBENT PADS, OIL FILTERS), NON DOT HAZARDOUS, NONE	002	DM	00290	P	EPA NONE / STATE
d. NON DOT REGULATED MATERIAL, (UNIVERSAL WASTE LIGHT TUBES), NON DOT HAZARDOUS, NONE	001	CW	00200	P	EPA NONE / STATE

J. Additional Descriptions for Materials listed Above
a. 11a.ERG#154 (L),(C,E) COPPER CLEANER/CHROMIC ACID
c. 11c. (S) OIL SPILL CLEANUP/FILTERS
b. 11b.ERG#171 (S),(E) RCRA METAL & CERAMIC POWDER
d. 11d. (S) STRAIGHT FLUORESCENT TUBES FOR REC

K. Handling Codes for Wastes Listed Above
a. T
c. T
d. R

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY #(800) 483-3718
11a. CH189142 D006 D007 D008 2xSSDF
11b. CH189108 6xSSDm
11c. CH189102 2xSSDm
11d. CHCFL1-63 1CWx(BOX) 1CWx BSDm
DECOM # B7636

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: David [illegible] — Signature: [illegible] — Mo. 07 Day 02 Year 04

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Tony Castillo — Signature: Tony Castillo — Mo. 07 Day 02 Year 04

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: JASON HALE — Signature: Jason Hale — Mo. 07 Day 07 Year 04

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: CARLINE LIST — Signature: Carline List — Mo. 07 Day 08 Year 04

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

COPY 5—Generator—Mailed by TSD Facility

INSTRUCTIONS FOR THE NEW YORK STATE UNIFORM HAZARDOUS WASTE MANIFEST

General Information

New York State regulation requires proper completion of all information on a manifest. Omissions, false coding or illegibility is considered a violation. All generators are responsible under New York State and Federal Law for the proper identification, labeling, manifesting and ultimate disposal of all hazardous waste they generate. The manifest system is designed to track hazardous waste from the point of generation until its final disposal (cradle to grave). In order to accomplish this goal, it is essential that all **items on a manifest be properly completed.**

Distribution

Distribution of each copy of the manifest is indicated on the bottom of the form. Copies of the manifest must be mailed promptly. New York State regulations provide five (5) working days for generator and two (2) for a TSDF. The disposer's state is the state in which the designated TSD facility is located. Generator's state is the state in which the installation generating the hazardous waste is located. TSD facility is a treatment, storage or disposal facility.

Generator Section

Item 1-Enter the US EPA ID number (twelve digit number issued by the federal government). The generator must assign a sequential unique, five digit number different for each manifest, as the manifest document number..

Item 2-If a continuation sheet is used, please enter the total number of sheets here. Any EPA approved continuation sheet may be used, but distribution and completion must meet New York manifest requirements. The document number in Item A must be placed in Item L of each continuation sheet.

Items 3 and **4**-Self-explanatory. These must correspond to the generator's US EPA ID number.

Items 5, 6, 7 and **8**-These are self-explanatory. These numbers must be secured from the transporter. If more than one transporter is used, the generator must supply additional copies of this manifest for each transporter copy (#5).

Items 9 and **10**-The designated TSD facility, name, address and ID number should appear here.

NOTE: All US EPA ID numbers are a twelve digit code starting off with the letters corresponding to the state in which the facility or transporter is located.

NOTE: Only New York State authorized transporters and TSD facilities are allowed to transport or receive hazardous waste in New York State. The generator shall check for authorization.

Item 11-USDOT requires the word "waste" before or in the shipping name for all hazardous waste. See 49 CFR 171 thru 177. Contact USDOT office for description assistance. Any waste in this box is considered a hazardous waste.

Item 12-

Number-indicate number of containers (use whole numbers).

Containers/Type

DM-Metal drums, barrels, kegs	DT-Dump trucks
DW-Wooden drums, barrels, kegs	CY-Cylinders
DF-Fiberboard or plastic drums, kegs	CM-Metal boxes, cartons, cases, roll-offs
TP-Tanks, portable	CW-Wooden boxes, cartons, cases
TT-Cargo tank, tank trucks	CF-Fiber or plastic boxes, cartons, cases
TC-Tank cars	BA-Burlap, cloth, paper or plastic bags

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to: Chief Information Policy Branch, PM-223; U.S. Environmental Protection Agency, 401 M Street S.W., Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503

Item 13-Actual number of units indicated in box 14. (Do not use fractions or decimals).

Item 14-Units (wt/vol)

G-Gallons (liquids only)	L-Liters (liquids only)
P-Pounds	K-Kilograms
T-Tons (2,000 pounds)	M-Metric Tons (1,000 kilograms)
Y-Cubic Yards	N-Cubic Meters

Item 15-Use this space to indicate special transportation, treatment, storage or disposal or Bill of Lading information. If an alternate facility is designated, note it here. For international shipments, enter point of departure. Emergency response telephone numbers, or similar information may be included here.

Item 16-The authorized agent of the generator must read and then sign (by hand) and date this certification. The date is the date of receipt by transporter.

NEW YORK STATE REQUIRES THIS ADDITIONAL INFORMATION

Item A-Number preprinted by New York State Department of Environmental Conservation (NYSDEC).

Item B-Generator site address if different from mailing address. If same, write in same.

Item C and **E**-State of registration and motor vehicle license plate number of waste carrying portion of vehicle used to transport.

Item D and **F**-Telephone number of authorized agent.

Item G-No entry required by NYSDEC

Item H-Telephone number at site of TSD facility.

Item I-Hazardous waste numbers (letter and three digits) as assigned by 6 NYCRR Part 371 or 40 CFR 261 must be used to identify hazardous waste. Enter in top box by EPA. If waste is not hazardous in New York but regulated by another state, enter that state's waste code in bottom box.

Item J-If description in Item 11 (a,b,c,d) contains NOS or other general term, the hazardous waste constituent must be provided here for each. The specific gravity assumed to be one (1.00) unless indicated in lower right of each box.

Item K-Each material must be assigned an ultimate disposal method code as follows: L = Landfill, B = Incineration, heat recovery, burning, T = Chemical, physical, or biological treatment, R = Material recovery of more than 75 percent of the total material. Both the generator and the TSDF should agree on codes assigned in this item.

Transporter Section

Items 17 and **18**-Print or type the full name of person accepting responsibility and acknowledging receipt of material as listed on manifest for transport. Enter date of receipt and signature.

TSDF Section

Item 19-The authorized representative of the TSDF must note in the space any discrepancy between waste described on manifest and waste actually received. Any rejected materials should be listed and destination of those materials provided.

Item 20-The signature (by hand) of the authorized TSDF agent indicates acceptance (except for Item 19) and agreement with statements on this manifest. The date is the date of signature and receipt of shipment. A TSDF not providing ultimate disposal agrees to transfer waste to a TSDF authorized to provide ultimate disposal as indicated in Item K..

Additional Information

1. If the disposer state supplies a manifest, that state's form must be used. In any case, New York requires that both the generator and TSDF mail copies to the generator's state and the disposer's state, with the ultimate disposal method indicated in Item K.
2. There may be variations in the requirements between various states regarding Items A thru K, therefore, the generator should contact the disposer's state for specific details.
3. If assistance is needed in completion of this manifest, please contact NYSDEC Data Management Section at 518/457-6858 weekdays from 9:00 a.m. to 4:00 p.m.

NYG 1913904

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple

(Hazardous Waste Manifest 1/5/99)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD131318651
Manifest Doc. No.:
2. Page 1 of 2

Information within heavy bold line is not required by Federal Law.

3. Generator's Name and Mailing Address
Lucas Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Telephone Number (516) 338-2337

5. Transporter 1 (Company Name): Clean Harbors Env Services Inc
6. US EPA ID Number: MAD039322260

7. Transporter 2 (Company Name)
8. US EPA ID Number

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4879 Spring Grove Avenue
Cincinnati, OH, 45232

10. US EPA ID Number: OHD000818629

A. NYG 1913904
B. Generator's ID: SAME
C. State Transporter's ID: NYSA006
D. Transporter's Telephone (781) 849-1800
E. State Transporter's ID
F. Transporter's Telephone ( )
G. State Facility ID
H. Facility Telephone (513) 681-5738

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II					EPA D002 / STATE
b. HAZARDOUS WASTE, SOLID, N.O.S., (CERAMIC OXIDE, ALUMINUM OXIDE), 9, NA3077, PG III					EPA D007 / STATE
c. NON DOT REGULATED MATERIAL, (ABSORBENT PADS, OIL FILTERS), NON DOT HAZARDOUS, NONE					EPA NONE / STATE
d. NON DOT REGULATED MATERIAL, (UNIVERSAL WASTE LIGHT TUBES), NON DOT HAZARDOUS, NONE					EPA NONE / STATE

J. Additional Descriptions for Materials listed Above
a. COPPER CLEANER CHROMIC ACID
c. 11c. (5) OIL SPILL CLEANUP FILTERS
b. 11b.ERG#171 (5),(E) RCRA METAL & CERAMIC POWDER
d. 11d. (5) STRAIGHT FLUORESCENT TUBES FOR REC

K. Handling Codes for Wastes Listed Above
a. T
c. L
b. T
d. R

15. Special Handling Instructions and Additional Information
24 HOUR EMERGENCY # (800) 455-5716
11a. CH180142 D006 D007 D008 11b. CH180108 11c. CH180102 11d. CHCFL1-63

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Mo. | Day | Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Mo. | Day | Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Mo. | Day | Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Mo. | Day | Year

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

COPY 8—Generator—Retained by Generator

INSTRUCTIONS FOR THE NEW YORK STATE UNIFORM HAZARDOUS WASTE MANIFEST

General Information

New York State regulation requires proper completion of all information on a manifest. Omissions, false coding or illegibility is considered a violation. All generators are responsible under New York State and Federal Law for the proper identification, labeling, manifesting and ultimate disposal of all hazardous waste they generate. The manifest system is designed to track hazardous waste from the point of generation until its final disposal (cradle to grave). In order to accomplish this goal, it is essential that all **items on a manifest be properly completed**.

Distribution

Distribution of each copy of the manifest is indicated on the bottom of the form. Copies of the manifest must be mailed promptly. New York State regulations provide five (5) working days for generator and two (2) for a TSDF. The disposer's state is the state in which the designated TSD facility is located. Generator's state is the state in which the installation generating the hazardous waste is located. TSD facility is a treatment, storage or disposal facility.

Generator Section

Item 1-Enter the US EPA ID number (twelve digit number issued by the federal government). The generator must assign a sequential unique, five digit number different for each manifest, as the manifest document number.

Item 2-If a continuation sheet is used, please enter the total number of sheets here. Any EPA approved continuation sheet may be used, but distribution and completion must meet New York manifest requirements. The document number in Item A must be placed in Item L of each continuation sheet.

Items 3 and **4**-Self-explanatory. These must correspond to the generator's US EPA ID number.

Items 5, 6, 7 and **8**-These are self-explanatory. These numbers must be secured from the transporter. If more than one transporter is used, the generator must supply additional copies of this manifest for each transporter copy (#5).

Items 9 and **10**-The designated TSD facility, name, address and ID number should appear here.

NOTE: All US EPA ID numbers are a twelve digit code starting off with the letters corresponding to the state in which the facility or transporter is located.

NOTE: Only New York State authorized transporters and TSD facilities are allowed to transport or receive hazardous waste in New York State. The generator shall check for authorization.

Item 11-USDOT requires the word "waste" before or in the shipping name for all hazardous waste. See 49 CFR 171 thru 177. Contact USDOT office for description assistance. Any waste in this box is considered a hazardous waste.

Item 12-

Number-indicate number of containers (use whole numbers).

Containers/Type

DM-Metal drums, barrels, kegs	DT-Dump trucks
DW-Wooden drums, barrels, kegs	CY-Cylinders
DF-Fiberboard or plastic drums, kegs	CM-Metal boxes, cartons, cases, roll-offs
TP-Tanks, portable	CW-Wooden boxes, cartons, cases
TT-Cargo tank, tank trucks	CF-Fiber or plastic boxes, cartons, cases
TC-Tank cars	BA-Burlap, cloth, paper or plastic bags

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Item B-Generator site address if different from mailing address. If same, write in same.

Item C and **E**-State of registration and motor vehicle license plate number of waste carrying portion of vehicle used to transport.

Item D and **F**-Telephone number of authorized agent.

Item G-No entry required by NYSDEC

Item H-Telephone number at site of TSD facility.

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Additional Information

1. If the disposer state supplies a manifest, that state's form must be used. In any case, New York requires that both the generator and TSDF mail copies to the generator's state and the disposer's state, with the ultimate disposal method indicated in Item K.
2. There may be variations in the requirements between various states regarding Items A thru K, therefore, the generator should contact the disposer's state for specific details.
3. If assistance is needed in completion of this manifest, please contact NYSDEC Data Management Section at 518/457-6858 weekdays from 9:00 a.m. to 4:00 p.m.

CleanHarbors
ENVIRONMENTAL SERVICES, INC.

Land Disposal Restriction Notification Form

Date: 07 / 01 / 2004

MANIFEST INFORMATION

Generator: Sulzer Metco US Inc
Address: 1101 Prospect Avenue
Westbury, NY 11590

EPA ID#: NYD131318651

Manifest No
NYG1913904

Sales Order No: D3811024
Manifest Document No:

LINE ITEM INFORMATION

Line Item:	Page No:	Profile No:	Treatability Group:	LDR Disposal Category:
11a	1	CH189142	NON- WASTEWATER	2 : This is subject to LDR.

EPA Waste Codes	EPA Waste Subcategory
D002	Corrosive Characteristic
D006	Toxicity characteristic for Cadmium
D007	Toxicity Characteristic for Chromium
D008	Toxicity Characteristic for Lead

Line Item:	Page No:	Profile No:	Treatability Group:	LDR Disposal Category:
11b	1	CH189108	NON- WASTEWATER	2 : This is subject to LDR.

EPA Waste Codes	EPA Waste Subcategory
D007	Toxicity Characteristic for Chromium

Certification	Applies to Manifest Line Items
Pursuant to 40 CFR 268.7(a), I hereby notify that this shipment contains waste restricted under 40 CFR Part 268.	11a 11b
This waste is not restricted as specified in 40 CFR 268 Subpart D.	11c

CleanHarbors®
ENVIRONMENTAL SERVICES, INC.

Land Disposal Restriction Notification Form

Date: 07 / 01 / 2004

MANIFEST INFORMATION

Generator: Sulzer Metco US Inc
Address: 1101 Prospect Avenue
Westbury, NY 11590

EPA ID#: NYD131318651

Manifest No
NYG1913904

Sales Order No: D3811024
Manifest Document No:

Waste analysis data, where available, is attached

Signature: _____ **Print Name:** _____

Title: _____ **Date:** _____

D3811024 #6177

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21. Generator's US EPA ID No. NYD131318651 Manifest Document No.

22. Page 2 of 2

Information in the shaded areas is not required by Federal law.

23. Generator's Name
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590

L. State Manifest Document Number NYG1913904

M. State Generator's ID SAME

24. Transporter ___ Company Name 25. US EPA ID Number

N. State Transporter's ID

O. Transporter's Phone

26. Transporter ___ Company Name 27. US EPA ID Number

P. State Transporter's ID

Q. Transporter's Phone

	28. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	29. Containers No.	Type	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
a.	NON DOT REGULATED MATERIAL, (WATER SOLUBLE OIL), NON DOT HAZARDOUS, NONE		1	DM	293	P	NONE
b.	NON DOT REGULATED MATERIAL, (CERAMIC OXIDE, ALUMINUM OXIDE), NON DOT HAZARDOUS, NONE		3	DM	2854	P	NONE
c.	NON DOT REGULATED MATERIAL, (PETROLEUM OIL), NON DOT HAZARDOUS, NONE		3	DM	1039	P	NONE
d.							
e.							
f.							
g.							
h.							
i.							

GENERATOR

S. Additional Descriptions for Materials Listed Above
28a. (L)
WATER SOLUBLE OIL
28b. (S)
METAL OXIDES & CERAMIC POWDER
28c. (L)
WASTE COMPRESSOR OIL

T. Handling Codes for Wastes Listed Above

32. Special Handling Instructions and Additional Information
28a: CH189141 28b: CH59278 28c: CH189111
1x55DM 3x55DM

R, L, R NYDEC: 28a) R, 28b) L, 28c) R

TRANSPORTER

33. Transporter ___ Acknowledgement of Receipt of Materials

Printed/Typed Name: JOSE M. CANTILO Signature: [signature] Date: Month 3 Day 02 Year 04

34. Transporter ___ Acknowledgement of Receipt of Materials

Printed/Typed Name Signature Date: Month Day Year

FACILITY

35. Discrepancy Indication Space

D3511024 #6177

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21. Generator's US EPA ID No. NYD131318651 | Manifest Document No.

22. Page 2 of 2 | Information in the shaded areas is not required by Federal law.

23. Generator's Name
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury, NY 11590

L. State Manifest Document Number NYG1913904

M. State Generator's ID SAME

24. Transporter ___ Company Name | 25. US EPA ID Number

N. State Transporter's ID

O. Transporter's Phone

26. Transporter ___ Company Name | 27. US EPA ID Number

P. State Transporter's ID

Q. Transporter's Phone

	28. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	29. Containers No.	Type	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
a.	NON DOT REGULATED MATERIAL, (WATER SOLUBLE OIL), NON DOT HAZARDOUS, NONE		1	DM	293	P	NONE
b.	NON DOT REGULATED MATERIAL, (CERAMIC OXIDE, ALUMINUM OXIDE), NON DOT HAZARDOUS, NONE		3	DM	2854	P	NONE
c.	NON DOT REGULATED MATERIAL, (PETROLEUM OIL), NON DOT HAZARDOUS, NONE		3	DM	1039	P	NONE
d.							
e.							
f.							
g.							
h.							
i.							

GENERATOR

S. Additional Descriptions for Materials Listed Above
28a.(L)
WATER SOLUBLE OIL
28b.(S)
METAL OXIDES & CERAMIC POWDER
28c.(L)
WASTE COMPRESSOR OIL

T. Handling Codes for Wastes Listed Above

32. Special Handling Instructions and Additional Information
28a: CH189141 28b: CH59278 28c: CH189111
1x55DM 3x55DM

NYDEC: 28a)R, 28b)L, 28c)R

TRANSPORTER

33. Transporter ___ Acknowledgement of Receipt of Materials

Printed/Typed Name: JOSE M. CANTILLO | Signature: Jose M. Cantillo | Date: Month 03 Day 02 Year 04

34. Transporter ___ Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

35. Discrepancy Indication Space

(IMPORTANT: Type or print; read instructions before completing form)

Form Approved OMB Number: 2070-0093
Approval Expires: 11/92

EPA
United States Environmental Protection Agency

FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER: 11590PRKNL1101P

Toxic Chemical, Category, or Generic Name: NICKEL POWDER

WHERE TO SEND COMPLETED FORMS:
1. EPCRA Reporting Center, P.O. Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 92

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?
[ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [X] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official: JOE MACRI, MANAGER FACILITIES

Signature: Joseph Macri

Date Signed: June 30, 1993

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: METCO DIVISION PERKIN-ELMER

TRI Facility ID Number: 11590PRKNL1101P

Street Address: 1101 Prospect Avenue

City: Westbury

County: Nassau

State: New York

Zip Code: 11590

Mailing Address (if different from street address):

City:

State:

Zip Code:

PUT LABEL HERE

EPA
United States Environmental Protection Agency

EPA FORM R

PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
NICKEL POWDER

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check only one)	a. [ ] An entire facility	b. [X] Part of a facility
4.3	Technical Contact	Name: JOE MACRI	Telephone Number (include area code): (516) 334-1300
4.4	Public Contact	Name: JOE MACRI	Telephone Number (include area code): (516) 334-1300

4.5	SIC Code (4-digit)	a. 3542	b.	c.	d.	e.	f.
4.6	Latitude and Longitude	Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		075	09	50	027	53	16

4.7	Dun & Bradstreet Number(s) (9 digits)	a. 05-773-1663
		b.
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. NYD131318651
		b.
4.9	Facility NPDES Permit Number(s) (9 characters)	a. N/A
		b.
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. N/A
		b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	[ ] NA PERKIN-ELMER CORPORATION
5.2	Parent Company's Dun & Bradstreet Number	[ ] NA (9 digits) 00-118-4480

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
NICKEL POWDER

SECTION 1. TOXIC CHEMICAL IDENTITY

(Important: DO NOT complete this section if you complete Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	7440-02-0
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	NICKEL
1.3	Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)
	N/A

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
	N/A

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1	Manufacture the toxic chemical:	a. ☐ Produce b. ☐ Import	If produce or import: c. ☐ For on-site use/processing d. ☐ For sale/distribution e. ☐ As a byproduct f. ☐ As an impurity
3.2	Process the toxic chemical:	a. ☐ As a reactant b. ☐ As a formulation component	c. ☐ As an article component d. ☐ Repackaging
3.3	Otherwise use the toxic chemical:	a. ☐ As a chemical processing aid b. ☐ As a manufacturing aid	c. ☒ Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	04	(Enter two-digit code from instruction package.)

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
NICKEL POWDER

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X] NA			
5.2	Stack or point air emissions	[ ] NA	580	C	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name				
	N/A				
5.3.2	Stream or Water Body Name				
	N/A				
5.3.3	Stream or Water Body Name				
	N/A				
5.4	Underground injections on-site	[X] NA			
5.5	Releases to land on-site				
5.5.1	Landfill	[X] NA			
5.5.2	Land treatment/ application farming	[X] NA			
5.5.3	Surface impoundment	[X] NA			
5.5.4	Other disposal	[X] NA			

[ ] Check here only if additional Section 5.3 information is provided on page 5 of this form.

Range Codes: A = 1 - 10 pounds; B = 1
C = 500 - 999 pounds.

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
NICKEL POWDER

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3	Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__	Stream or Water Body Name			
	N/A			
5.3.__	Stream or Water Body Name			
	N/A			
5.3.__	Stream or Water Body Name			
	N/A			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)
N/A	

6.1.B POTW Name and Location Information

6.1.B.__ POTW Name		6.1.B.__ POTW Name	
N/A			
Street Address		Street Address	
City	County	City	County
State	Zip Code	State	Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ]
(example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 C = 500 - 999 pounds.

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 11590PRKNL1101P

Toxic Chemical, Category, or Generic Name: NICKEL POWDER

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: LONI-JO SCRAP METAL

Street Address: 70 KINKEL STREET

City: WESTBURY | County: NASSAU

State: NY | Zip Code: 11590 | Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 3000	1. M	1. M 24
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: N/A

Street Address:

City: | County:

State: | Zip Code: | Is location under control of reporting facility or parent company? [ ] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Section 6.2 page this is, here. [ ] (example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 1
C = 500 - 999 pounds

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
NICKEL POWDER

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] **Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.**

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b 1 2 3 4 5 6 7 8	7A.1c	7A.1d %	7A.1e Yes [ ] No [ ]
7A.2a	7A.2b 1 2 3 4 5 6 7 8	7A.2c	7A.2d %	7A.2e Yes [ ] No [ ]
7A.3a	7A.3b 1 2 3 4 5 6 7 8	7A.3c	7A.3d %	7A.3e Yes [ ] No [ ]
7A.4a	7A.4b 1 2 3 4 5 6 7 8	7A.4c	7A.4d %	7A.4e Yes [ ] No [ ]
7A.5a	7A.5b 1 2 3 4 5 6 7 8	7A.5c	7A.5d %	7A.5e Yes [ ] No [ ]

If additional copies of page 7 are attached, indicate the total number of pages in this box [ ] and indicate which page 7 this is, here. [ ] (example: 1, 2, 3, etc.)

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
NICKEL POWDER

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Chemical, Category, or Generic Name
NICKEL POWDER

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

All quantity estimates can be reported using up to two significant figures.		Column A 1991 (pounds/year)	Column B 1992 (pounds/year)	Column C 1993 (pounds/year)	Column D 1994 (pounds/year)
8.1	Quantity released*	0	0	0	0
8.2	Quantity used for energy recovery on-site	0	0	0	0
8.3	Quantity used for energy recovery off-site	0	0	0	0
8.4	Quantity recycled on-site	0	0	0	0
8.5	Quantity recycled off-site	2800	3000	2900	2900
8.6	Quantity treated on-site	0	0	0	0
8.7	Quantity treated off-site	0	0	0	0
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	N/A			
8.9	Production ratio or activity index	.95			

8.10	Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.			
	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	W19	a. T04	b.	c.
8.10.2	W29	a. T04	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)	YES [ ]	NO [X]

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

SWO # 48643

LAIDLAW ENVIRONMENTAL SERVICES

Please print or type.

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD131318651 Manifest Document No. 22301

2. Page 1 of 3

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
SULZER METCO
1101 Prospect Avenue; Westbury,NY 11590

4. Generator's Phone (516 338-2337

A. State Manifest Document Number
NON-HAZARDOUS #22301

B. State Generator's ID
SAME

5. Transporter 1 Company Name
Safety-Kleen (TG), Inc.

6. US EPA ID Number SCR000074591

C. State Transporter's ID

D. Transporter's Phone (301)939-6000

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Safety-Kleen (TS), Inc.
3527 Whiskey Bottom Road
Laurel,MD 20724

10. US EPA ID Number MDD980554653

G. State Facility's ID A207

H. Facility's Phone (301)939-6000

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	NON-REGULATED MATERIAL (metal and ceramic powders)		008	DM	03600	P	NONE
b.	NON-REGULATED MATERIAL (Compressor Oil)		003	DM	01415	P	NONE
c.	NON-REGULATED MATERIAL (speedy dry & oil)		002	DM	06600	P	NONE
d.	NON-REGULATED MATERIAL (nylon turnings)		017	DM	01700	P	NONE

J. Additional Descriptions for Materials Listed Above
a) / S 1.0 100%
b) / L 1.0 100%
c) / SL 1.0 100%
d) / s 1.0 100%

K. Handling Codes for Wastes Listed Above
a-d) S

15. Special Handling Instructions and Additional Information
Emergency Contact 1(800)468-1760(596)3E
a) 6SMG-001
b) 6SMG-006
c) 6SMU-003
d) 6SMU-008
License#: AD-9475
DECAL#: 087481

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Printed/Typed Name DAVID WALZAK | Signature David Walzak | Month Day Year 12 23 01

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name Louis Irizarry | Signature Louis Irizarry | Month Day Year 12 23 01

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of materials covered by this manifest except as noted in Item 19.
Printed/Typed Name CHRIS HERNANDEZ | Signature Chris Hernandez | Month Day Year 12 31 01

ORIGINAL - RETURN TO GENERATOR

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21. Generator's US EPA ID No. NYD 131318657 Manifest Document No. 22301

22. Page 2 of 3

Information in the shaded areas is not required by Federal law.

23. Generator's Name, Sulzer Metco
101 Prospect Ave; Westbury, NY 11590
(516) 338-2337

L. State Manifest Document Number Non-Hazardous # 22301

M. State Generator's ID Same

24. Transporter _____ Company Name

25. US EPA ID Number

N. State Transporter's ID

O. Transporter's Phone (301) 939-6000

26. Transporter _____ Company Name

27. US EPA ID Number

P. State Transporter's ID

Q. Transporter's Phone

	28. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	29. Containers No.	Type	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
a.	Non-Regulated Material (Grit)		00	RDM	00500	P	None
b.							
c.							
d.							
e.							
f.							
g.							
h.							
i.							

GENERATOR

S. Additional Descriptions for Materials Listed Above
a) S 1.0 100%

T. Handling Codes for Wastes Listed Above
a) S

32. Special Handing Instructions and Additional Information
a) 6SMU-004

TRANSPORTER

33. Transporter _____ Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date Month Day Year

34. Transporter _____ Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date Month Day Year

FACILITY

35. Discrepancy Indication Space

596-7522

EPA Form 8700-22A (Rev. 10-92) Previous editions are obsolete.

PRINTED WITH SOY INK

COPY 1 - FACILITY: DETACH & RETURN THIS COPY TO DISPOSAL STATE

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST
(Continuation Sheet)

21. Generator's US EPA ID No. / Manifest Document No.: NYD 131318651 / 22301

22. Page 3 of 3

Information in the shaded areas is not required by Federal law.

23. Generator's Name and Mailing Address: Sulzer METCO, 1101 Prospect Avenue, Westbury NY 11590

L. State Manifest Document Number

M. State Generator's ID

24. Transporter 3 Company Name: SJ Transportation

25. US EPA ID Number: NJD 071629976

N. State Transporter's ID: 03217/84720

O. Transporter's Phone: (856)769-2741

26. Transporter ____ Company Name

27. US EPA ID Number

P. State Transporter's ID

Q. Transporter's Phone

28. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM		29. Containers No.	Type	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
a.		Rider for transportation purposes only.					
b.							
c.							
d.							
e.							
f.							
g.							
h.							
i.							

S. Additional Descriptions for Materials Listed Above

T. Handling Codes for Wastes Listed Above

32. Special Handling Instructions and Additional Information

HWH NO: 14V

GENERATOR

TRANSPORTER

33. Transporter 3 Acknowledgement of Receipt of Materials

Printed/Typed Name: FRANK MOLLET

Signature: Frank Mollet

Date: Month 3 Day 1 Year 01

34. Transporter Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date: Month Day Year

FACILITY

35. Discrepancy Indication Space

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

SAFETY-KLEEN CORP.

90289 (continuation) 6

ORIGINAL - RETURN TO GENERATOR

P2SUL008415

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

Groundwater Alternatives

No.1

- No Action with Continued Monitoring

No.2

- Interceptor Trenches with Low-Flow Extraction Wells
- On-Site Treatment Treatment plant would be constructed on-site
- On-Site Disposal

Groundwater Alternatives

No.3

- Interceptor Trenches with Low-Flow Wells
- Off-Site Treatment
- Off-Site Disposal

WEEKLY INSPECTION REPORT

FILL OUT COMPLETLY AND FORWARD TO PATRICK TIGHE

DUFFY AVENUE FACILITY
METCO DIVISION PERKIN-ELMER
325 DUFFY AVENUE
HICKSVILLE, NEW YORK 11801
COORDINATOR: JIM ZANETTI

INSPECTED BY: B. BOUCHARD
EMPLOYEE #: 1493
DATE OF INSPECTION: 10/3/89
LOCATION OF MATERIAL: SHIPPING DOCK

INVENTORY OF MATERIAL:

MATERIAL	DESCRIPTION/ORIGIN	CONTAINER TYPE	QUANTITY
POLANE PAINT	FINISHING DEPT ON DOCK	30 GAL	45 GAL

CONNIE,
THIS IS TO BE
PICKED UP ON OCT 16TH
I AM WAITING FOR
55 GAL D.O.T. BARRELS
TO COME IN. I WILL PUT
THIS MATERIAL INTO ONE
55 GAL BARREL
Bill

ALL CONTAINERS WITH: PROPER LABELS ✓
SEALED TOP NO
INTACT - NO LEAKAGE ✓

SIGNS CLEARLY VISIBLE: HAZARDOUS WASTE ✓ / NO SMOKING

AISLE SPACE TO ALLOW UNOBSTRUCTED MOVEMENT ✓

MARYLAND HAZARDOUS WASTE MANIFEST

Department of the Environment - Waste Management Administration
2500 Broening Highway Baltimore, MD 21224

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039.

In case of an emergency or spill, immediately call the National Response Center at (800) 424-8802 and the MDE at (410) 631-3400. Nights and Holidays at (410) 974-3551.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.

2. Page 1 of

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

5. Transporter 1 Company Name | 6. US EPA ID Number

7. Transporter 2 Company Name | 8. US EPA ID Number

9. Designated Facility Name and Site Address | 10. US EPA ID Number

A. State Manifest Document Number MDC 0855488

B. State Generator's ID

C. State Transporter's ID HWH DC

D. Transporter's Phone

E. State Transporter's ID HWH DC

F. Transporter's Phone

G. State Facility ID

H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.					
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

	Haz. Code	Physical State	Specific Gravity	Percentage
a.				
b.				
c.				
d.				

K. Handling Codes for Wastes Listed Above

a. b. c. d.

15. Special Handling Instructions and Additional Information

16. GENERATORS CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and Maryland Statutes or Regulation.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR**, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Month Day Year

GENERATOR

17. Transporter 1 Acknowledgement of Receipt of Materials | Date

Printed/Typed Name | Signature | Month Day

18. Transporter 2 Acknowledgement of Receipt of Materials | Date

Printed/Typed Name | Signature | Month Day

TRANSPORTER

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. | Date

Printed/Typed Name | Signature | Month Day

FACILITY

MDC 0855488

EPA Form 8700-22 (3-97)
Previous editions are obsolete.

COPY 3 - FACILITY: DETACH & RETURN THIS COPY TO GENERATOR

P2SUL008140

MARYLAND HAZARDOUS WASTE MANIFEST

Department of the Environment - Waste Management Administration
2500 Broening Highway Baltimore, MD 21224

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-2000

UNIFORM HAZARDOUS WASTE MANIFEST *(Continuation Sheet)*

21. Generator's US EPA ID No. NYD131318651554 88 — Manifest Document No.

22. Page 2 of 2

Information in the shaded areas is not required by Federal law.

23. Generator's Name
SULZER MEYCO
1101 PROSPECT AVENUE, WESTBURY, NY 11590
516 338-2337 MICHAEL S. LYDOF

L. State Manifest Document Number MDC MDC 0 8 3 5 4 8 8

M. State Generator's ID

N. State Transporter's ID HWH DC

24. Transporter Company Name — 25. US EPA ID Number

O. Transporter's Phone

P. State Transporter's ID HWH DC

26. Transporter Company Name — 27. US EPA ID Number

Q. Transporter's Phone

28. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	29. Containers No.	Type	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
a. ~~NON-REGULATED MATERIAL~~	~~001~~	~~DM~~	~~00400~~	~~P~~	~~D027~~
b. ~~NON-REGULATED MATERIAL~~	~~004~~	~~DM~~	~~02400~~	~~P~~	~~D027~~
c. X WASTE CORROSIVE LIQUIDS, TOXIC, NOS (HYDROFLUORIC ACID, NITRIC ACID) 8, UN2922, II	001	CF	00005	P	D002
d. X WASTE TETRACHLOROETHYLENE MIXTURE 6.1, UN1897, II	001	DM	00600	P	F002
e. ~~NON-REGULATED MATERIAL~~	~~001~~	~~DM~~	~~00400~~	~~P~~	~~D027~~
f.					
g.					
h.					
i.					

GENERATOR

S. Additional Descriptions for Materials Listed Above

	Haz. Code	Physical State	Specific Gravity	Percentage
a.				100%
b.				100%
c.				100%
d.				100%
e.				
f.				
g.				
h.				
i.				

T. Handling Codes for Wastes Listed Above

a. b. c. d. e. f. g. h. i.

U. Special Handling Instructions and Additional Information

EPA Waste Codes a. b. c. d. e. f. g. h.

Profile Numbers a. 65MG-023 b. 65MG-022 c. LP d. 65MG-024 e. 65MG-023 f. g. h.

TRANSPORTER

33. Transporter _____ Acknowledgement of Receipt of Materials — Date

Printed/Typed Name — Signature — Month Day Year

34. Transporter _____ Acknowledgement of Receipt of Materials — Date

Printed/Typed Name — Signature — Month Day Year

FACILITY

35. Discrepancy Indication Space

EPA Form 8700-22A (5/98)

COPY 3 - FACILITY: DETACH & RETURN THIS COPY TO GENERATOR

P2SUL008141

MARYLAND HAZARDOUS WASTE MANIFEST

Department of the Environment - Waste Management Administration
2500 Broening Highway Baltimore, MD 21224

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039.

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. N Y D 1 3 1 9 1 8 6 5 — Manifest Document No. 5 5 4 8

2. Page 1 of 8

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
BOEING BETCO
5101 PROSPECT AVENUE, WESTBURY, NY 11590

4. Generator's Phone (516) 338-2337 RICHARD G. LYNCH

A. State Manifest Document Number MDC 0855488

B. State Generator's ID

C. State Transporter's ID HWH DC

5. Transporter 1 Company Name: SAFETY-KLEEN (TS), INC. — 6. US EPA ID Number: M D D 0 0 9 7 4 5 9

D. Transporter's Phone (301) 937-6000

7. Transportert 2 Company Name — 8. US EPA ID Number

E. State Transporter's ID HWH DC

9. Designated Facility Name and Site Address
SAFETY-KLEEN(TS)INC.
5027 WHISKEY BOTTOM ROAD
LAUREL, MD 20724

10. US EPA ID Number: M D D 9 8 0 5 1 4 6 5

F. Transporter's Phone

G. State Facility ID A337

H. Facility's Phone 3 0 3 9 3 9 - 6 5 0 0

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.					
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above

	Haz. Code	Physical State	Specific Gravity	Percentage
a.				
b.				
c.				
d.				

K. Handling Codes for Wastes Listed Above
a. b. c. d.

15. Special Handling Instructions and Additional Information
Emergency Contact: 1(800)468-1760
SK Company

Additional Waste Codes a. b. c. d.

Profile Numbers a. b. c. d.

16. GENERATORS CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and Maryland Statutes or Regulation.

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Printed/Typed Name — Signature — Month Day Year

GENERATOR

17. Transporter 1 Acknowledgement of Receipt of Materials — Date
Printed/Typed Name — Signature — Month Day

18. Transporter 2 Acknowledgement of Receipt of Materials — Date
Printed/Typed Name — Signature — Month Day

TRANSPORTER

19. Discrepancy Indication Space

FACILITY

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. — Date
Printed/Typed Name — Signature — Month Day

MDC 0855488

EPA Form 8700-22 (3-97)
Previous editions are obsolete.

COPY 8 - GENERATOR: DETACH & RETAIN THIS COPY

P2SUL008142

MARYLAND HAZARDOUS WASTE MANIFEST

Department of the Environment - Waste Management Administration
2500 Broening Highway Baltimore, MD 21224

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-2000

UNIFORM HAZARDOUS WASTE MANIFEST
(Continuation Sheet)

21. Generator's US EPA ID No. / Manifest Document No.: MYD131318651548 8

22. Page: 2

Information in the shaded areas is not required by Federal law.

23. Generator's Name
SUMMER METCO
1101 PROSPECT AVENUE, WESTBURY, NY 11590
516 338-2337 MICHAEL S. LYDON

L. State Manifest Document Number MDC
M. State Generator's ID
N. State Transporter's ID HWH DC
O. Transporter's Phone
P. State Transporter's ID HWH DC
Q. Transporter's Phone

24. Transporter ____ Company Name
25. US EPA ID Number

26. Transporter ____ Company Name
27. US EPA ID Number

28. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*	29. Containers No.	Type	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
a. NA [illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
b. [illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
c. X WASTE [illegible] (HYDROCHLORIC ACID, [illegible]) [illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
d. X [illegible]					
e. [illegible]					
f.					
g.					
h.					
i.					

GENERATOR

S. Additional Descriptions for Materials Listed Above

	Haz. Code	Physical State	Specific Gravity	Percentage
a.	[illegible]	[illegible]	[illegible]	[illegible]
b.	[illegible]	[illegible]	[illegible]	[illegible]
c.	[illegible]	[illegible]	[illegible]	[illegible]
d.	[illegible]	[illegible]	[illegible]	[illegible]
e.				
f.				
g.				
h.				
i.				

T. Handling Codes for Wastes Listed Above
a. b. c. X d. e. f. g. h. i.

32. Special Handling Instructions and Additional Information
Additional EPA Waste Codes a. b. c. d. e. f. g. h. i.
Profile Numbers a. b. c. d. e. f. g. h. i.

TRANSPORTER

33. Transporter ____ Acknowledgement of Receipt of Materials — Date
Printed/Typed Name — Signature — Month Day Year

34. Transporter ____ Acknowledgement of Receipt of Materials — Date
Printed/Typed Name — Signature — Month Day Year

FACILITY

35. Discrepancy Indication Space

EPA Form 8700-22A (5/98)

COPY 8 - GENERATOR RETAIN THIS COPY

safety-kleen

Service Center

Dear Sir or Madam:

In order for Safety-Kleen (TS), Inc. to maintain quality service to our clients and to comply with frequently changing Federal and State regulations, it sometimes becomes necessary for us to change or update certain forms associated with a hazardous waste pick up. This happened to the Customer Notification Form, in accordance with 40CFR Part 268.

Safety-Kleen (TS), Inc., in being a full service company, reviews all incoming paperwork to guard against errors or inconsistencies in completion. Enclosed you will find a copy of your Customer Notification and Certification Form for the Hazardous waste pick up on 01 / 17 / 08 corresponding to Manifest Document Number MDC085548 / 55488. Any corrections that were made are highlighted.

Please review these documents and make sure that these corrections meet your approval. EPA regulations require that these documents be kept on file with their associated manifest copies. If you have any questions, please feel free to contact us at (301) 939-6000.

Sincerely

Laurel Facility Routing Department

Safety-Kleen (TS), Inc.
3527 Whiskey Bottom Road Laurel, Maryland 20724
Phone 301.939.6000 Fax 301.939.6066

LAIDLAW ENVIRONMENTAL SERVICES

FORM A

Customer Notification And Certification

Generator Name/Location: SULZER METCO

EPA I.D. Number: NYD 131318651

Waste Profile or ARF Designation: ~~65MG-001, -004, -013~~, 65MG-024, ~~&~~ 65MU-006, ~~-007, -003~~

Manifest Number: MOC 0855488

EPA Waste Number(s): D002, D006, D007, D008, F002

Waste Analysis Available? Yes (attached) _____ No _____ On file at receiving facility X

Unrestricted Waste Notification (*Category 1*)

Mark the statement below if you generate a waste that is not a land disposal restricted waste (the waste has no applicable treatment standards).

☒ *I notify that I am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that the waste is not restricted as specified in 40 CFR §268, Subpart D or any applicable prohibitions set forth in 40 CFR §268.32 or RCRA Section 3004(d).*

Restricted Waste/Debris Notification (*Category 2*)

Mark statement (2a) below if you generate a waste that is restricted from land disposal (the waste has applicable treatment standards). **NOTE-1:** A waste may pass one or more standards and require treatment or be varianced for others. In this case, all applicable categories must be checked. **NOTE-2:** D001, D002 and D012 - D043 wastes must be evaluated for underlying constituents found in 40 CFR §268. 48 (Table UTS), that are reasonably expected to be present. A list of these constituents must be included on **FORM B**, or attached to and accompany this notification with each waste shipment. Mark statement (2b) if you generate a debris waste that will be treated to the alternate debris standards located in 40 CFR §268.45.

☒ **(2a) Restricted Waste Notification**

I notify that I am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that the waste is subject to the treatment standards specified in 40 CFR §268 Subpart D. The waste: (a) must be treated to the appropriate regulatory treatment standard, by the appropriate regulatory treatment method; (b) qualifies for a variance as described in category 3 below; or (c) meets some or all of the standards as described in Category 4 below.

☐ **(2b) Alternate Debris Treatment Notification: This hazardous debris is subject to the alternate treatment standards of 40 CFR §268.45.**

The waste contains the following contaminants subject to treatment [check all that apply]:

_____ §268.45(b)(1) - Toxicity characteristic debris;

_____ §268.45(b)(2) - Debris contaminated with listed waste;

_____ §268.45(b)(3) - Cyanide reactive debris.

Restricted Waste Variance Notification (*Category 3*)

Mark the statement below and list the applicable variance date on **Form B**, if you generate a waste which **does not** require treatment prior to land disposal because of a variance (including a case-by-case extension under 40 CFR §268.5, a nationwide variance under 40 CFR §268 Subpart C, a no migration petition under 40 CFR §268.6, or other applicable variance).

☐ *I notify pursuant to 40 CFR §268.7(a)(3) that I am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that this waste is subject to a national capacity variance under 40 CFR §268 Subpart C, or a case-by-case extension under 40 CFR §268.5, or an exemption under 40 CFR §268.6.*

Restricted Waste Certification (Treatment Standards Met) (*Category 4*)

Mark the certification statement below if you generate a waste that is restricted from land disposal (the waste has applicable treatment standards), and the waste meets the standards as generated. **Note:** All applicable constituent standards must be accounted for. A waste may pass one or more standards and require treatment or be variance for other constituents. In this case, all applicable categories must be checked.

☐ *I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA § 3004(d). I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.*

SIGNATURE: Michael S. Lydon DATE: 01-17-00

PRINT NAME: Michael S. Lydon TITLE: EH&S

Revised 10/94 585-7510-585003

FORM B1 ***(Must be accompanied by Form A)***

Generator Name/Location Sulzer Metco, 1101 Prospect Ave., Westbury, NY 11590 **Page** 2 **of** 2

EPA I.D. Number :

Manifest :

Waste Profile or ARF	Category No.	EPA or State Waste Code	Variance Date	Description/Sub Category	Treatability Group (WW or NWW)	Waste Constituents or Legend #
6SMU-006	24	D002		CORROSIVE CHARACTERISTIC WASTE	WW	
		D006		TOXICITY CHARACTERISTIC CADMIUM WASTE		CADMIUM
		D007		TOXICITY CHARACTERISTIC CHROMIUM WASTE		CHROMIUM
		D008		TOXICITY CHARACTERISTIC LEAD WASTE		LEAD
~~6SMU-009~~	~~1~~	~~1027~~				
~~6SMG-001~~	~~1~~	~~1027~~				
~~6SMG-004~~	~~1~~	~~1027~~				
~~6SMG-013~~	~~1~~	~~1027~~	50			
~~6SMU-003~~	~~1~~	~~1027~~				
~~6SMG-~~	~~24~~	~~F002~~				~~21~~
~~6SMG-~~	~~1~~	~~1072~~				
6SMU024	24	F002				21

CONSTITUENTS IN SOLVENT, CALIFORNIA LIST AND CHARACTERISTIC WASTES.

F001 - F005 spent solvents

Legend #	Constituent Name
1	Acetone
2	Benzene
3	n-Butyl alcohol
*4	Carbon disulfide
5	Carbon tetrachloride
6	Chlorobenzene
7	Cresol (m-and p-isomers)
8	o-Cresol
*9	Cyclohexanone
10	1,2-Dichlorobenzene
11	Ethyl Acetate
12	Ethyl Benzene
13	Ethyl Ether
14	Isobutyl alcohol
*15	Methanol
16	Methylene Chloride
17	Methyl Ethyl Ketone
18	Methyl isobutyl ketone
19	Nitrobenzene
20	Pyridine
21	Tetrachloroethylene
22	Toluene
23	1,1,1-Trichloroethane
24	1,1,2-Trichloroethane
25	Trichlorothylene
26	1,1,2-Trichloro-1,2,2-trifluoroethane
27	Trichloromonofluoro-methane
28	Xylenes (total)

Legends 29-31 RESERVED

** If these constituents are present alone or in any combination of the three, then non waste water forms of these constituents must be treated to TCLP levels as indicated in §268.40.*

Technology-Based standards For F005 when the constituent is the only listed F00-F005 solvent

Legend #	Constituent Name
32	2-Ethoxyethanool
33	2-Nitropropane

Legends 34-43 RESERVED

CALIFORNIA LIST WASTES

Legend #	Constituent Name
44	Nickel
45	Thallium
46	Cyanide (Liquid)
47	Liquid Polychlorinated Biphenyls (PCB's)
48	Halogenated Organic compounds (HOC's)

SEE BACK FOR THE UNIVERSAL TREATMENT STANDARDS (UTS), Legends 49 - 264

Revised 6/96 585-7512A-585003

LAIDLAW ENVIRONMENTAL SERVICES

Form D

Lab Pack Waste Customer Notification/Certification
(Category 6)

Generator Name/Location: Sulzer Metco, 1101 Prospect Ave, Westbury, NY 11590

EPA I.D. Number NYD131318651 **Manifest Number** MDC-0855488

Restricted Waste Notification (Category 2)

Check this category and category 6 below if you are managing lab pack wastes that are restricted from land disposal (the waste has applicable treatment standards), **AND** if the lab pack does not contain any of the restricted waste codes listed in 40 CFR Part 268 Appendix IV.

☒ *I notify that I am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that the waste is subject to the alternate treatment standards for lab packs specified in 40 CFR Part 268.42(c).*

Drum Number, Waste Profile or ARF Number	State/EPA Waste Numbers	WW/ NWW	Drum Number, Waste Profile or ARF Number	State/EPA Waste Numbers	WW/ NWW
000117NJSMG-22	D002	NWW			

Lab Pack Certification (Category 6)

☒ *I certify under penalty of law that I personally have examined and am familiar with the waste and that the lab pack contains only wastes which have not been excluded under appendix IV to part 268 or solid waste not subject to regulation under 40 CFR 261. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine or imprisonment.*

Unrestricted Waste Notification (Category 1)
Mark this category if you are managing lab pack wastes that are not subject to the land disposal restrictions (the waste have no applicable treatment standards).

☐ *I notify that I am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that the waste not restricted as specified in 40 CFR Part 268, Subpart D and all applicable prohibitions set forth in 40 CRF 268.32 or RCRA Section 3004(d).*

Drum Number, Waste Profile or ARF Number	State/EPA Waste Numbers	Drum Number, Waste Profile or ARF Number	State/EPA Waste Numbers

SIGNATURE: Michael Lydon **DATE:** 01-17-00

PRINT NAME: Michael S. Lydon **TITLE:** EH+S.

Revised 01/96 585-7520-585003

MARYLAND HAZARDOUS WASTE MANIFEST

Department of the Environment - Waste Management Administration
2500 Broening Highway Baltimore, MD 21224

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD131318655 Manifest Document No. 15548
2. Page 1 of 8 — Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
SULZER METCO
1101 PROSPECT AVENUE, WESTBURY, NY 11590

4. Generator's Phone (516) 338-2337 MICHAEL S. LYDON

A. State Manifest Document Number MDC 0855488
B. State Generator's ID
C. State Transporter's ID HWH DC
D. Transporter's Phone (301) 939-6000

5. Transporter 1 Company Name: SAFETY KLEEN (TG), INC.
6. US EPA ID Number: SCD000074591

7. Transporter 2 Company Name
8. US EPA ID Number

E. State Transporter's ID HWH DC
F. Transporter's Phone

9. Designated Facility Name and Site Address
SAFETY-KLEEN(TS)INC.
3527 WHISKEY BOTTOM ROAD
LAUREL, MD 20724

10. US EPA ID Number: MDD980554653
G. State Facility ID A207
H. Facility's Phone (301) 939-6000

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. X WASTE CHROMIC ACID SOLUTION X B, UN1755, II (D002, D007)	003	DF	01000	P	D002
b. ~~NON-REGULATED MATERIAL~~	~~002~~	~~DM~~	~~00550~~	~~P~~	~~1027~~
c. ~~NON-REGULATED MATERIAL~~	~~004~~	~~DM~~	~~02000~~	~~P~~	~~1027~~
d. ~~NON-REGULATED MATERIAL~~	~~002~~	~~DM~~	~~01000~~	~~P~~	~~1027~~

J. Additional Descriptions for Materials Listed Above

	Haz. Code	Physical State	Specific Gravity	Percentage
a.	C	L	1.2	100%
b.	~~CSMG-006~~	~~S~~	~~1.01~~	~~100.01%~~
c.	~~CSMG-001~~	~~S~~	~~1.01~~	~~100.01%~~
d.	~~CSMG-001~~	~~S~~	~~1.01~~	~~100.01%~~

K. Handling Codes for Wastes Listed Above: a. T c. ~~S~~ b. ~~S~~ d.

15. Special Handling Instructions and Additional Information
HWT: 037654
Emergency Contact: 1(800)468-1760
3E Company
NJDEP-10364 D007, D006, D008
Additional EPA Waste Codes b. c. d.
Profile Numbers b. ~~CSMG-006~~ c. ~~CSMG-001~~

16. GENERATORS CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and Maryland Statutes or Regulation.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Date
Printed/Typed Name: JAMES CRANDALL | Signature | Month Day 10 11 00

18. Transporter 2 Acknowledgement of Receipt of Materials — Date
Printed/Typed Name | Signature | Month Day

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. — Date
Printed/Typed Name | Signature | Month Day

MDC 0855488

In case of an emergency or spill, immediately call the National Response Center at (800) 424-8802 and the MDE at (410) 631-3400. Nights and Holidays at (410) 974-3551.

EPA Form 8700-22 (3-97)
Previous editions are obsolete.

COPY 6 - GENERATOR: DETACH & MAIL TO DISPOSER STATE

P2SOL008148

LAIDLAW ENVIRONMENTAL SERVICES

FORM A

Customer Notification And Certification

Page 1 of 2

Generator Name/Location: Sulzer Metco

EPA I.D. Number: NYD 13 1 8651

Waste Profile or ARF Designation: GSMG-001-004-013 GSMG-027 1-GSMU 006-007-008

Manifest Number: MOC 0255 1188

EPA Waste Number(s): D002, D006, D007, D008, F002

Waste Analysis Available? Yes (attached) _____ No _____ On file at receiving facility X

Unrestricted Waste Notification (*Category 1*)

Mark the statement below if you generate a waste that is not a land disposal restricted waste (the waste has no applicable treatment standards).

☒ *I notify that I am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that the waste is not restricted as specified in 40 CFR §268, Subpart D or any applicable prohibitions set forth in 40 CFR §268.32 or RCRA Section 3004(d).*

Restricted Waste/Debris Notification (*Category 2*)

Mark statement (2a) below if you generate a waste that is restricted from land disposal (the waste has applicable treatment standards). **NOTE-1:** A waste may pass one or more standards and require treatment or be varianced for others. In this case, all applicable categories must be checked. **NOTE-2:** D001, D002 and D012 - D043 wastes must be evaluated for underlying constituents found in 40 CFR §268. 48 (Table UTS), that are reasonably expected to be present. A list of these constituents must be included on **FORM B**, or attached to and accompany this notification with each waste shipment. Mark statement (2b) if you generate a debris waste that will be treated to the alternate debris standards located in 40 CFR §268.45.

☒ **(2a) Restricted Waste Notification**

I notify that I am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that the waste is subject to the treatment standards specified in 40 CFR §268 Subpart D. The waste: (a) must be treated to the appropriate regulatory treatment standard, by the appropriate regulatory treatment method; (b) qualifies for a variance as described in category 3 below; or (c) meets some or all of the standards as described in Category 4 below.

☐ **(2b) Alternate Debris Treatment Notification: This hazardous debris is subject to the alternate treatment standards of 40 CFR §268.45.**

The waste contains the following contaminants subject to treatment [check all that apply]:

_____ §268.45(b)(1) - Toxicity characteristic debris;

_____ §268.45(b)(2) - Debris contaminated with listed waste;

_____ §268.45(b)(3) - Cyanide reactive debris.

Restricted Waste Variance Notification (*Category 3*)

Mark the statement below and list the applicable variance date on **Form B**, if you generate a waste which **does not** require treatment prior to land disposal because of a variance (including a case-by-case extension under 40 CFR §268.5, a nationwide variance under 40 CFR §268 Subpart C, a no migration petition under 40 CFR §268.6, or other applicable variance).

☐ *I notify pursuant to 40 CFR §268.7(a)(3) that I am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that this waste is subject to a national capacity variance under 40 CFR §268 Subpart C, or a case-by-case extension under 40 CFR §268.5, or an exemption under 40 CFR §268.6.*

Restricted Waste Certification (Treatment Standards Met) (*Category 4*)

Mark the certification statement below if you generate a waste that is restricted from land disposal (the waste has applicable treatment standards), and the waste meets the standards as generated. **Note:** All applicable constituent standards must be accounted for. A waste may pass one or more standards and require treatment or be variance for other constituents. In this case, all applicable categories must be checked.

☐ *I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA § 3004(d). I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.*

SIGNATURE: [signature] DATE: [illegible]

PRINT NAME: Michael [illegible] TITLE: [illegible]

Revised 10/94 585-7510-585003

FORM B1 ***(Must be accompanied by Form A)***

Generator Name/Location Sulzer Metco, 1101 Prospect Ave., Westbury, NY 11590 **Page** 2 **of** 2

EPA I.D. Number : Manifest :

Waste Profile or ARF	Category No.	EPA or State Waste Code	Variance Date	Description/Sub Category	Treatability Group (WW or NWW)	Waste Constituents or Legend #
6SMU-006	2a	D002		CORROSIVE CHARACTERISTIC WASTE		
		D006		TOXICITY CHARACTERISTIC CADMIUM WASTE		
		D007		TOXICITY CHARACTERISTIC CHROMIUM WASTE		
		D008		TOXICITY CHARACTERISTIC LEAD WASTE		
~~6SMU-005~~	~~1~~	~~D027~~				
~~6SMG-001~~	~~1~~	~~D027~~				
~~6SMG-001~~	~~1~~	~~D027~~				
~~6SMG-013~~	~~1~~	~~D027~~ SC				
~~6SMU-003~~	~~1~~	~~D027~~				
~~6SMG~~	~~2a~~	~~F002~~				~~21~~ SC 21
~~6SMG~~	~~1~~	~~D022~~				
6SMU024	2a	F002				21

CONSTITUENTS IN SOLVENT, CALIFORNIA LIST AND CHARACTERISTIC WASTES.

F001 - F005 spent solvents

Legend #	Constituent Name
1	Acetone
2	Benzene
3	n-Butyl alcohol
*4	Carbon disulfide
5	Carbon tetrachloride
6	Chlorobenzene
7	Cresol (m-and p-isomers)
8	o-Cresol
*9	Cyclohexanone
10	1,2-Dichlorobenzene
11	Ethyl Acetate
12	Ethyl Benzene
13	Ethyl Ether
14	Isobutyl alcohol
*15	Methanol
16	Methylene Chloride
17	Methyl Ethyl Ketone
18	Methyl isobutyl ketone
19	Nitrobenzene
20	Pyridine
21	Tetrachloroethylene
22	Toluene
23	1,1,1-Trichloroethane
24	1,1,2-Trichloroethane
25	Trichlorothylene
26	1,1,2-Trichloro-1,2,2-trifluoroethane
27	Trichloromonofluoro-methane
28	Xylenes (total)

Legends 29-31 RESERVED

** If these constituents are present alone or in any combination of the three, then non waste water forms of these constituents must be treated to **TCLP** levels as indicated in §268.40.*

Technology-Based standards For F005 when the constituent is the only listed F00-F005 solvent

Legend #	Constituent Name
32	2-Ethoxyethanool
33	2-Nitropropane

Legends 34-43 RESERVED

CALIFORNIA LIST WASTES

Legend #	Constituent Name
44	Nickel
45	Thallium
46	Cyanide (Liquid)
47	Liquid Polychlorinated Biphenyls (PCB's)
48	Halogenated Organic compounds (HOC's)

SEE BACK FOR THE UNIVERSAL TREATMENT STANDARDS (UTS), Legends 49 - 264

Revised 6/96 585-7512A-585003

LAIDLAW ENVIRONMENTAL SERVICES

Form D

Lab Pack Waste Customer Notification/Certification
(Category 6)

Generator Name/Location: Succo Metals, 101 Pennsylvania Ave, Westbury, NY 11590

EPA I.D. Number NYD13[illegible] **Manifest Number** MDC-[illegible]

Restricted Waste Notification (Category 2)

Check this category and category 6 below if you are managing lab pack wastes that are restricted from land disposal (the waste has applicable treatment standards), **AND** if the lab pack does not contain any of the restricted waste codes listed in 40 CFR Part 268 Appendix IV.

☑ *I notify that I am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that the waste is subject to the alternate treatment standards for lab packs specified in 40 CFR Part 268.42(c).*

Drum Number, Waste Profile or ARF Number	State/EPA Waste Numbers	WW/ NWW
000117NTSMG-22	D007	NWW

Drum Number, Waste Profile or ARF Number	State/EPA Waste Numbers	WW/ NWW

Lab Pack Certification (Category 6)

☑ *I certify under penalty of law that I personally have examined and am familiar with the waste and that the lab pack contains only wastes which have not been excluded under appendix IV to part 268 or solid waste not subject to regulation under 40 CFR 261. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine or imprisonment.*

Unrestricted Waste Notification (Category 1)
Mark this category if you are managing lab pack wastes that are not subject to the land disposal restrictions (the waste have no applicable treatment standards).

☐ *I notify that I am familiar with the waste through analysis and testing or through knowledge of the waste to support this notification that the waste not restricted as specified in 40 CFR Part 268, Subpart D and all applicable prohibitions set forth in 40 CRF 268.32 or RCRA Section 3004(d).*

Drum Number, Waste Profile or ARF Number	State/EPA Waste Numbers

Drum Number, Waste Profile or ARF Number	State/EPA Waste Numbers

SIGNATURE: [illegible] **DATE:** [illegible]

PRINT NAME: [illegible] **TITLE:** [illegible]

THIS WASTE DOES NOT CONTAIN ANY DIOXINS, CHLORINATED FURANS, EXPLOSIVES OR RADIOACTIVE MATERIALS.

safety-kleen.

Container Contents

☒ Bulk ☐ Mixed Lab

Manifest #
Manifest page _____ Line Item _____
RQ _____

	Year	Month	Day	Code				Number	
Container Number:	[illegible]	[illegible]	[illegible]	N	J	[illegible]	[illegible]	[illegible]	Chemist [illegible]
DOT Shipping Name: [illegible]									Absorbent C V O
Container Type: [illegible] Size: [illegible]	UN/NA Number							HM	
Hazard Class: Division:	Chemical: Constituents:								

Profile Number	[illegible]
Disposal Site	[illegible]
Approval Code	[illegible]

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01	[illegible]						X	[illegible]		[illegible]
02										
03										
04										
05										
06										
07										
08										
09										
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ABSORBENT	PS - PHYSICAL STATE	IC - INTERNAL CONTAINER
C - CORN COB	L - LIQUID/POURABLE	G - GLASS M - METAL
V - VERMICULITE	S - SOLID	P - PLASTIC F - PAPER
O - OTHER	X - SLUDGE	

This Lab Pack list continues: YES ☐ NO ☐ This is page _____ of _____

ORIGINAL - FINAL T.S.D. • GREEN - TRANS/CERT • YELLOW - DISPOSER • PINK - 1ST T.S.D. • GOLD - GENERATOR

P2SUL008152

THIS WASTE DOES NOT CONTAIN ANY DIOXINS, CHLORINATED FURANS, EXPLOSIVES OR RADIOACTIVE MATERIALS.

safety-kleen.

Container Contents

☒ Bulk ☐ Mixed Lab

Manifest #
Manifest page _____ Line Item _____
RQ _____

Container Number:	Year Month Day	Code	Number	Chemist
	[illegible]	N J - [illegible] -	[illegible]	[illegible]

DOT Shipping Name:	[illegible]
Absorbent C V O	
Container Type: [illegible] Size: [illegible]	UN/NA Number / HM
Hazard Class: Division:	Chemical: Constituents:

Profile Number	[illegible]
Disposal Site	[illegible]
Approval Code	[illegible]

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01	[illegible]						S	[illegible]		
02	[illegible]									
03										
04										
05										
06										
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28										

ABSORBENT	PS - PHYSICAL STATE	IC - INTERNAL CONTAINER
C - CORN COB	L - LIQUID/POURABLE	G - GLASS M - METAL
V - VERMICULITE	S - SOLID	P - PLASTIC F - PAPER
O - OTHER	X - SLUDGE	

This Lab Pack list continues: YES ☐ NO ☐ This is page _____ of _____

ORIGINAL - FINAL T.S.D. • GREEN - TRANS/CERT • YELLOW - DISPOSER • PINK - 1ST T.S.D. • GOLD - GENERATOR

P2SOL008153

THIS WASTE DOES NOT CONTAIN ANY DIOXINS, CHLORINATED FURANS, EXPLOSIVES OR RADIOACTIVE MATERIALS.

safety-kleen.

Container Contents

☐ Bulk ☒ Mixed Lab

Manifest #
Manifest page _____ Line Item _____
RQ _____

	Year	Month	Day	Code	Number	
Container Number:	00	01	1	7NJ	SAG-	Chemist
DOT Shipping Name:	[illegible]					Absorbent C/V/O
Container Type: [illegible]	Size: [illegible]	UN/NA Number	[illegible]		HM X	
Hazard Class: Division:	[illegible]		Chemical: Constituents:	[illegible]		

Profile Number	
Disposal Site	[illegible]
Approval Code	

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01	[illegible] 4 oz bottles of [illegible]							[illegible]	P	[illegible]
02	Hydrofluoric Acid and [illegible]							[illegible]	[illegible]	[illegible]
03	Nitric Acid Solution (pH<2)									
04	Spent									
05	Chromic Chloride and Hydrochloric						L	[illegible]		[illegible]
06	Sodium Sulfide (pH>9)									
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ABSORBENT	PS - PHYSICAL STATE	IC - INTERNAL CONTAINER
C - CORN COB	L - LIQUID/POURABLE	G - GLASS M - METAL
V - VERMICULITE	S - SOLID	P - PLASTIC F - PAPER
O - OTHER	X - SLUDGE	

This Lab Pack list continues: YES ☐ NO ☒ This is page 1 of 1

ORIGINAL - FINAL T.S.D. • GREEN - TRANS/CERT • YELLOW - DISPOSER • PINK - 1ST T.S.D. • GOLD - GENERATOR

THIS WASTE DOES NOT CONTAIN ANY DIOXINS, CHLORINATED FURANS, EXPLOSIVES OR RADIOACTIVE MATERIALS.

safety-kleen.

Container Contents

☐ Bulk ☐ Mixed Lab

Manifest #
Manifest page _____ Line Item _____
RQ _____

	Year	Month	Day	Code	Number	
Container Number:	0 0	0 1	1 7	N J S M G	– 21	Chemist
DOT Shipping Name:	WASTE [illegible]					Absorbent C V O
Container Type: 55 gal/x	Size: 55	UN/NA Number	UN1897	HM x		
Hazard Class: 6.1 Division:		Chemical Constituents:				

Profile Number	[illegible]
Disposal Site	[illegible]
Approval Code	[illegible]

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01	Tulcopam Mask 6						L	1 55 gal	01	F002
02	(1) Tetrachloroethylene 70%									
03	(2) Water 10%									
04	(3) Inert Resin 20%									
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ABSORBENT	PS - PHYSICAL STATE	IC - INTERNAL CONTAINER
C - CORN COB	L - LIQUID/POURABLE	G - GLASS M - METAL
V - VERMICULITE	S - SOLID	P - PLASTIC F - PAPER
O - OTHER	X - SLUDGE	

This Lab Pack list continues: YES ☐ NO ☐ This is page _____ of _____

ORIGINAL - FINAL T.S.D. • GREEN - TRANS/CERT • YELLOW - DISPOSER • PINK - 1ST T.S.D. • GOLD - GENERATOR

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safety-kleen.

Container Contents

☒ Bulk ☐ Mixed Lab

Manifest #
Manifest page _____ Line Item _____
RQ _____

	Year	Month	Day	Code	Number	
Container Number:	0 0	1 1	7	N J	1 A 0 –	20

DOT Shipping Name:	NON-REGULATED LIQUID		Chemist
Container Type:	Size:	UN/NA Number	HM
Hazard Class: Division:	Chemical: Constituents:		Absorbent C V O

Profile Number	[illegible]
Disposal Site	
Approval Code	[illegible]

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01	Mixed Hydrocarbon Compounds						L	1 x 55gal	M	[illegible]
02	(+) Water : 40-60%									
03	(+) Saturated Oil : 40-60%									
04										
05										
06										
07										
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ABSORBENT	PS - PHYSICAL STATE	IC - INTERNAL CONTAINER
C - CORN COB	L - LIQUID/POURABLE	G - GLASS M - METAL
V - VERMICULITE	S - SOLID	P - PLASTIC F - PAPER
O - OTHER	X - SLUDGE	

This Lab Pack list continues: YES ☐ NO ☒ This is page 1 of 1

ORIGINAL - FINAL T.S.D. • GREEN - TRANS/CERT • YELLOW - DISPOSER • PINK - 1ST T.S.D. • GOLD - GENERATOR

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safety-kleen.

Container Contents

☒ Bulk ☐ Mixed Lab

Manifest #
Manifest page _____ Line Item _____
RQ _____

	Year	Month	Day	Code	Number	
Container Number:	[illegible]	[illegible]	[illegible]	N J S [illegible]	[illegible]	Chemist [illegible]
DOT Shipping Name:	[illegible]					Absorbent C V O
Container Type: [illegible] Size:	UN/NA Number [illegible]			HM		
Hazard Class: [illegible] Division:	Chemical: Constituents:					

Profile Number	[illegible]
Disposal Site	[illegible]
Approval Code	[illegible]

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01	[illegible]					[illegible]	[illegible]	[illegible]		[illegible]
02	[illegible]					[illegible]		[illegible]		[illegible]
03	[illegible]					[illegible]				
04	[illegible]					[illegible]				
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safety-kleen.

Container Contents

☒ Bulk ☐ Mixed Lab

Manifest #
Manifest page _____ Line Item _____
RQ _____

Container Number:	Year	Month	Day	Code									Number	Chemist
							N	J				–		

DOT Shipping Name:			Absorbent C V O
Container Type:	Size:	UN/NA Number	HM
Hazard Class: Division:		Chemical: Constituents:	

Profile Number	
Disposal Site	
Approval Code	

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01										
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safety-kleen.

Container Contents

☒ Bulk ☐ Mixed Lab

Manifest #
Manifest page _____ Line Item _____
RQ _____

Container Number:	Year / Month / Day	Code	Number	Chemist
	[illegible]	N J	[illegible]	[illegible]
DOT Shipping Name:	[illegible]			Absorbent C V O
Container Type: [illegible] Size: [illegible]	UN/NA Number		HM	
Hazard Class: Division:	Chemical: Constituents:			

Profile Number	[illegible]
Disposal Site	[illegible]
Approval Code	[illegible]

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01	[illegible]						[illegible]	[illegible]		[illegible]
02										
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safety-kleen.

Container Contents

☒ Bulk ☐ Mixed Lab

Manifest #
Manifest page _____ Line Item _____
RQ _____

Container Number:	Year Month Day Code Number	Chemist
DOT Shipping Name:		Absorbent C V O
Container Type:	Size: UN/NA Number	HM
Hazard Class: Division:	Chemical: Constituents:	

Profile Number	
Disposal Site	
Approval Code	

Line No.	Material Description						PS	Material Quantity	I.C.	EPA Waste Code Number
	pH	APPEAR	% SOLID	VIS	PUMP	% FULL				
01										
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This Lab Pack list continues: YES ☐ NO ☐ This is page _____ of _____

ORIGINAL - FINAL T.S.D. • GREEN - TRANS/CERT • YELLOW - DISPOSER • PINK - 1ST T.S.D. • GOLD - GENERATOR

P2SUL008160

SENDER: *COMPLETE THIS SECTION*

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

MARYLAND DEPT OF THE ENVIRONMENT
WASTE MANAGEMENT ADMINISTRATION
2500 BROENING HIGHWAY
BALTIMORE MD 21224

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* | B. Date of Delivery

C. Signature

X

☐ Agent
☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Copy from service label)*
P 341 833 770

PS Form 3811, July 1999 Domestic Return Receipt 102595-99-M-1789

P 341 833 770

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail *(See reverse)*

Sent to	MARYLAND DEPT. OF THE ENVIRONMENT WASTE MANAGEMENT
Street & Number	2500 BROENING HIGHWAY
Post Office, State, & ZIP Code	BALTIMORE MD 21224
Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form 3800, April 1995

Fold at line over top of envelope to the right of the return address

CERTIFIED

P 341 833 770

MAIL

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

NYSDEC
DIV. SOLID & HAZARDOUS MATERIALS
PO BOX 12820
ALBANY NY 12212

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* | B. Date of Delivery

C. Signature

X

☐ Agent
☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Copy from service label)*
P 341 833 769

PS Form 3811, July 1999 Domestic Return Receipt 102595-99-M-1789

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail *(See reverse)*

Sent to NYSDEC DIV. SOLID & HAZARDOUS MATERIALS
Street & Number PO BOX 12820
Post Office, State, & ZIP Code ALBANY NY 12212

Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form 3800, April 1995

Fold at line over top of envelope to the right of the return address

CERTIFIED MAIL

P 341 833 769

P 341 833 769

safety-kleen.

Service Center

March 28th 2000

SULZER METCO
1101 PROSPECT AVENUE
WESTBURY NY 11590

MDC0855488

Dear Sir/Madam:

Enclosed please find a Certificate of Disposal which certifies that waste which Safety-Kleen (TS), Inc. picked up from your site on 01-17-00, manifest number NJSMG-55488, sent out for disposal.

This certificate indicates the container number, date of disposal, disposal site and disposal method for all of the material picked up on the referenced manifest.

If there are any changes to be made for your mailing or contact information, please call (301) 939-6051 or 6024 to update your account.

If you have any questions, please feel free to contact your customer service representative.

Safety-Kleen (TS), Inc.

Enclosure

Safety-Kleen (TS), Inc.
3527 Whiskey Bottom Road Laurel, Maryland 20724
Phone 301.939.6000 Fax 301.939.6066

HAZARDOUS MATERIALS WASTE DISPOSAL

safety-kleen®

SAFETY KLEEN (TS), INC.
3527 WHISKEY BOTTOM ROAD
LAUREL MD 20724-

Mail To: SULZER METCO
1101 PROSPECT AVENUE
WESTBURY NY 11590
Attention:

Pickup Address: SULZER METCO
1101 PROSPECT AVENUE
WESTBURY NY 11590

EPA ID: NYD131318651

Manifest No: NJSMG-55488

This is to certify that hazardous material removed from SULZER METCO

has been disposed of in accordance with all applicable local, state and federal regulations in the following manner.

Container	Date	Location	Method
000117-NJSMG-012 6SMU-006	01/31/00	STABLEX CANADA, INC (A COMPANY OF CONCORD RESOURCES GROUP) BLAINVILLE QC	Chemical Fixation
000117-NJSMG-013 6SMU-006	01/31/00	STABLEX CANADA, INC (A COMPANY OF CONCORD RESOURCES GROUP) BLAINVILLE QC	Chemical Fixation
000117-NJSMG-014 6SMU-006	01/31/00	STABLEX CANADA, INC (A COMPANY OF CONCORD RESOURCES GROUP) BLAINVILLE QC	Chemical Fixation
000117-NJSMG-021 6SMG-024	03/01/00	SAFETY-KLEEN (BARTOW), INC. BARTOW FL	Liquid Injection Incinerator
000117-NJSMG-022 LPI	02/17/00	SAFETY-KLEEN (BRIDGEPORT) INC BRIDGEPORT NJ	Rotary Kiln Incineration

Operations

Date: 03/27/00

safety-kleen.

Service Center

Tuesday, April 04, 2000

SULZER METCO
1101 PROSPECT AVENUE
WESTBURY NY 11590

BOL-00117

Dear Sir/Madam:

Enclosed please find a Certificate of Disposal which certifies that waste which Safety-Kleen (TS), Inc. picked up from your site on 1/17/00, manifest number NJSMG-00117 , has been sent out for disposal.

This certificate indicates the container number, date sent for disposal, disposal site and disposal method for all of the material picked up on the referenced manifest.

If for any reason, your company address or information should change, please contact our manifest and records department at (301) 939-6051 or (301) 939-6024. It is imperative that we keep your records current at all times.
If you have any questions, please feel free to contact your customer service representative.

Safety-Kleen (TS), Inc..

Enclosure

Safety-Kleen (TS), Inc.
3527 Whiskey Bottom Road Laurel, Maryland 20724
Phone 301.939.6000 Fax 301.939.6066

HAZARDOUS MATERIALS WASTE DISPOSAL

safety-kleen®

SAFETY KLEEN (TS), INC.
3527 WHISKEY BOTTOM ROAD
LAUREL MD 20724-

Mail To: SULZER METCO
1101 PROSPECT AVENUE
WESTBURY NY 11590
Attention:

Pickup Address: SULZER METCO
1101 PROSPECT AVENUE
WESTBURY NY 11590

EPA ID: NYD131318651

Manifest No: NJSMG-00117

This is to certify that hazardous material removed from SULZER METCO

has been disposed of in accordance with all applicable local, state and federal regulations in the following manner.

Container	Date	Location	Method
000117-NJSMG-001	02/02/00	SAFETY-KLEEN (PINEWOOD), INC.	Chemically Secure Landfill
6SMG-001		PINEWOOD SC	
000117-NJSMG-002	02/02/00	SAFETY-KLEEN (PINEWOOD), INC.	Chemically Secure Landfill
6SMG-001		PINEWOOD SC	
000117-NJSMG-003	02/02/00	SAFETY-KLEEN (PINEWOOD), INC.	Chemically Secure Landfill
6SMG-001		PINEWOOD SC	
000117-NJSMG-004	02/02/00	SAFETY-KLEEN (PINEWOOD), INC.	Chemically Secure Landfill
6SMG-013		PINEWOOD SC	
000117-NJSMG-005	02/02/00	SAFETY-KLEEN (PINEWOOD), INC.	Chemically Secure Landfill
6SMG-004		PINEWOOD SC	
000117-NJSMG-006	02/01/00	SAFETY-KLEEN(CHATTANOOGA),INC	Industrial Landfill
6SMU-003		CHATTANOOGA TN	
000117-NJSMG-007	02/01/00	SAFETY-KLEEN(CHATTANOOGA),INC	Industrial Landfill
6SMU-003		CHATTANOOGA TN	
000117-NJSMG-008	02/01/00	SAFETY-KLEEN(CHATTANOOGA),INC	Industrial Landfill
6SMU-003		CHATTANOOGA TN	
000117-NJSMG-009	02/01/00	SAFETY-KLEEN(CHATTANOOGA),INC	Industrial Landfill
6SMU-003		CHATTANOOGA TN	
000117-NJSMG-010	02/02/00	SAFETY-KLEEN (PINEWOOD), INC.	Chemically Secure Landfill
6SMG-001		PINEWOOD SC	
000117-NJSMG-011	02/02/00	SAFETY-KLEEN (PINEWOOD), INC.	Chemically Secure Landfill
6SMG-004		PINEWOOD SC	
000117-NJSMG-015	02/02/00	SAFETY-KLEEN (PINEWOOD), INC.	Chemically Secure Landfill
6SMU-009		PINEWOOD SC	
000117-NJSMG-016	02/02/00	SAFETY-KLEEN (PINEWOOD), INC.	Chemically Secure Landfill
6SMU-009		PINEWOOD SC	
000117-NJSMG-017	02/02/00	SAFETY-KLEEN (PINEWOOD), INC.	Chemically Secure Landfill
6SMU-009		PINEWOOD SC	

Brinton H. Hoar

Operations

Date: 04/03/00

HAZARDOUS MATERIALS WASTE DISPOSAL

safety-kleen®

SAFETY KLEEN (TS), INC.
3527 WHISKEY BOTTOM ROAD
LAUREL MD 20724-

Page: 2 Manifest No: NJSMG-00117

This is to certify that hazardous material removed from SULZER METCO

has been disposed of in accordance with all applicable local, state and federal regulations in the following manner.

Container	Date	Location	Method
000117-NJSMG-018	02/02/00	SAFETY-KLEEN (PINEWOOD), INC.	Chemically Secure Landfill
6SMU-009		PINEWOOD SC	
000117-NJSMG-019	02/02/00	SAFETY-KLEEN (PINEWOOD), INC.	Chemically Secure Landfill
6SMU-009		PINEWOOD SC	
000117-NJSMG-020	01/27/00	SAFETY-KLEEN CORPORATION	BTU Recovery
6SMG-023		LINDEN NJ	
000117-NJSMG-023	02/01/00	SAFETY-KLEEN(CHATTANOOGA),INC	Industrial Landfill
6SMU-003		CHATTANOOGA TN	
000117-NJSMG-024	02/02/00	SAFETY-KLEEN (PINEWOOD), INC.	Chemically Secure Landfill
6SMU-009		PINEWOOD SC	
000117-NJSMG-025	02/02/00	SAFETY-KLEEN (PINEWOOD), INC.	Chemically Secure Landfill
6SMU-009		PINEWOOD SC	
000117-NJSMG-026	02/02/00	SAFETY-KLEEN (PINEWOOD), INC.	Chemically Secure Landfill
6SMU-009		PINEWOOD SC	

Brinton H. Hoar
Operations

Date: 04/03/00

METCO *PERKIN ELMER*

Material Safety Data Sheet

METCO PERKIN-ELMER

1101 Prospect Avenue
PO Box 1006
Westbury, NY 11590-0201
Phone: (516) 334-1300

Product: METCO 404, 404NS

MSDS No.: METCO/50-161
Revision No.: 4
Revision Date: February 3, 1993
Original Date of Issue: August 15, 1989

EMERGENCY CONTACT: CHEMTREC 800-424-9300
CALLS OUTSIDE THE UNITED STATES: 202-483-7616

SECTION 1 MATERIAL IDENTIFICATION

Trade/Material Name: METCO 404, 404NS

Description: Metal Powder

Other Designation: "NICKEL ALUMINIDE" POWDERS

SECTION II COMPOSITION AND TOXICITY

Composition	%	CAS#	OSHA PEL	ACGIH TLV	Toxicity
Nickel *	80	7440-02-0	1 mg/m³ TWA	1 mg/m³ TWA	
Aluminum *	20	7429-90-5	15 mg/m³ TWA total dust 5 mg/m³ TWA respirable 5 mg/m³ TWA fume	10 mg/m³ TWA metal dust 5 mg/m³ TWA fume	

* Indicates toxic chemical(s) subject to the reporting requirements of Section 313 of Title III of the Superfund Amendments & Reauthorization Act (SARA) & supplier notification requirements (40CFR Part 372).
** Contains no asbestos and <1% crystalline silica.

SECTION III — PHYSICAL DATA

Boiling Point:	N/A	**Specific Gravity (H_2O = 1):**	3.34
Vapor Pressure (mmHg):	N/A	**Melting Point:**	3000° F
Vapor Density (Air=1):	N/A	**Percentage Volatiles:**	N/A
Solubility in water (%):	Negative	**Evaporation Rate:**	N/A
Appearance and Odor:	Powder, no odor	**pH of Solution:**	N/A

SECTION IV — FIRE AND EXPLOSION HAZARD DATA

Flash Point (Method Used):	NONE	**Flammable Limits:**	**LEL %:**	N/A	**UEL%:** N/A

Extinguishing Media: Use Class D Fire Extinguisher.

Special Fire Fighting Procedures: Treat as a metallic fire.

Unusual Fire and Explosive Hazards: Fine metal dusts are flammable and may explode when exposed to heat, flame or oxidizers. Aluminum is a flammable solid, do not expose to water or moisture.

SECTION V — REACTIVITY DATA

Material is stable. Hazardous polymerization will not occur.

Incompatibility (Materials to Avoid): Oxidizers, Acids, Sulfur, $Ni(NO_3)_2$; Combustibles.

Hazardous Decomposition Products: Ozone and nitric acid are formed by the plasma flame (similar to welding fumes). This action is independent of the metal powder.

SECTION VI — HEALTH HAZARD DATA

COMPONENTS	SUMMARY OF RISKS
NICKEL:	Hazard by inhalation and skin contact. Inhalation may cause cancers of the lung and nasal sinuses. Skin contact may cause dermatitis. Nickel is found to be a potential carcinogen in IARC Monographs. Nickel is listed in the NTP Annual Report on Carcinogens. Target Organ(s): Respiratory tract, skin.
ALUMINUM:	Hazard by inhalation, skin and eye contact. Inhalation may cause pneumoconiosis. Pulmonary, skin and eye irritant due to abrasive action. Under normal use/conditions, aluminum oxide may be formed. Target Organ(s): Lungs, skin, eyes.

Medical Conditions Which May be Aggravated by Contact: Consult a physician.

Primary Entry Route(s): Inhalation, ingestion, skin contact.

SECTION VI HEALTH HAZARD DATA CONTINUED

SIGNS AND SYMPTOMS OF OVEREXPOSURE

Eye Contact: Irritation.

Skin Contact: Possible dermatitis

Inhalation: Irritation, pneumoconiosis.

Ingestion: Possible irritation.

FIRST AID

Eye Contact: Flush eye with sufficient amounts of water. If irritation persists, consult a physician.

Skin Contact: Wash with soap and water.

Inhalation: Expose to fresh air. Consult a physician if irritation or respiratory distress persists.

Ingestion: Consult a physician.

SECTION VII SPILL, LEAK AND DISPOSAL PROCEDURES

Spill/Leak Procedures: Vacuum loose powder only with vacuums equipped with HEPA filtration. Vacuums appropriate for use with metallic dusts should be utilized. Wipe the area clean. Do not use water for clean up operations. Do not sweep. Avoid generating airborne dust.

Waste Management and Disposal: Empty product containers, product waste, and cleaning media should be stored and disposed of according to the appropriate local, state, and federal regulatory guidelines.

SECTION VIII SPECIAL PROTECTION INFORMATION

PERSONAL PROTECTIVE EQUIPMENT

Goggles: The following lens shades are recommended for the process indicated. Combustion spraying shade #5, plasma spraying up to 40 kW shade #9, 40-60 kW shade #10, and greater than 60 kW shade #11. Goggles may be appropriate to avoid eye irritation during other phases of product handling.

Gloves: Aluminized gloves are to be worn during the plasma spray process. Rubber or other appropriategloves may be worn as necessary during other phases of product handling to avoid excessive contact with skin.

Respirator: A respirator approved by NIOSH with filter cartridges approved for dust/fumes/mists should be worn at all times during the thermal spray process to protect the operator from exposure to dust and fumes. Respirators may also be worn when product handling.

Clothing/Equipment: Ear protection must be worn when the operator is subjected to excessive noise levels (refer to the appropriate regulatory guidelines). An aluminized apron is to be worn during the plasma spray process. Other appropriate protective clothing may be worn as necessary during product handling to avoid excessive contact with the skin.

SECTION VIII SPECIAL PROTECTION INFORMATION

WORKPLACE CONSIDERATIONS

Ventilation: Product should be used with the appropriate local exhaust ventilation provided.

Safety Stations: Eye wash station(s) is/are recommended.

Other: Wash facilities are recommended.

SECTION IX HANDLING AND STORAGE PRECAUTIONS

Storage/Handling: Store away from incompatibles. Store product containers in a well-ventilated, clean, cool, and dry area. Store in a manner to minimize punctures and breakage of containers.

Other Precautions: Avoid ingestion, inhalation, and excessive skin contact. Avoid contact of powder with water and oxidizers.

While this information is furnished in good faith, no guaranty is made as to accuracy. This material is for the Thermal Spraying Process, and relevant instructions should be consulted before use. The user assumes all risk in connection with the use of this material. METCO PERKIN-ELMER shall in no event be liable for special, incidental or consequential damages in connection with this information, or for any damage or injury caused by this material if used for any other purpose than the Thermal Spray Process, or if proper safety and health practices are not followed.

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0398
RUN DATE: 08/03/93

C 282200 1828 00027 W I
LOCATION FAC EP

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

PAGE 2
CONTINUED FROM PREVIOUS PAGE

NOTE - SHOULD NEW EVIDENCE REQUIRE LOWER AMBIENT LEVELS BE MET FOR THE ABOVE UNDERSCORED CAS NUMBER(S), THE SOURCE OWNER MAY BE REQUIRED TO REDUCE EMISSIONS.

GENERAL CONDITIONS

1. SHOULD SIGNIFICANT NEW SCIENTIFIC EVIDENCE FROM A RECOGNIZED INSTITUTION RESULT IN A DECISION BY DEC THAT LOWER AMBIENT POLLUTION LEVELS MUST BE ESTABLISHED, IT MAY BE NECESSARY TO REDUCE EMISSIONS FROM THIS SOURCE PRIOR TO THE EXPIRATION OF THIS CERTIFICATE TO OPERATE.

SPECIAL CONDITIONS (151)CONDITION 1. AG-1 COMPLIANCE REQUIRED

PROCESSING FEE # 75

(15)PRIOR COMMENTS (16)BY 428VSI (17)DATE 09/07/91	(18)CURRENT COMMENTS (19)BY 428 VSI (20)DATE 10/21/93	(27)LAST INSPECTION DATE 10/21/93
1.	1. 4th PM EXCEEDS AGL	(21)INSPECTION STATUS 4
2.	2.	(22)DATE OF NEXT ACTION 11/15/93
3.	3.	(23)ISSUE DATE / /
4.	4.	(24)EXPIRATION DATE / /
5.	5.	(25)CO FEE

FIRM REP'S SIGNATURE: Joseph Maen DATE: 10/21/93 ISSUING OFFICER'S SIGNATURE: Marlena M. Hamann DATE: JAN 10 1994

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0397
RUN DATE: 08/03/93

C 282200 1828 00027 W I
LOCATION FAC EP

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

FACILITY EMIS-CLASS / PGM-CODE: A2 POINT EMIS-CLASS / PGM-CODE:

EMISSION POINT 00027
(41)UTM-E: 622.2 KM. (42)STACK HEIGHT: 34 FT. (43)EXIT VELOCITY: 50.00 FT/SEC (44)SIC: 3569 (45)AGENCY-CODE-1: C (COUNTY)
(46)UTM-N: 513.4 KM. (47)HT ABV STRUC: 13 FT. (48)EXIT FLOW: 1975.00 ACFM (49)CO FEE: $75.00 (50)AGENCY-CODE-2: C (COUNTY)
(51)GRND ELEV: 140 FT. (52)STK DIAM: 11 IN. (53)EXIT TEMP: 70 DEGR F (54)CO CONDITIONS: 1 3 EDIT: REV. REQ.

UNIT I
(55)HOURS/DAY: 1.0 (56)DAYS/YEAR: 231 (57)% OP BY SEASON: 25 25 25 25 (58)SOURCE CODE: 1303 SPRAYING (OTHER THAN
(59)BLDG: (60)FLOOR NAME: (61)RULE 1: 212.00 (62)RULE 2:

PROCESS/UNIT DESCRIPTION (72)DESCRIPTION 1. THIS UNIT PROVIDES VENTILATION FOR A SPRAY BOOTH USED
2. FOR TESTING POWDERS.

CONTROL EQUIPMENT (73)TYPE: 098 OTHER (74)MFG: METCO WET COLLECTOR, 4CW (75)ID: 27 (76)DATE INSTALLED: 07/76
(77)DISPOSAL METHOD: 06 SOLD (78)USEFUL LIFE: 20 YEARS

CONTROL EQUIPMENT (79)TYPE: 012 IMPINGEMENT PLATE (80)MFG: IMPINGEMENT PLATE (81)ID: 28 (82)DATE INSTALLED: 07/76
(83)DISPOSAL METHOD: 06 SOLD (84)USEFUL LIFE: 20 YEARS

AIR CONTAMINANTS	CAS NUMBER	ENV RATING	EMISSIONS ACTUAL	UNIT	HOW DET	PERMISSIBLE	% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR	ANNUAL EMISSIONS (LBS/YEAR) ACTUAL	10x	PERMISSIBLE
NICKEL AS METAL	(085) 07440-02-0	(086) A	(087) .049	(088) 01	(089) 06	(090) .049	(091) 95.0	(092) .049	(093) 1.132	(094) 1	(095) 1.132
COBALT	(096) 07440-48-4	(097) B	(098) .006	(099) 01	(100) 06	(101) .006	(102) 95.0	(103) .006	(104) 1.320	(105) 0	(106) 1.320
MOLYBDENUM (8CI9CI)	(107) 07439-98-7	(108) C	(109) .043	(110) 01	(111) 06	(112) .043	(113) 95.0	(114) .043	(115) 9.930	(116) 0	(117) 9.930
TITANIUM OXIDE	(118) 13463-67-7	(119) C	(120) .011	(121) 01	(122) 06	(123) .011	(124) 95.0	(125) .011	(126) 2.540	(127) 0	(128) 2.540
CHROMIUM VI	(129) 07440-47-3	(130) A	(131) .004	(132) 01	(133) 06	(134) .004	(135) 95.0	(136) .004	(137) 9.240	(138) -1	(139) 9.240
BORON NITRIDE	(140) 10043-11-5	(141) C	(142) .500	(143) 02	(144) 06	(145) .500	(146) 95.0	(147) .001	(148) 1.150	(149) -1	(150) 1.150
CONTINUATION FORM J											
TUNGSTEN CARBIDE	(085) 12070-12-1	(086) B	(087) .014	(088) 01	(089) 06	(090) .014	(091) 95.0	(092) .014	(093) 3.230	(094) 0	(095) 3.230
COPPER	(096) 07440-50-8	(097) C	(098) .004	(099) 01	(100) 06	(101) .004	(102) 95.0	(103) .004	(104) 9.240	(105) -1	(106) 9.240
CHROMIUM OXIDE	(107) 01308-38-9	(108) B	(109) .009	(110) 01	(111) 06	(112) .009	(113) 95.0	(114) .009	(115) 2.080	(116) 0	(117) 2.080
IRON	(118) 07439-89-6	(119) C	(120) .005	(121) 01	(122) 06	(123) .005	(124) 95.0	(125) .005	(126) 1.160	(127) 0	(128) 1.160
ALUMINUM OXIDE	(129) 01344-28-1	(130) C	(131) .008	(132) 01	(133) 06	(134) .008	(135) 95.0	(136) .008	(137) 1.850	(138) 0	(139) 1.850
PARTICULATES	(140) NY075-00-0	(141) B	(142) .230	(143) 01	(144) 06	(145) .230	(146) 95.0	(147) .230	(148) 5.313	(149) 1	(150) 5.313

CONTINUED ON NEXT PAGE

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0399
RUN DATE: 08/03/93

C 282200 1828 00027 W I
LOCATION FAC EP

T O X I C I T Y A N A L Y S I S

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

EMISSION POINT 00027						
(41)UTM-E: 622.2 KM.	(42)STACK HEIGHT: 34 FT.	(43)EXIT VELOCITY: 50.00 FT/SEC	RATIO STK HT / BLDG HT: 1.61
(46)UTM-N: 513.4 KM.	(47)HT ABV STRUC: 13 FT.	(48)EXIT FLOW: 1975.00 ACFM	PLUME RISE: NA FT.
(51)GRND ELEV: 140 FT.	(52)STK DIAM: 11 IN.	(53)EXIT TEMP: 70 DEGR F	EFFECTIVE STACK HEIGHT: 34.00 FT.

N O T E - S O U R C E C O D E I N D I C A T E S C A S E S P E C I F I C E X A M I N A T I O N N E C E S S A R Y

AIR CONTAMINANTS		CAS NUMBER	EMISSIONS ACTUAL		UNIT	PERMISSIBLE		% CONTROL EFFICIENCY		HRLY ACTUAL LBS/HOUR		AAL DATA (UG/M3) AAL	TOXIC LVL	SOURCE	MAX CALC AMB LEVEL	REMARKS
NICKEL AS METAL	(085)	07440-02-0	(087)	.049	(088) 01	(090)	.049	(091)	95.0	(092)	.049	.0042	HIGH		.10169	AAL EXCEEDED
COBALT	(096)	07440-48-4	(098)	.006	(099) 01	(101)	.006	(102)	95.0	(103)	.006	.12	MODERATE		.012	SEE NOTE ABV
MOLYBDENUM (8CI9CI)	(107)	07439-98-7	(109)	.043	(110) 01	(112)	.043	(113)	95.0	(114)	.043					
TITANIUM OXIDE	(118)	13463-67-7	(120)	.011	(121) 01	(123)	.011	(124)	95.0	(125)	.011					
CHROMIUM VI	(129)	07440-47-3	(131)	.004	(132) 01	(134)	.004	(135)	95.0	(136)	.004	.00008	HIGH	FEDERAL	.008301	AAL EXCEEDED
BORON NITRIDE	(140)	10043-11-5	(142)	.500	(143) 02	(145)	.500	(146)	95.0	(147)	.001					
CONTINUATION FORM J																
TUNGSTEN CARBIDE	(085)	12070-12-1	(087)	.014	(088) 01	(090)	.014	(091)	95.0	(092)	.014					
COPPER	(096)	07440-50-8	(098)	.004	(099) 01	(101)	.004	(102)	95.0	(103)	.004	2.3999	LOW		.00830	SEE NOTE ABV
CHROMIUM OXIDE	(107)	01308-38-9	(109)	.009	(110) 01	(112)	.009	(113)	95.0	(114)	.009	1.1999				
IRON	(118)	07439-89-6	(120)	.005	(121) 01	(123)	.005	(124)	95.0	(125)	.005					
ALUMINUM OXIDE	(129)	01344-28-1	(131)	.008	(132) 01	(134)	.008	(135)	95.0	(136)	.008					
PARTICULATES	(140)	NY075-00-0	(142)	.230	(143) 01	(145)	.230	(146)	95.0	(147)	.230	64		FEDERAL		

E N D O F T O X I C I T Y A N A L Y S I S

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0400
RUN DATE: 08/03/93

C 282200 1828 00027 W I
LOCATION FAC EP

E R R O R A N A L Y S I S

N O N - M I N O R

O W N E R	F A C I L I T Y	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

FORM TYPE	LINE NUMBER	BOX NUMBER	ERROR NUMBER	FATAL/ WARNING FLAG	DESCRIPTION	SIZE OF FIELD
I		059	0430	W	BUILDING NAME OR NUMBER NOT SPECIFIED	
I		060	0435	W	FLOOR NAME OR NUMBER NOT SPECIFIED	
I			0440	W	START-UP DATE NOT SPECIFIED	
I	1	085	0982	W	MCAL (MAX CALC AMBIENT LEVEL) EXCEEDS AAL	
I	5	129	0982	W	MCAL (MAX CALC AMBIENT LEVEL) EXCEEDS AAL	

E N D O F E R R O R A N A L Y S I S

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0402
RUN DATE: 08/03/93

C 282200 1828 00028 W I
LOCATION FAC EP

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

PAGE 2
CONTINUED FROM PREVIOUS PAGE

NOTE - SHOULD NEW EVIDENCE REQUIRE LOWER AMBIENT LEVELS BE MET FOR THE ABOVE UNDERSCORED CAS NUMBER(S), THE SOURCE OWNER MAY BE REQUIRED TO REDUCE EMISSIONS.

GENERAL CONDITIONS

1. SHOULD SIGNIFICANT NEW SCIENTIFIC EVIDENCE FROM A RECOGNIZED INSTITUTION RESULT IN A DECISION BY DEC THAT LOWER AMBIENT POLLUTION LEVELS MUST BE ESTABLISHED, IT MAY BE NECESSARY TO REDUCE EMISSIONS FROM THIS SOURCE PRIOR TO THE EXPIRATION OF THIS CERTIFICATE TO OPERATE.

SPECIAL CONDITIONS (151)CONDITION 1. AG-1 COMPLIANCE REQUIRED

PROCESSING FEE # 75

(15)PRIOR COMMENTS (16)BY 428VSI (17)DATE 09/07/91	(18)CURRENT COMMENTS (19)BY 428 VSI (20)DATE 10/21/93	(27)LAST INSPECTION DATE 10/21/93
1.	1. 4:19 PM EXCEEDS AGC	(21)INSPECTION STATUS 4
2.	2.	(22)DATE OF NEXT ACTION 11/15/94
3.	3.	(23)ISSUE DATE / /
4.	4.	(24)EXPIRATION DATE / /
5.	5.	(25)CO FEE

FIRM REP'S SIGNATURE: Joseph Macri DATE: 10/21/93 ISSUING OFFICER'S SIGNATURE: Marlena M. Hamann DATE: JAN 10 1994

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0401
RUN DATE: 08/03/93

C 282200 1828 00028 W I
LOCATION FAC EP

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

FACILITY EMIS-CLASS / PGM-CODE: A2 POINT EMIS-CLASS / PGM-CODE:

EMISSION POINT 00028
(41)UTM-E: 622.2 KM. (42)STACK HEIGHT: 34 FT. (43)EXIT VELOCITY: 50.00 FT/SEC (44)SIC: 3569 (45)AGENCY-CODE-1: C (COUNTY)
(46)UTM-N: 513.4 KM. (47)HT ABV STRUC: 13 FT. (48)EXIT FLOW: 1975.00 ACFM (49)CO FEE: $75.00 (50)AGENCY-CODE-2: C (COUNTY)
(51)GRND ELEV: 140 FT. (52)STK DIAM: 11 IN. (53)EXIT TEMP: 70 DEGR F (54)CO CONDITIONS: 1 3 EDIT: REV. REQ.

UNIT I
(55)HOURS/DAY: 2.5 (56)DAYS/YEAR: 231 (57)% OP BY SEASON: 25 25 25 25 (58)SOURCE CODE: 1309 ELECTROPLATING
(59)BLDG: 1101 (60)FLOOR NAME: (61)RULE 1: 212.00 (62)RULE 2:

PROCESS/UNIT DESCRIPTION (72)DESCRIPTION 1. THIS UNIT PROVIDES VENTILATION FOR A SPRAY BOOTH
2. USED FOR TESTING POWDERS.

CONTROL EQUIPMENT (73)TYPE: 098 OTHER (74)MFG: METCO WET COLLECTOR, 4CW (75)ID: 28 (76)DATE INSTALLED: 02/91
(77)DISPOSAL METHOD: 06 SOLD (78)USEFUL LIFE: 20 YEARS

CONTROL EQUIPMENT (79)TYPE: 012 IMPINGEMENT PLATE (80)MFG: IMPINGEMENT PLATE (81)ID: 29 (82)DATE INSTALLED: 02/91
(83)DISPOSAL METHOD: 06 SOLD (84)USEFUL LIFE: 20 YEARS

AIR CONTAMINANTS	CAS NUMBER	ENV RATING	EMISSIONS ACTUAL	UNIT	HOW DET	PERMISSIBLE	% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR	ANNUAL EMISSIONS (LBS/YEAR) ACTUAL	10x	PERMISSIBLE
NICKEL AS METAL	(085) 07440-02-0	(086) A	(087) .049	(088) 01	(089) 06	(090) .049	(091) 95.0	(092) .049	(093) 2.832	(094) 1	(095) 2.832
COBALT	(096) 07440-48-4	(097) B	(098) .006	(099) 01	(100) 06	(101) .006	(102) 95.0	(103) .006	(104) 3.290	(105) 0	(106) 3.290
MOLYBDENUM (8CI9CI)	(107) 07439-98-7	(108) C	(109) .043	(110) 01	(111) 06	(112) .043	(113) 95.0	(114) .043	(115) 2.485	(116) 1	(117) 2.485
TITANIUM OXIDE	(118) 13463-67-7	(119) C	(120) .011	(121) 01	(122) 06	(123) .011	(124) 95.0	(125) .011	(126) 6.360	(127) 0	(128) 6.360
CHROMIUM VI	(129) 07440-47-3	(130) A	(131) .004	(132) 01	(133) 06	(134) .004	(135) 95.0	(136) .004	(137) 2.310	(138) 0	(139) 2.310
BORON NITRIDE	(140) 10043-11-5	(141) C	(142) .500	(143) 02	(144) 06	(145) .500	(146) 95.0	(147) .001	(148) 2.900	(149) -1	(150) 2.900
CONTINUATION FORM J											
TUNGSTEN CARBIDE	(085) 12070-12-1	(086) B	(087) .014	(088) 01	(089) 06	(090) .014	(091) 95.0	(092) .014	(093) 8.090	(094) 0	(095) 8.090
COPPER	(096) 07440-50-8	(097) C	(098) .004	(099) 01	(100) 06	(101) .004	(102) 95.0	(103) .004	(104) 2.310	(105) 0	(106) 2.310
CHROMIUM OXIDE	(107) 01308-38-9	(108) B	(109) .009	(110) 01	(111) 06	(112) .009	(113) 95.0	(114) .009	(115) 5.200	(116) 0	(117) 5.200
IRON	(118) 07439-89-6	(119) C	(120) .005	(121) 01	(122) 06	(123) .005	(124) 95.0	(125) .005	(126) 2.890	(127) 0	(128) 2.890
ALUMINUM OXIDE	(129) 01344-28-1	(130) C	(131) .008	(132) 01	(133) 06	(134) .008	(135) 95.0	(136) .008	(137) 4.620	(138) 0	(139) 4.620
PARTICULATES	(140) NY075-00-0	(141) B	(142) .230	(143) 01	(144) 06	(145) .230	(146) 95.0	(147) .230	(148) 1.329	(149) 2	(150) 1.329

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P2SHL001166

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0403
RUN DATE: 08/03/93

C 282200 1828 00028 W I
LOCATION FAC EP

T O X I C I T Y A N A L Y S I S

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

EMISSION POINT 00028

(41)UTM-E: 622.2 KM. (42)STACK HEIGHT: 34 FT. (43)EXIT VELOCITY: 50.00 FT/SEC RATIO STK HT / BLDG HT: 1.61
(46)UTM-N: 513.4 KM. (47)HT ABV STRUC: 13 FT. (48)EXIT FLOW: 1975.00 ACFM PLUME RISE: NA FT.
(51)GRND ELEV: 140 FT. (52)STK DIAM: 11 IN. (53)EXIT TEMP: 70 DEGR F EFFECTIVE STACK HEIGHT: 34.00 FT.

AIR CONTAMINANTS	CAS NUMBER	EMISSIONS ACTUAL	UNIT	PERMISSIBLE	% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR	AAL DATA (UG/M3) AAL	TOXIC LVL	SOURCE	MAX CALC AMB LEVEL	REMARKS
NICKEL AS METAL	(085) 07440-02-0	(087) .049	(088) 01	(090) .049	(091) 95.0	(092) .049	.0042	HIGH		.10169	AAL EXCEEDED
COBALT	(096) 07440-48-4	(098) .006	(099) 01	(101) .006	(102) 95.0	(103) .006	.12	MODERATE		.012	
MOLYBDENUM (8CI9CI)	(107) 07439-98-7	(109) .043	(110) 01	(112) .043	(113) 95.0	(114) .043					
TITANIUM OXIDE	(118) 13463-67-7	(120) .011	(121) 01	(123) .011	(124) 95.0	(125) .011					
CHROMIUM VI	(129) 07440-47-3	(131) .004	(132) 01	(134) .004	(135) 95.0	(136) .004	.00008	HIGH	FEDERAL	.008301	AAL EXCEEDED
BORON NITRIDE	(140) 10043-11-5	(142) .500	(143) 02	(145) .500	(146) 95.0	(147) .001					
CONTINUATION FORM J											
TUNGSTEN CARBIDE	(085) 12070-12-1	(087) .014	(088) 01	(090) .014	(091) 95.0	(092) .014					
COPPER	(096) 07440-50-8	(098) .004	(099) 01	(101) .004	(102) 95.0	(103) .004	2.3999	LOW		.00830	
CHROMIUM OXIDE	(107) 01308-38-9	(109) .009	(110) 01	(112) .009	(113) 95.0	(114) .009	1.1999				
IRON	(118) 07439-89-6	(120) .005	(121) 01	(123) .005	(124) 95.0	(125) .005					
ALUMINUM OXIDE	(129) 01344-28-1	(131) .008	(132) 01	(134) .008	(135) 95.0	(136) .008					
PARTICULATES	(140) NY075-00-0	(142) .230	(143) 01	(145) .230	(146) 95.0	(147) .230	64		FEDERAL		

E N D O F T O X I C I T Y A N A L Y S I S

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0404
RUN DATE: 08/03/93

C 282200 1828 00028 W I
LOCATION FAC EP

E R R O R A N A L Y S I S

N O N - M I N O R

O W N E R	F A C I L I T Y	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

FORM TYPE	LINE NUMBER	BOX NUMBER	ERROR NUMBER	FATAL/ WARNING FLAG	DESCRIPTION	SIZE OF FIELD
I		060	0435	W	FLOOR NAME OR NUMBER NOT SPECIFIED	
I	1	085	0982	W	MCAL (MAX CALC AMBIENT LEVEL) EXCEEDS AAL	
I	5	129	0982	W	MCAL (MAX CALC AMBIENT LEVEL) EXCEEDS AAL	

E N D O F E R R O R A N A L Y S I S

EPA

OMB No. 2050-0075

RESEARCH TRIANGLE INSTITUTE

Renae M. Clawson
Center for Economics Research

Telephone: 919 541-6764
PO Box 12194 Research Triangle Park, NC 27709-2194

Constance:
Please complete QGG & QGI and return to Renae Clawson at the address given on card attached to GG.
Thy
J. F. LACOUNT
(919) 541-6733

y of ste Generators

ONNAIRE GG

SOLVENT AND LIQUID ORGANIC ; RECOVERY FOR REUSE JSE

RTI ID: 128108
EPA ID: NYD057731663

(RTI will place facility label here)

RECD 04-18-89

RESEARCH TRIANGLE INSTITUTE

Post Office Box 12194 Research Triangle Park, North Carolina 27709-2194

PERKIN ELMER CORP, METCO DIV.
325 DUFFY AVE
HICKSVILLE, NY [redacted] 11801
ATTN: MS. CONSTANCE CONROY

EPA

OMB No. 2050-0075
Expires November 1989

National Survey of Hazardous Waste Generators

QUESTIONNAIRE GI

TANK SYSTEMS

RTI ID: 128108
EPA ID: NYD057731663

(RTI will place facility label here)

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0418
RUN DATE: 08/03/93

C 282200 1828 00032 W I
LOCATION FAC EP

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

PAGE 2
CONTINUED FROM PREVIOUS PAGE

NOTE - SHOULD NEW EVIDENCE REQUIRE LOWER AMBIENT LEVELS BE MET FOR THE ABOVE UNDERSCORED CAS NUMBER(S), THE SOURCE OWNER MAY BE REQUIRED TO REDUCE EMISSIONS.

GENERAL CONDITIONS

1. SHOULD SIGNIFICANT NEW SCIENTIFIC EVIDENCE FROM A RECOGNIZED INSTITUTION RESULT IN A DECISION BY DEC THAT LOWER AMBIENT POLLUTION LEVELS MUST BE ESTABLISHED, IT MAY BE NECESSARY TO REDUCE EMISSIONS FROM THIS SOURCE PRIOR TO THE EXPIRATION OF THIS CERTIFICATE TO OPERATE.

SPECIAL CONDITIONS (151)CONDITION 1. AG-1 COMPLIANCE REQUIRED

PROCESSING FEE # 75

(15)PRIOR COMMENTS (16)BY 428VSI (17)DATE 09/07/91	(18)CURRENT COMMENTS (19)BY 428 VSI (20)DATE 10 12/93	
1.	1. 4th PM EXCEEDS AGC	(27)LAST INSPECTION DATE 10/21/93
2.	2.	(21)INSPECTION STATUS 4
3.	3.	(22)DATE OF NEXT ACTION 11/15/94
4.	4.	(23)ISSUE DATE / /
5.	5.	(24)EXPIRATION DATE / /
		(25)CO FEE

FIRM REP'S SIGNATURE: Joseph Mann DATE: 10/21/93

ISSUING OFFICER'S SIGNATURE: Marlena M. Hamann DATE: JAN 10 1994

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0417
RUN DATE: 08/03/93

C 282200 1828 00032 W I
LOCATION FAC EP

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

FACILITY EMIS-CLASS / PGM-CODE: A2 POINT EMIS-CLASS / PGM-CODE:

EMISSION POINT 00032
(41)UTM-E: 622.2 KM. (42)STACK HEIGHT: 34 FT. (43)EXIT VELOCITY: 50.00 FT/SEC (44)SIC: 3569 (45)AGENCY-CODE-1: C (COUNTY)
(46)UTM-N: 513.4 KM. (47)HT ABV STRUC: 13 FT. (48)EXIT FLOW: 1975.00 ACFM (49)CO FEE: $75.00 (50)AGENCY-CODE-2: C (COUNTY)
(51)GRND ELEV: 140 FT. (52)STK DIAM: 11 IN. (53)EXIT TEMP: 70 DEGR F (54)CO CONDITIONS: 1 3 EDIT: REV. REQ.

UNIT I
(55)HOURS/DAY: 2.5 (56)DAYS/YEAR: 231 (57)% OP BY SEASON: 25 25 25 25 (58)SOURCE CODE: 1308 OTHER SURFACE COATIN
(59)BLDG: 1101 (60)FLOOR NAME: (61)RULE 1: 212.00 (62)RULE 2:

PROCESS/UNIT DESCRIPTION
(72)DESCRIPTION 1. THIS UNIT PROVIDES VENTILATION FOR A SPRAY BOOTH
2. USED FOR TESTING POWDERS.

CONTROL EQUIPMENT
(73)TYPE: 098 OTHER (74)MFG: METCO WET COLLECTOR, 4CW (75)ID: 32 (76)DATE INSTALLED: 06/78
(77)DISPOSAL METHOD: 06 SOLD (78)USEFUL LIFE: 20 YEARS

CONTROL EQUIPMENT
(79)TYPE: 012 IMPINGEMENT PLATE (80)MFG: IMPINGEMENT PLATE (81)ID: 33 (82)DATE INSTALLED: 06/78
(83)DISPOSAL METHOD: 06 SOLD (84)USEFUL LIFE: 20 YEARS

AIR CONTAMINANTS	CAS NUMBER	ENV RATING	EMISSIONS ACTUAL	UNIT	HOW DET	PERMISSIBLE	% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR	ANNUAL EMISSIONS (LBS/YEAR) ACTUAL	10x	PERMISSIBLE
NICKEL AS METAL	(085) 07440-02-0	(086) A	(087) .049	(088) 01	(089) 06	(090) .049	(091) 95.0	(092) .049	(093) 2.832	(094) 1	(095) 2.832
COBALT	(096) 07440-48-4	(097) B	(098) .006	(099) 01	(100) 06	(101) .006	(102) 95.0	(103) .006	(104) 3.290	(105) 0	(106) 3.290
MOLYBDENUM (8CI9CI)	(107) 07439-98-7	(108) C	(109) .043	(110) 01	(111) 06	(112) .043	(113) 95.0	(114) .043	(115) 2.485	(116) 1	(117) 2.485
TITANIUM OXIDE	(118) 13463-67-7	(119) C	(120) .011	(121) 01	(122) 06	(123) .011	(124) 95.0	(125) .011	(126) 6.360	(127) 0	(128) 6.360
CHROMIUM VI	(129) 07440-47-3	(130) A	(131) .004	(132) 01	(133) 06	(134) .004	(135) 95.0	(136) .004	(137) 2.310	(138) 0	(139) 2.310
BORON NITRIDE	(140) 10043-11-5	(141) C	(142) .500	(143) 02	(144) 06	(145) .500	(146) 95.0	(147) .001	(148) 2.900	(149) -1	(150) 2.900
CONTINUATION FORM J											
TUNGSTEN CARBIDE	(085) 12070-12-1	(086) B	(087) .014	(088) 01	(089) 06	(090) .014	(091) 95.0	(092) .014	(093) 8.090	(094) 0	(095) 8.090
COPPER	(096) 07440-50-8	(097) C	(098) .004	(099) 01	(100) 06	(101) .004	(102) 95.0	(103) .004	(104) 2.310	(105) 0	(106) 2.310
CHROMIUM OXIDE	(107) 01308-38-9	(108) B	(109) .009	(110) 01	(111) 06	(112) .009	(113) 95.0	(114) .009	(115) 5.200	(116) 0	(117) 5.200
IRON	(118) 07439-89-6	(119) C	(120) .005	(121) 01	(122) 06	(123) .005	(124) 95.0	(125) .005	(126) 2.890	(127) 0	(128) 2.890
ALUMINUM OXIDE	(129) 01344-28-1	(130) C	(131) .008	(132) 01	(133) 06	(134) .008	(135) 95.0	(136) .008	(137) 4.620	(138) 0	(139) 4.620
PARTICULATES	(140) NY075-00-0	(141) B	(142) .230	(143) 01	(144) 06	(145) .230	(146) 95.0	(147) .230	(148) 1.329	(149) 2	(150) 1.329

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N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0419
RUN DATE: 08/03/93

C 282200 1828 00032 W I
LOCATION FAC EP

T O X I C I T Y A N A L Y S I S

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

EMISSION POINT 00032						
(41)UTM-E: 622.2 KM.	(42)STACK HEIGHT: 34 FT.	(43)EXIT VELOCITY: 50.00 FT/SEC	RATIO STK HT / BLDG HT: 1.61
(46)UTM-N: 513.4 KM.	(47)HT ABV STRUC: 13 FT.	(48)EXIT FLOW: 1975.00 ACFM	PLUME RISE: NA FT.
(51)GRND ELEV: 140 FT.	(52)STK DIAM: 11 IN.	(53)EXIT TEMP: 70 DEGR F	EFFECTIVE STACK HEIGHT: 34.00 FT.

AIR CONTAMINANTS	CAS NUMBER	EMISSIONS ACTUAL	UNIT	PERMISSIBLE	% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR	AAL DATA (UG/M3) AAL	TOXIC LVL	SOURCE	MAX CALC AMB LEVEL	REMARKS
NICKEL AS METAL	(085) 07440-02-0	(087) .049	(088) 01	(090) .049	(091) 95.0	(092) .049	.0042	HIGH		.10169	AAL EXCEEDED
COBALT	(096) 07440-48-4	(098) .006	(099) 01	(101) .006	(102) 95.0	(103) .006	.12	MODERATE		.012	
MOLYBDENUM (8CI9CI)	(107) 07439-98-7	(109) .043	(110) 01	(112) .043	(113) 95.0	(114) .043					
TITANIUM OXIDE	(118) 13463-67-7	(120) .011	(121) 01	(123) .011	(124) 95.0	(125) .011					
CHROMIUM VI	(129) 07440-47-3	(131) .004	(132) 01	(134) .004	(135) 95.0	(136) .004	.00008	HIGH	FEDERAL	.008301	AAL EXCEEDED
BORON NITRIDE	(140) 10043-11-5	(142) .500	(143) 02	(145) .500	(146) 95.0	(147) .001					
CONTINUATION FORM J											
TUNGSTEN CARBIDE	(085) 12070-12-1	(087) .014	(088) 01	(090) .014	(091) 95.0	(092) .014					
COPPER	(096) 07440-50-8	(098) .004	(099) 01	(101) .004	(102) 95.0	(103) .004	2.3999	LOW		.00830	
CHROMIUM OXIDE	(107) 01308-38-9	(109) .009	(110) 01	(112) .009	(113) 95.0	(114) .009	1.1999				
IRON	(118) 07439-89-6	(120) .005	(121) 01	(123) .005	(124) 95.0	(125) .005					
ALUMINUM OXIDE	(129) 01344-28-1	(131) .008	(132) 01	(134) .008	(135) 95.0	(136) .008					
PARTICULATES	(140) NY075-00-0	(142) .230	(143) 01	(145) .230	(146) 95.0	(147) .230	64		FEDERAL		

E N D O F T O X I C I T Y A N A L Y S I S

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0420
RUN DATE: 08/03/93

C 282200 1828 00032 W I
LOCATION FAC EP

E R R O R A N A L Y S I S

N O N - M I N O R

O W N E R	F A C I L I T Y	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

FORM TYPE	LINE NUMBER	BOX NUMBER	ERROR NUMBER	FATAL/ WARNING FLAG	DESCRIPTION	SIZE OF FIELD
I		060	0435	W	FLOOR NAME OR NUMBER NOT SPECIFIED	
I	1	085	0982	W	MCAL (MAX CALC AMBIENT LEVEL) EXCEEDS AAL	
I	5	129	0982	W	MCAL (MAX CALC AMBIENT LEVEL) EXCEEDS AAL	

E N D O F E R R O R A N A L Y S I S

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0422
RUN DATE: 08/03/93

C 282200 1828 00033 W I
LOCATION FAC EP

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

PAGE 2
CONTINUED FROM PREVIOUS PAGE

NOTE - SHOULD NEW EVIDENCE REQUIRE LOWER AMBIENT LEVELS BE MET FOR THE ABOVE UNDERSCORED CAS NUMBER(S), THE SOURCE OWNER MAY BE REQUIRED TO REDUCE EMISSIONS.

GENERAL CONDITIONS

1. SHOULD SIGNIFICANT NEW SCIENTIFIC EVIDENCE FROM A RECOGNIZED INSTITUTION RESULT IN A DECISION BY DEC THAT LOWER AMBIENT POLLUTION LEVELS MUST BE ESTABLISHED, IT MAY BE NECESSARY TO REDUCE EMISSIONS FROM THIS SOURCE PRIOR TO THE EXPIRATION OF THIS CERTIFICATE TO OPERATE.

SPECIAL CONDITIONS (151)CONDITION 1. AG-1 COMPLIANCE REQUIRED

PROCESSING FEE # 75

(15)PRIOR COMMENTS (16)BY 428VSI (17)DATE 09/07/91	(18)CURRENT COMMENTS (19)BY 428 VSI (20)DATE 10/21/93	
1.	1. 4th PM EXCEEDS AGC	(27)LAST INSPECTION DATE 10/21/93
2.	2.	(21)INSPECTION STATUS 4
3.	3.	(22)DATE OF NEXT ACTION 11/15/94
4.	4.	(23)ISSUE DATE / /
5.	5.	(24)EXPIRATION DATE / /
		(25)CO FEE

FIRM REP'S SIGNATURE: Joseph Mauri DATE: 10/21/93 ISSUING OFFICER'S SIGNATURE: Marlena M. Hamann DATE: JAN 10 1994

P2SUL001185

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0421
RUN DATE: 08/03/93

C 282200 1828 00033 W I
LOCATION FAC EP

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

FACILITY EMIS-CLASS / PGM-CODE: A2 POINT EMIS-CLASS / PGM-CODE:

EMISSION POINT 00033
(41)UTM-E: 622.2 KM. (42)STACK HEIGHT: 34 FT. (43)EXIT VELOCITY: 50.00 FT/SEC (44)SIC: 3569 (45)AGENCY-CODE-1: C (COUNTY)
(46)UTM-N: 513.4 KM. (47)HT ABV STRUC: 13 FT. (48)EXIT FLOW: 1975.00 ACFM (49)CO FEE: $75.00 (50)AGENCY-CODE-2: C (COUNTY)
(51)GRND ELEV: 140 FT. (52)STK DIAM: 11 IN. (53)EXIT TEMP: 70 DEGR F (54)CO CONDITIONS: 1 3 EDIT: REV. REQ.

UNIT I
(55)HOURS/DAY: 2.5 (56)DAYS/YEAR: 231 (57)% OP BY SEASON: 25 25 25 25 (58)SOURCE CODE: 1303 SPRAYING (OTHER THAN
(59)BLDG: 1101 (60)FLOOR NAME: (61)RULE 1: 212.00 (62)RULE 2:

PROCESS/UNIT DESCRIPTION
(72)DESCRIPTION 1. THIS UNIT PROVIDES VENTILATION FOR A SPRAY BOOTH
2. USED FOR TESTING POWDERS.

CONTROL EQUIPMENT
(73)TYPE: 098 OTHER (74)MFG: METCO WET COLLECTOR, 4CW (75)ID: 33 (76)DATE INSTALLED: 06/78
(77)DISPOSAL METHOD: 06 SOLD (78)USEFUL LIFE: 20 YEARS

CONTROL EQUIPMENT
(79)TYPE: 012 IMPINGEMENT PLATE (80)MFG: IMPINGEMENT PLATE (81)ID: 34 (82)DATE INSTALLED: 06/78
(83)DISPOSAL METHOD: 06 SOLD (84)USEFUL LIFE: 20 YEARS

AIR CONTAMINANTS	CAS NUMBER	ENV RATING	EMISSIONS ACTUAL	UNIT	HOW DET	PERMISSIBLE	% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR	ANNUAL EMISSIONS (LBS/YEAR) ACTUAL	10×	PERMISSIBLE
NICKEL AS METAL	(085) 07440-02-0	(086) A	(087) .049	(088) 01	(089) 06	(090) .049	(091) 95.0	(092) .049	(093) 2.832	(094) 1	(095) 2.832
COBALT	(096) 07440-48-4	(097) B	(098) .006	(099) 01	(100) 06	(101) .006	(102) 95.0	(103) .006	(104) 3.290	(105) 0	(106) 3.290
MOLYBDENUM (8CI9CI)	(107) 07439-98-7	(108) C	(109) .043	(110) 01	(111) 06	(112) .043	(113) 95.0	(114) .043	(115) 2.485	(116) 1	(117) 2.485
TITANIUM OXIDE	(118) 13463-67-7	(119) C	(120) .011	(121) 01	(122) 06	(123) .011	(124) 95.0	(125) .011	(126) 6.360	(127) 0	(128) 6.360
CHROMIUM VI	(129) 07440-47-3	(130) A	(131) .004	(132) 01	(133) 06	(134) .004	(135) 95.0	(136) .004	(137) 2.310	(138) 0	(139) 2.310
BORON NITRIDE	(140) 10043-11-5	(141) C	(142) .500	(143) 02	(144) 06	(145) .500	(146) 95.0	(147) .001	(148) 2.900	(149) -1	(150) 2.900
CONTINUATION FORM J											
TUNGSTEN CARBIDE	(085) 12070-12-1	(086) B	(087) .014	(088) 01	(089) 06	(090) .014	(091) 95.0	(092) .014	(093) 8.090	(094) 0	(095) 8.090
COPPER	(096) 07440-50-8	(097) C	(098) .004	(099) 01	(100) 06	(101) .004	(102) 95.0	(103) .004	(104) 2.310	(105) 0	(106) 2.310
CHROMIUM OXIDE	(107) 01308-38-9	(108) B	(109) .009	(110) 01	(111) 06	(112) .009	(113) 95.0	(114) .009	(115) 5.200	(116) 0	(117) 5.200
IRON	(118) 07439-89-6	(119) C	(120) .005	(121) 01	(122) 06	(123) .005	(124) 95.0	(125) .005	(126) 2.890	(127) 0	(128) 2.890
ALUMINUM OXIDE	(129) 01344-28-1	(130) C	(131) .008	(132) 01	(133) 06	(134) .008	(135) 95.0	(136) .008	(137) 4.620	(138) 0	(139) 4.620
PARTICULATES	(140) NY075-00-0	(141) B	(142) .230	(143) 01	(144) 06	(145) .230	(146) 95.0	(147) .230	(148) 1.329	(149) 2	(150) 1.329

CONTINUED ON NEXT PAGE

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0423
RUN DATE: 08/03/93

C 282200 1828 00033 W I
LOCATION FAC EP

T O X I C I T Y A N A L Y S I S

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

EMISSION POINT 00033

(41)UTM-E: 622.2 KM. (42)STACK HEIGHT: 34 FT. (43)EXIT VELOCITY: 50.00 FT/SEC RATIO STK HT / BLDG HT: 1.61
(46)UTM-N: 513.4 KM. (47)HT ABV STRUC: 13 FT. (48)EXIT FLOW: 1975.00 ACFM PLUME RISE: NA FT.
(51)GRND ELEV: 140 FT. (52)STK DIAM: 11 IN. (53)EXIT TEMP: 70 DEGR F EFFECTIVE STACK HEIGHT: 34.00 FT.

N O T E - S O U R C E C O D E I N D I C A T E S C A S E S P E C I F I C E X A M I N A T I O N N E C E S S A R Y

AIR CONTAMINANTS	CAS NUMBER	EMISSIONS ACTUAL	UNIT	PERMISSIBLE	% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR	AAL DATA (UG/M3) AAL	TOXIC LVL	SOURCE	MAX CALC AMB LEVEL	REMARKS
NICKEL AS METAL	(085) 07440-02-0	(087) .049	(088) 01	(090) .049	(091) 95.0	(092) .049	.0042	HIGH		.10169	AAL EXCEEDED
COBALT	(096) 07440-48-4	(098) .006	(099) 01	(101) .006	(102) 95.0	(103) .006	.12	MODERATE		.012	SEE NOTE ABV
MOLYBDENUM (8CI9CI)	(107) 07439-98-7	(109) .043	(110) 01	(112) .043	(113) 95.0	(114) .043					
TITANIUM OXIDE	(118) 13463-67-7	(120) .011	(121) 01	(123) .011	(124) 95.0	(125) .011					
CHROMIUM VI	(129) 07440-47-3	(131) .004	(132) 01	(134) .004	(135) 95.0	(136) .004	.00008	HIGH	FEDERAL	.008301	AAL EXCEEDED
BORON NITRIDE	(140) 10043-11-5	(142) .500	(143) 02	(145) .500	(146) 95.0	(147) .001					
CONTINUATION FORM J											
TUNGSTEN CARBIDE	(085) 12070-12-1	(087) .014	(088) 01	(090) .014	(091) 95.0	(092) .014					
COPPER	(096) 07440-50-8	(098) .004	(099) 01	(101) .004	(102) 95.0	(103) .004	2.3999	LOW		.00830	SEE NOTE ABV
CHROMIUM OXIDE	(107) 01308-38-9	(109) .009	(110) 01	(112) .009	(113) 95.0	(114) .009	1.1999				
IRON	(118) 07439-89-6	(120) .005	(121) 01	(123) .005	(124) 95.0	(125) .005					
ALUMINUM OXIDE	(129) 01344-28-1	(131) .008	(132) 01	(134) .008	(135) 95.0	(136) .008					
PARTICULATES	(140) NY075-00-0	(142) .230	(143) 01	(145) .230	(146) 95.0	(147) .230	64		FEDERAL		

E N D O F T O X I C I T Y A N A L Y S I S

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0424
RUN DATE: 08/03/93

C 282200 1828 00033 W I
LOCATION FAC EP

E R R O R A N A L Y S I S

N O N - M I N O R

O W N E R	F A C I L I T Y	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

FORM TYPE	LINE NUMBER	BOX NUMBER	ERROR NUMBER	FATAL/ WARNING FLAG	DESCRIPTION	SIZE OF FIELD
I		060	0435	W	FLOOR NAME OR NUMBER NOT SPECIFIED	
I	1	085	0982	W	MCAL (MAX CALC AMBIENT LEVEL) EXCEEDS AAL	
I	5	129	0982	W	MCAL (MAX CALC AMBIENT LEVEL) EXCEEDS AAL	

E N D O F E R R O R A N A L Y S I S

CycleChem CleanVenture/CycleChem

CVCC 113243

The Environmental Services Source

NON-HAZARDOUS SOLID WASTE

WO #88631

BILL OF LADING

Page 1 of 1 — 24 Hour Emergency Number (908) 354-0210

Generator's Name and Mailing Address: SULZER METCO US INC
1101 PROSPECT AVE
WESTBURY, NY 11590
Generator's Phone ((516) 338-2417

BOL

SAME

Transporter 1 Company Name: CLEAN VENTURE INC.

State Trans. ID-NJDEPE 16755

Decal No.- 08423

Transporter 2 Company Name:

Transporter's Phone ((908) 355-5800

Designated Facility Name and Site Address: Cycle Chem Inc.
217 South First Street
Elizabeth, NJ 07206

10. US EPA ID Number: NJ D 0 0 2 2 0 0 0 4 6

State Trans. ID-NJDEPE

Decal No.-

Transporter's Phone ( )

Facility's Phone ((908) 355-5800

	US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group)	Containers No.	Type	Total Quantity	Unit Wt/Vol	Waste No.
a.	NON REGULATED MATERIAL (EMPTY DRUMS) Non-RCRA Non-DOT	1	D M	45	P	
b.						
c.						
d.						

SULZER METCO (US) INC.
JUL 27 2008
EHS DEPARTMENT

J. Additional Descriptions for Materials Listed Above

a. c.

b. d.

47

CCI Generator # and Product Codes: 945948/-1/88631/234406 (1)MT-42 EMPTY DRUMS

Plate # T57-N9FNJ

GENERATOR

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and are non-hazardous by USEPA & applicable state regulations.

PLACARDS REQUIRED — PLACARDS SUPPLIED ☐ YES ☐ NO- FURNISHED BY CARRIER

Printed/Typed Name: X Jim Kourkoumelis — Signature: X — Month/Day/Year: 07/16/08

TRANSPORTER

Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Kevin Howard — Signature — Month/Day/Year: 07/16/08

Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month/Day/Year

FACILITY

Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest.

Printed/Typed Name: Alicia Gibson — Signature — Month/Day/Year: 7/17/08

SIGNATURE AND INFORMATION *MUST* BE LEGIBLE ON ALL COPIES

CleanVenture/CycleChem

CVCC 113243

The Environmental Services Source

NON-HAZARDOUS SOLID WASTE

BILL OF LADING

Page 1 of 1

24 Hour Emergency Number (908) 354-0210

Generator's Name and Mailing Address: SULZER METCO US INC
1101 PROSPECT AVE
WESTBURY, NY 11590
Generator's Phone ((516) 338-2417

BOL

SAME

Transporter 1 Company Name: CLEAN VENTURE INC.

State Trans. ID-NJDEPE: 16755

Decal No.- 08423

Transporter's Phone ((908) 355-5800

Transporter 2 Company Name:

State Trans. ID-NJDEPE:

Decal No.-

Transporter's Phone ( )

Designated Facility Name and Site Address: Cycle Chem Inc.
217 South First Street
Elizabeth, NJ 07206

10. US EPA ID Number: NJD002200046

Facility's Phone ((908) 355-5800

	US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group)	Containers No.	Containers Type	Total Quantity	Unit Wt/Vol	Waste No.
a.	NON REGULATED MATERIAL (EMPTY DRUMS) Non-RCRA Non-DOT	1	D M	45	P	
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

a.

b.

c.

d.

CCI Generator # and Product Codes: 945948/-1/88631/234406 (1)MT-42 EMPTY DRUMS

Plate# T57-N9FNJ

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and are non-hazardous by USEPA & applicable state regulations.

PLACARDS REQUIRED

PLACARDS SUPPLIED ☐ YES ☐ NO- FURNISHED BY CARRIER

GENERATOR

Printed/Typed Name: Jim Kourkoumelis | Signature: | Month Day Year: 07/16/08

TRANSPORTER

Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Kevin Howard | Signature: | Month Day Year: 07/16/08

Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: | Signature: | Month Day Year:

FACILITY

Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest.

Printed/Typed Name: | Signature: | Month Day Year:

SIGNATURE AND INFORMATION *MUST* BE LEGIBLE ON ALL COPIES

COPY 1 - WHITE - GENERATOR COPY 2 - PINK - TRANSPORTER COPY 3 - BLUE - CycleChem COPY 4 - CANARY - FACILITY

WASTE DRUM INVENTORY

WASTE COMPANY: Cycle Chem DATE: 7/16/08

	DRUM #	PROFILE #	DESCRIPTION	WEIGHT	COMMENTS
	1	PC02-12	Nylon Turnings	196	3000329
	2	REM002-43	Water/oil	490	" "
	3	PC-01-44	Speedy Dri/oil	212	" "
	4	REM002-43	Water/oil	230	" "
	5	PC04-46	Water/oil/soap	504	" "
	6	PC01-44	Speedy Dry/oil	218	" "
	7	PC01-3	Oil Spill Clean up Filters	130	Clad 3000406
	8	CAS3-7	Waste Compressor Oil	450	Clad 3000406
Haz	9	PC06-29	Metal + Ceramic Powder/w/RCRA	292	Spray Bottles 3000599
HAZ	10	RO1-41	Methanol, Aquadag + Water	465	Wiretrue 3000406
Haz	11	STCR3-11	Waste Chrome Acid Solution	487	3000329
HAZ	12	STCR3-11	" " " "	481	3000329
	13	SR1-28	Computer Equipment	418	3000391 ~~Consolo~~ + Logitics
	14	SR2-39	Straight Fluorescent Bulbs	20	3000391
	15	SR2-39	" " "	20	3000391
	16	SR2-39	" " "	20	3000391
	40 Drums	PC01-48	Dust Collector	23,500	3000804 3000305 3000306
	2	PC01-48	Dust Collector		
	1 Skid	PC06-01	PPE Filters Ceramic Powder	125	3000404
	1	MT-42	Empty Drum		Wire Line
	TOTAL 65	ns of 7/15/08			

Form: Waste Drum Inventory.xls

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: NYD131318651
2. Page 1 of: 2
3. Emergency Response Phone: (908) 354-0210
4. Manifest Tracking Number: 003531908 JJK

5. Generator's Name and Mailing Address: SULZER METCO US INC
1101 PROSPECT AVE
WESTBURY, NY 11590
Generator's Phone: (516) 338-2417
Generator's Site Address (if different than mailing address): SAME

6. Transporter 1 Company Name: CLEAN VENTURE INC.
U.S. EPA ID Number: NJ0000027193

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Cycle Chem Inc.
217 South First Street
Elizabeth, NJ 07206
Facility's Phone: (908) 355-5800
U.S. EPA ID Number: NJD002200046

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. Waste Chromic acid solution 8 UN1755 PG II FROM 194	2	~~DF~~ DF (CY)	962	~~P~~ P	D002 D006 D007 D008 T
	2. NON REGULATED MATERIAL (PETROLEUM OIL) Non-RCRA Non-DOT	1	D M	450	~~P~~ P	ID72
	3. Chemical Process Solid Non-RCRA Non-DOT	1	D M	130	~~P~~ P	ID27
	4. NON REGULAILD MATERIAL (NYLON SOLIDS) Non-RCRA Non-DOT	1	D M	196	~~P~~ P	ID72

14. Special Handling Instructions and Additional Information: 945948/-1/886631/234405 (1)STCRS-11 COPPER CLEANER, CHROMIC ACID (2)CA55-7 WASTE COMPRESSUR OIL (3)PC01-3 OIL SPILL CLEAN UP FILTERS (4)PC02-12 NYLON TURNINGS

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: [illegible] Signature: [illegible] Month 07 Day 16 Year 08

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: [illegible] Signature: [illegible] Month 07 Day 16 Year 08
Transporter 2 Printed/Typed Name: Signature: Month Day Year

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. H141 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name Signature Month Day Year

GENERATOR INT'L TRANSPORTER DESIGNATED FACILITY

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

GENERATOR'S INITIAL COPY

U.S. EPA Form 8700-22

Read all instructions before completing this form.

1. This form has been designed for use on a 12-pitch (elite) typewriter which is also compatible with standard computer printers; a firm point pen may also be used—press down hard.
2. Federal regulations require generators and transporters of hazardous waste and owners or operators of hazardous waste treatment, storage, and disposal facilities to complete this form (EPA Form 8700–22) and, if necessary, the continuation sheet (EPA Form 8700–22A) for both inter- and intrastate transportation of hazardous waste.

Public reporting burden for this collection of information is estimated to average: 30 minutes for generators, 10 minutes for transporters, and 25 minutes for owners or operators of treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, completing, reviewing and transmitting the form. Any correspondence regarding the PRA burden statement for the manifest must be sent to the Director of the Collection Strategies Division in EPA's Office of Information Collection at the following address: U.S. Environmental Protection Agency (2822T), 1200 Pennsylvania Ave., NW., Washington, DC 20460. Do not send the completed form to this address.

I. Instructions for Generators

Item 1. Generator's U.S. EPA Identification Number

Enter the generator's U.S. EPA twelve digit identification number, or the State generator identification number if the generator site does not have an EPA identification number.

Item 2. Page 1 of ___

Enter the total number of pages used to complete this Manifest (*i.e.*, the first page (EPA Form 8700-22) plus the number of Continuation Sheets (EPA Form 8700-22A), if any).

Item 3. Emergency Response Phone Number

Enter a phone number for which emergency response information can be obtained in the event of an incident during transportation. The emergency response phone number must:

1. Be the number of the generator or the number of an agency or organization who is capable of and accepts responsibility for providing detailed information about the shipment;
2. Reach a phone that is monitored 24 hours a day at all times the waste is in transportation (including transportation related storage); and
3. Reach someone who is either knowledgeable of the hazardous waste being shipped and has comprehensive emergency response and spill cleanup/incident mitigation information for the material being shipped or has immediate access to a person who has that knowledge and information about the shipment.

Note: Emergency Response phone number information should only be entered in Item 3 when there is one phone number that applies to all the waste materials described in Item 9b. If a situation (*e.g.*, consolidated shipments) arises where more than one Emergency Response phone number applies to the various wastes listed on the manifest, the phone numbers associated with each specific material should be entered after its description in Item 9b.

Item 4. Manifest Tracking Number

This unique tracking number must be pre-printed on the manifest by the forms printer.

Item 5. Generator's Mailing Address, Phone Number and Site Address

Enter the name of the generator, the mailing address to which the completed manifest signed by the designated facility should be mailed, and the generator's telephone number. Note, the telephone number (including area code) should be the normal business number for the generator, or the number where the generator or his authorized agent may be reached to provide instructions in the event the designated and/or alternate (if any) facility rejects some or all of the shipment. Also enter the physical site address from which the shipment originates only if this address is different than the mailing address.

Item 6. Transporter 1 Company Name, and U.S. EPA ID Number

Enter the company name and U.S. EPA ID number of the first transporter who will transport the waste. Vehicle or driver information may not be entered here.

Item 7. Transporter 2 Company Name and U.S. EPA ID Number

If applicable, enter the company name and U.S. EPA ID number of the second transporter who will transport the waste. Vehicle or driver information may not be entered here.

If more than two transporters are needed, use a Continuation Sheet(s) (EPA Form 8700-22A).

Item 8. Designated Facility Name, Site Address, and U.S. EPA ID Number

Enter the company name and site address of the facility designated to receive the waste listed on this manifest. Also enter the facility's phone number and the U.S. EPA twelve digit identification number of the facility.

Item 9. U.S. DOT Description (Including Proper Shipping Name, Hazard Class or Division, Identification Number, and Packing Group)

Item 9a. If the wastes identified in Item 9b consist of both hazardous and nonhazardous materials, then identify the hazardous materials by entering an "X" in this Item next to the corresponding hazardous material identified in Item 9b.

Item 9b. Enter the U.S. DOT Proper Shipping Name, Hazard Class or Division, Identification Number (UN/NA) and Packing Group for each waste as identified in 49 CFR 172. Include technical name(s) and reportable quantity references, if applicable.

Note: If additional space is needed for waste descriptions, enter these additional descriptions in Item 27 on the Continuation Sheet (EPA Form 8700-22A). Also, if more than one Emergency Response phone number applies to the various wastes described in either Item 9b or Item 27, enter applicable Emergency Response phone numbers immediately following the shipping descriptions for those Items.

Item 10. Containers (Number and Type)

Enter the number of containers for each waste and the appropriate abbreviation from Table I (below) for the type of container.

TABLE I.--TYPES OF CONTAINERS

BA = Burlap, cloth, paper, or plastic bags.	DT = Dump truck.
CF = Fiber or plastic boxes, cartons, cases.	DW = Wooden drums, barrels, kegs.
CM = Metal boxes, cartons, cases (including roll-offs).	HG = Hopper or gondola cars.
CW = Wooden boxes, cartons, cases.	TC = Tank cars.
CY = Cylinders.	TP = Portable tanks.
DF = Fiberboard or plastic drums, barrels, kegs.	TT = Cargo tanks (tank trucks).
DM = Metal drums, barrels, kegs.	

Item 11. Total Quantity

Enter, in designated boxes, the total quantity of waste. Round partial units to the nearest whole unit, and *do not* enter decimals or fractions. To the extent practical, report quantities using appropriate units of measure that will allow you to report quantities with precision. Waste quantities entered should be based on actual measurements or reasonably accurate estimates of actual quantities shipped. Container capacities are not acceptable as estimates.

Item 12. Units of Measure (Weight/Volume)

Enter, in designated boxes, the appropriate abbreviation from Table II (below) for the unit of measure.

TABLE II.--UNITS OF MEASURE

G = Gallons (liquids only).	N = Cubic Meters.
K = Kilograms.	P = Pounds.
L = Liters (liquids only).	T = Tons (2000 Pounds).
M = Metric Tons (1000 kilograms).	Y = Cubic Yards.

Note: Tons, Metric Tons, Cubic Meters, and Cubic Yards should only be reported in connection with very large bulk shipments, such as rail cars, tank trucks, or barges.

Item 13. Waste Codes

Enter up to six federal and state waste codes to describe each waste stream identified in Item 9b. State waste codes that are not redundant with federal codes must be entered here, in addition to the federal waste codes which are most representative of the properties of the waste.

Item 14. Special Handling Instructions and Additional Information

1. Generators may enter any special handling or shipment-specific information necessary for the proper management or tracking of the materials under the generator's or other handler's business processes, such as waste profile numbers, container codes, bar codes, or response guide numbers. Generators also may use this space to enter additional descriptive information about their shipped materials, such as chemical names, constituent percentages, physical state, or specific gravity of wastes identified with volume units in Item 12.
2. This space may be used to record limited types of federally required information for which there is no specific space provided on the manifest, including any alternate facility designations; the manifest tracking number of the original manifest for rejected wastes and residues that are re-shipped under a second manifest; and the specification of PCB waste descriptions and PCB out-of-service dates required under 40 CFR 761.207. Generators, however, cannot be required to enter information in this space to meet state regulatory requirements.

Item 15. Generator's/Offeror's Certifications

1. The generator must read, sign, and date the waste minimization certification statement. In signing the waste minimization certification statement, those generators who have not been exempted by statute or regulation from the duty to make a waste minimization certification under section 3002(b) of RCRA are also certifying that they have complied with the waste minimization requirements. The Generator's Certification also contains the required attestation that the shipment has been properly prepared and is in proper condition for transportation (the shipper's certification). The content of the shipper's certification statement is as follows: "I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent." When a party other than the generator prepares the shipment for transportation, this party may also sign the shipper's certification statement as the offeror of the shipment.
2. Generator or Offeror personnel may preprint the words, "On behalf of" in the signature block or may hand write this statement in the signature block prior to signing the generator/offeror certification, to indicate that the individual signs as the employee or agent of the named principal.

Note: All of the above information except the handwritten signature required in Item 15 may be pre-printed.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21. Generator ID Number: NYD131319651

22. Page: 2 of 2

23. Manifest Tracking Number: 003531908DJK

24. Generator's Name: SULZER METCO US INC
1101 PROSPECT AVE
WESTBURY, NY 11590

25. Transporter _____ Company Name — U.S. EPA ID Number

26. Transporter _____ Company Name — U.S. EPA ID Number

27a. HM	27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	28. Containers No.	28. Containers Type	29. Total Quantity	30. Unit Wt./Vol.	31. Waste Codes
	(1) UNIVERSAL WASTE COMPUTERS Non-RCRA Non-DOT	1	C W	418	P	
X	(2) Hazardous waste, solid, n.o.s. 9 NA3077 PG III (D007 T) ERGW 171	1	D M	292	~~W~~ P	D007 T
	(3) UNIVERSAL WASTE LAMPS Non-RCRA Non-DOT	3	C F	69	P	
X	(4) Waste Flammable liquids, n.o.s. 3 UN1993 PG II (D001 F003 B) ERGW 128	1	D M	465	~~W~~ P	D001 F003 B
	(5) NON REGULATED MATERIAL (WATER, OIL) Non-RCRA Non-DOT	2	D M	720	~~W~~ P	ID72
	(6) NON REGULATED MATERIAL (OIL, SPEEDY DRY) Non-RCRA Non-DOT	2	D M	422	~~W~~ P	ID27
	(7) NON REGULATED MATERIAL (OILY SOAP) Non-RCRA Non-DOT	1	D M	504	~~W~~ P	ID72
	(8) Chemical Process Solid Non-RCRA Non-DOT	3~~7~~	~~D M~~ DM	23500	~~W~~ P	ID27
	(9) Chemical Process Solid Non-RCRA Non-DOT	1	C W	125	P	ID27

32. Special Handling Instructions and Additional Information: (1)PC06-29 METAL & CERAMIC POWDER W/RCRA METAL (CHROMIUM) (3)SR2-39 STRAIGHT FLUORESCENT TUBES FOR RECLAIM (4)R01-41 METHANOL, AQUADAG, & WATER (5)REM002-43 WATER/ OIL (6)PC01-44 OIL, & SPEEDY DRY (7)PC04-46 WATER, OIL, & SOAP (8)PC01-48 DUST COLLECTOR WASTE (9)PC02-1 FILTERS, PPE & CERAMIC POWDER

TRANSPORTER

33. Transporter _____ Acknowledgment of Receipt of Materials
Printed/Typed Name: KEVIN HOWARD — Signature: [signature] — Month 07 Day 16 Year 08

34. Transporter _____ Acknowledgment of Receipt of Materials
Printed/Typed Name — Signature — Month — Day — Year

DESIGNATED FACILITY

35. Discrepancy

36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
H111 | H141

EPA Form 8700-22A (Rev. 3-05) Previous editions are obsolete. **GENERATOR'S INITIAL COPY**

Instructions—Continuation Sheet
U.S. EPA Form 8700-22A

Read all instructions before completing this form. This form has been designed for use on a 12-pitch (elite) typewriter; a firm point pen may also be used—press down hard.

This form must be used as a continuation sheet to U.S. EPA Form 8700-22 if:

- More than two transporters are to be used to transport the waste; or
- More space is required for the U.S. DOT descriptions and related information in Item 9 of U.S. EPA Form 8700-22.

Federal regulations require generators and transporters of hazardous waste and owners or operators of hazardous waste treatment, storage, or disposal facilities to use the uniform hazardous waste manifest (EPA Form 8700-22) and, if necessary, this continuation sheet (EPA Form 8700-22A) for both interstate and intrastate transportation.

I. Instructions for Generators

Item 21. Generator's ID Number

Enter the generator's U.S. EPA twelve digit identification number or, the State generator identification number if the generator site does not have an EPA identification number.

Item 22. Page ___

Enter the page number of this Continuation Sheet.

Item 23. Manifest Tracking Number

Enter the Manifest Tracking number from Item 4 of the Manifest form to which this continuation sheet is attached.

Item 24. Generator's Name—

Enter the generator's name as it appears in Item 5 on the first page of the Manifest.

Item 25. Transporter—Company Name

If additional transporters are used to transport the waste described on this Manifest, enter the company name of each additional transporter in the order in which they will transport the waste. Enter after the word "Transporter" the order of the transporter. For example, Transporter 3 Company Name. Also enter the U.S. EPA twelve digit identification number of the transporter described in Item 25.

Item 26. Transporter—Company Name

If additional transporters are used to transport the waste described on this Manifest, enter the company name of each additional transporter in the order in which they will transport the waste. Enter after the word "Transporter" the order of the transporter. For example, Transporter 4 Company Name. Each Continuation Sheet can record the names of two additional transporters. Also enter the U.S. EPA twelve digit identification number of the transporter named in Item 26.

Item 27. U.S. D.O.T. Description Including Proper Shipping Name, Hazardous Class, and ID Number (UN/NA)

For each row enter a sequential number under Item 27b that corresponds to the order of waste codes from one continuation sheet to the next, to reflect the total number of wastes being shipped. Refer to instructions for Item 9 of the manifest for the information to be entered.

Item 28. Containers (No. And Type)

Refer to the instructions for Item 10 of the manifest for information to be entered.

Item 29. Total Quantity

Refer to the instructions for Item 11 of the manifest form.

Item 30. Units of Measure (Weight/Volume)

Refer to the instructions for Item 12 of the manifest form.

Item 31. Waste Codes

Refer to the instructions for Item 13 of the manifest form.

Item 32. Special Handling Instructions and Additional Information

Refer to the instructions for Item 14 of the manifest form.

Cycle Chem, Inc

201 South First Street Elizabeth, NJ 07206 PHONE: 908-355-5800, FAX: 908-355-0562

Land Disposal Restriction Notification and Certification Form

Generator: SULZER METCO US INC
EPAID: NYD131318651

Manifest Number: 234405
Manifest Tracking Number: 003531908 JC

The EPA hazardous wastes identified below must be treated to the applicable treatment standards Set forth In 40 CFR 268.40.

EPA Waste Code Information

Manifest Line	Waste-water?	EPACodes
Page 1 Line 1	No	D002, D006 (Cadmium non-battery subcategory), D007, D008 (Lead non-battery subcategory)
Page 1 Line 2	No	RCRA non-hazardous
Page 1 Line 3	No	RCRA non-hazardous
Page 1 Line 4	No	RCRA non-hazardous
Page 2 Line 1	No	RCRA non-hazardous
Page 2 Line 2	No	D007
Page 2 Line 3	No	RCRA non-hazardous
Page 2 Line 4	No	D001 (High TOC ignitable liquids subcategory), F003
Page 2 Line 5	No	RCRA non-hazardous
Page 2 Line 6	No	RCRA non-hazardous
Page 2 Line 7	No	RCRA non-hazardous
Page 2 Line 8	No	RCRA non-hazardous
Page 2 Line 9	No	RCRA non-hazardous

Spent Solvent Constituents

Manifest Line	Solvents
Page 2 Line 4	F003: methanol

Underlying Hazardous Constituents

(None present unless identified below.)

Manifest Line	Constituents
Page 2 Line 2	UHC's: Nickel

I certify that all information submitted On this Land Disposal Restriction and Certification Form is accurate and complete, to the best of my knowledge and information.

Signature: _____ Name: _____

Title: _____ Date: 07/16/07

Per the cust

FORM IC

Section VII: (Continued)

Box B: RCRA-permitted or interim status treatment, disposal, or recycling
During 1992, was treatment, disposal or recycling of RCRA hazardous waste conducted on-site in units subject to RCRA permitting requirements? In order to have units subject to RCRA permitting or interim status, your site must have a valid Part A or Part B operating permit or application on file with this Department. Select one code from the list below and record in the response space in Box B.

Code	RCRA-permitted or interim status treatment, disposal, or recycling
1	No, and the site **does not** have firm plans to develop an on-site RCRA permitted treatment, disposal or recycling system.
3	Yes, hazardous waste was treated, disposed, or recycled on-site during 1992 in a unit subject to RCRA permitting requirements.

> **NOTE:** If you selected code 3, you **must** complete one or more PS Forms to describe the existing on-site RCRA hazardous waste treatment, disposal or recyling system.

Box C: RCRA-exempt treatment, disposal, or recycling
During 1992, was treatment, disposal, or recycling of RCRA hazardous waste conducted on-site in units exempt from RCRA permitting requirements? This includes wastewater treatment units, resource recovery units (stills/solvent recovery), elementary neutralization, etc. Select one code from the list below and record in the response space in Box C.

Code	RCRA-exempt treatment, disposal, or recycling
1	No, **and** the site **does not** have firm plans to develop an on-site RCRA-exempt treatment, disposal, or recycling system.
3	Yes, hazardous waste was treated, disposed of, or recycled on-site during 1992 in a unit exempt from RCRA permitting requirements.

> **NOTE:** If you selected code 3, you must complete one or more PS Forms to describe the existing or planned on-site RCRA-exempt hazardous waste treatment, disposal, or recycling system.

Section VIII: Waste Reduction Activity During 1991 or 1992

Waste reduction means the reduction, to the extent feasible, of hazardous waste that is generated or subsequently treated, stored, or disposed. Waste reduction includes any source reduction or recycling activity undertaken by a generator that results in: (1) the reduction of total volume or quantity of hazardous waste; (2) the reduction of toxicity of hazardous waste; or (3) both, as long as the reduction is consistent with the goal of minimizing present and future threats to human health and the environment.

Box A: Did this site begin or expand a source reduction activity during 1991 or 1992?

Check "Yes" or "No" in Box A.

HAZARD NOTICE: This material is for the thermal spray process. Consult the Sulzer Metco Instruction Manual, the Material Safety Data Sheet, and applicable Federal and local jurisdiction safety and health regulations before utilizing this product. This product should not be ingested; inhalation and skin contact should be avoided. Local ventilation, skin and respiratory protection should be used during handling. Good housekeeping and personal hygiene should be practiced. Some individuals may show unusual sensitivity to exposure. Failure to observe proper practices may result in health hazards.

FOR EMERGENCY ASSISTANCE CALL
CHEMTREC - DAY OR NIGHT
1-800-424-9300

WARNING FLAMMABLE. HARMFUL IF INHALED. HARMFUL OR FATAL IF SWALLOWED. USE ONLY WITH ADEQUATE VENTILATION. FOR INDUSTRIAL USE ONLY.

Specific Effects of Overexposure:

Isobutyl Acetate (CAS# 110-19-0): Hazard by inhalation, skin and eye contact. Inhalation, skin and eye contact may cause irritation of the respiratory tract, skin and eyes.

Ethyl Benzene (CAS# 100-41-4): Hazard by inhalation, skin and eye contact. Inhalation, skin and eye contact may cause severe irritation of the upper respiratory tract, skin and eyes.

Toluene (CAS# 108-88-3): Hazard by inhalation, skin absorption and eye contact. Inhalation may cause fatigue, weakness, confusion, euphoria, dizziness, headache, dilated pupils, lacrimation and insomnia. Chronic exposure may cause leukopenia/enlarged liver. Skin contact may cause dermatitis and contribute to the overall exposure. Eye contact may cause irritation.

2-Butoxyethanol (CAS# 111-76-2): Hazard by inhalation, skin and eye contact. Inhalation may cause upper respiratory tract irritation, reproductive effects and anemia. Skin and eye contact may cause irritation.

64-17-5 **Denatured Ethyl Alcohol (CAS# N/A):** Hazard by inhalation, ingestion, skin absorption/contact, eye contact. Acute/chronic inhalation may cause irritation to the upper respiratory tract/coughing, central nervous system depression resulting in headache, dizziness and drowsiness. Skin contact may result in redness, burning and defatting. Ingestion may result in severe narcosis and chronic ingestion may result in degenerative changes in the liver, kidney, brain. Eye contact may cause burning and stinging.

Isopropyl Alcohol (CAS# 67-63-0): Hazard by inhalation, skin and eye contact. Eye/skin contact may cause mild irritation of the eyes/skin. Inhalation may cause mucous membrane irritation, drowsiness, dizziness, headache.

Aluminum (CAS# 7429-90-5): Hazard by inhalation, skin and eye contact. Pulmonary, skin and eye irritant due to abrasive action.

Petroleum Solvent (CAS# 8032-32-4): Hazard by inhalation, skin and eye contact. Inhalation may cause headache, intoxication and nausea. Skin and eye contact may cause irritation and dermatitis.

in Non Volatiles **Xylene (CAS# 1330-20-7):** Hazard by inhalation, skin absorption, eye contact and ingestion. Inhalation may cause dizziness, excitement, drowsiness, incoherence, irritated eyes and mucous membranes. Eye contact may cause corneal damage and irritation. Skin contact may cause dermatitis and irritation. Chronic inhalation exposure may cause liver or kidney dysfunction.

Methyl Ethyl Ketone (CAS# 78-93-3): Hazard by inhalation, skin and eye contact. Inhalation may cause dizziness, headache, narcosis and drowsiness. Eye/skin contact may be strongly irritating.

Diacetone Alcohol (CAS# 123-42-2): Hazard by inhalation, skin and eye contact. Inhalation may cause intoxication, headache, nausea and nose/throat irritation. Skin and eye contact may cause irritation.

Target Organs: Respiratory tract, Central nervous system, Peripheral nervous system, blood forming organs, reproductive organs, liver, kidney, skin and eyes.

BENZENE (CAS# 71-43-2): Hazard by..... Inhalation may cause....

In Case of Fire:
Extinguishing Media: Use National Fire Protection Association (NFPA) Class B extinguishers (carbon dioxide, dry chemical or foam) designed to extinguish NFPA Class 1B flammable liquid fires.
Unusual Fire and Explosion Hazards: Keep containers tightly closed. Isolate form heat, electrical equipment, sparks and open flames, or other sources of ignition. Closed containers may explode if exposed to extreme heat. Do not apply to hot surfaces.
Special Fire Fighting Procedures: Water spray may be ineffective. Water may be used to cool containers to prevent pressure buildup and possible auto-ignition or explosion when exposed to extreme heat. If water is used, fog nozzles are preferable.

In Case of Spill or Leak:
Remove all sources of ignition (flames, hot surfaces, electrical static or frictional sparks). Avoid breathing vapors. Ventilate area. Remove with inert absorbent and non-sparking tools. IMPORTANT: Hazardous product residue may be present after contents have been removed. Do not reuse empty package without commercial cleaning or reconditioning.

Special Protection Information:
Adequate local/general ventilation should be provided when using this product. Appropriate respiratory, skin, eye and hand protection should be utilized when using this product.

Special Precautions:
Precautions to be Taken in Handling and Storing: Do not store above 120°F.
Other Precautions: Do not take internally. Containers should be grounded when pouring. Avoid free fall of liquid in excess of a few inches.
DO NOT FLAME CUT, BRAZE OR WELD EMPTY CONTAINERS. KEEP CONTAINERS CLOSED WHEN NOT IN USE.
Waste Disposal Method: Dispose of in accordance with local, State and Federal regulations.

USING THE NATIONAL PAINT AND COATINGS ASSOCIATION'S HAZARDOUS MATERIALS IDENTIFICATION SYSTEM, THIS PRODUCT'S HAZARD CLASSIFICATION IS:

HEALTH**	3
**Note: If an asterisk is present, see section 2 and 8 of the MSDS for further information.	
FLAMMABILITY	3
REACTIVITY	0
PERSONAL PROTECTION	See the MSDS for proper personal protective equipment.

Flash Point: 36°F

WARNING: This product contains a chemical known to the STATE OF CALIFORNIA to cause cancer and/or reproductive harm.

ONYX ENVIRONMENTAL SERVICES

ONYX

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD123123998 — Manifest Document No. 0003
2. Page 1 of 1

3. Generator's Name and Mailing Address
SULZER METCO (US), INC.
1101 PROSPECT AVENUE
ATTN: PETER DIPIETRANTONIO
WESTBURY, NY 11590

4. Generator's Phone (516) 338-2337

A. Non-hazardous Manifest Document Number: Z 135058

B. State Generator's ID: SAME

5. Transporter 1 Company Name: FREEHOLD CARTAGE INC.
6. US EPA ID Number: NJD054129194

C. State Trans. ID: 1129143 mc

7. Transporter 2 Company Name
8. US EPA ID Number

D. Transporter's Phone (732) 462-1001

E. State Trans. ID

9. Designated Facility Name and Site Address
ONYX ENVIRONMENTAL SERVICES L.L.C.
1 EDEN LANE
FLANDERS, NJ 07836

10. US EPA ID Number: NJD098058893

F. Transporter's Phone ( )

G. State Facility's ID: N/A

H. Facility's Phone (973) 347-1000

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	L Waste No.
a.	NON HAZARDOUS MATERIAL, NONE, NONE	052	DM	32,124	P	~~NONE~~ ID27
b.	NON HAZARDOUS MATERIAL, NONE, NONE	003	CF	1968	P	ID27
c.	NON HAZARDOUS MATERIAL, NONE, NONE	002	DM	1388	P	ID27
d.						

J. Additional Descriptions for Materials Listed Above

a. S/- GENERAL EXHAUST DUST COLLECTOR MAT'L
b. S/SPENT HEPA FILTER. CART. + DEBRIS
c. S/ SPENT HEPA FILTER CART + DEBRIS
d.

K. Handling Codes for Wastes Listed Above

a. S01
b. S01
c. S01
d.

15. Special Handling Instructions and Additional Information
PACKING SLIPS ATTACHED FOR CLARIFICATION - EMERGENCY NUMBER-INFOTRAC: 1-800-535-5053
GENERATED IN NASSAU COUNTY, NEW YORK.

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labelled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

I hereby certify that the above-named material is not hazardous waste as defined by 40 CFR Part 261 or any applicable state law.

Printed/Typed Name: PETER DIPIETRANTONIO — Signature: [signature] — Month Day Year: 11 07 05

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: David L Brown — Signature: [signature] — Month Day Year: 11 07 05

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: Renee Reilly — Signature: [signature] — Month Day Year: 11 07 05

5-TSD MAIL TO GENERATOR COPY

SIGNATURE AND INFORMATION *MUST* BE LEGIBLE ON ALL COPIES

(IMPORTANT: Type or print; read instructions before completing form)

Form Approved OMB Number: 2070-0093
Approval Expires: 11/92

EPA United States Environmental Protection Agency

FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
Chromium Powder

WHERE TO SEND COMPLETED FORMS:
1. EPCRA Reporting Center, P.O. Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

For EPA use only

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 94

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?
[ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [X] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official: Joseph D. Reardon, Global Quality

Signature: Joseph D Reardon

Date Signed: July 20, 1995

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name	Sulzer Metco (US) Inc.
TRI Facility ID Number	11801PRKNL220MI
Street Address	220 Miller Place
City	Hicksville
County	Nassau
State	New York
Zip Code	11801
Mailing Address (if different from street address)	1101 Prospect Avenue
City	Westbury
State	New York
Zip Code	11590

PUT LABEL HERE

EPA
United States Environmental Protection Agency

EPA FORM R

PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
Chromium Powder

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check a or b; check c if applicable)	a. ☐ An entire facility	b. ☒ Part of a facility	c. ☐ A Federal facility			
4.3	Technical Contact	Name: Joseph D. Reardon			Telephone Number (include area code): (516) 334-1300		
4.4	Public Contact	Name: Joseph D. Reardon			Telephone Number (include area code): (516) 334-1300		
4.5	SIC Code (4-digit)	a. 3399	b.	c.	d.	e.	f.
4.6	Latitude and Longitude	Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		086	13	00	003	47	00

4.7	Dun & Bradstreet Number(s) (9 digits)	a. 15-208-4398
		b.
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. NYD981558570
		b.
4.9	Facility NPDES Permit Number(s) (9 characters)	a. N/A
		b.
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. N/A
		b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	☐ NA Sulzer Inc.
5.2	Parent Company's Dun & Bradstreet Number	☐ NA (9 digits) 00-182-6957

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
Chromium Powder

SECTION 1. TOXIC CHEMICAL IDENTITY

(Important: DO NOT complete this section if you complete Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	7440-47-3
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	Chromium
1.3	Generic Chemical Name (Important: Complete **only** if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)
	N/A

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
	N/A

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1	Manufacture the toxic chemical:	a. [ ] Produce b. [ ] Import	If produce or import: c. [ ] For on-site use/processing d. [ ] For sale/distribution e. [ ] As a byproduct f. [ ] As an impurity
3.2	Process the toxic chemical:	a. [ ] As a reactant b. [ ] As a formulation component	c. [X] As an article component d. [X] Repackaging
3.3	Otherwise use the toxic chemical:	a. [ ] As a chemical processing aid b. [ ] As a manufacturing aid	c. [ ] Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	03 (Enter two-digit code from instruction package.)	

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
Chromium Powder

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X] NA			
5.2	Stack or point air emissions	[ ] NA	A	C	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name: N/A				
5.3.2	Stream or Water Body Name: N/A				
5.3.3	Stream or Water Body Name: N/A				
5.4	Underground injections on-site	[X] NA			
5.5	Releases to land on-site				
5.5.1	Landfill	[X] NA			
5.5.2	Land treatment/ application farming	[X] NA			
5.5.3	Surface impoundment	[X] NA			
5.5.4	Other disposal	[X] NA			

[ ] Check here only if additional Section 5.3 information is provided on page 5 of this form.

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
Chromium Powder

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3	Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__	Stream or Water Body Name			
	N/A			
5.3.__	Stream or Water Body Name			
	N/A			
5.3.__	Stream or Water Body Name			
	N/A			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)
N/A	

6.1.B POTW Name and Location Information

6.1.B.__ POTW Name		6.1.B.__ POTW Name	
N/A			
Street Address		Street Address	
City	County	City	County
State	Zip Code	State	Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ]
(example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 11801PRKNL220MI

Toxic Chemical, Category, or Generic Name: Chromium Powder

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: Loni-Jo Metal Corporation

Street Address: 70 Kinkel Street

City: Westbury

County: Nassau

State: New York

Zip Code: 11590

Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 3900	1. M	1. M 24
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: N/A

Street Address:

City:

County:

State:

Zip Code:

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Section 6.2 page this is, here. [ ] (example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
Chromium Powder

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] **Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.**

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b 1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6 [ ] 7 [ ] 8 [ ]	7A.1c	7A.1d %	7A.1e Yes [ ] No [ ]
7A.2a	7A.2b 1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6 [ ] 7 [ ] 8 [ ]	7A.2c	7A.2d %	7A.2e Yes [ ] No [ ]
7A.3a	7A.3b 1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6 [ ] 7 [ ] 8 [ ]	7A.3c	7A.3d %	7A.3e Yes [ ] No [ ]
7A.4a	7A.4b 1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6 [ ] 7 [ ] 8 [ ]	7A.4c	7A.4d %	7A.4e Yes [ ] No [ ]
7A.5a	7A.5b 1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6 [ ] 7 [ ] 8 [ ]	7A.5c	7A.5d %	7A.5e Yes [ ] No [ ]

If additional copies of page 7 are attached, indicate the total number of pages in this box [ ] and indicate which page 7 this is, here. [ ] (example: 1, 2, 3, etc.)

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
Chromium Powder

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.**

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.**

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Chemical, Category, or Generic Name
Chromium Powder

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

All quantity estimates can be reported using up to two significant figures.		Column A Prior Year (pounds/year)	Column B Current Reporting Year (pounds/year)	Column C Following Year (pounds/year)	Column D Second Following Year (pounds/year)
8.1	Quantity released *	1	1	1	1
8.2	Quantity used for energy recovery on-site	0	0	0	0
8.3	Quantity used for energy recovery off-site	0	0	0	0
8.4	Quantity recycled on-site	0	0	0	0
8.5	Quantity recycled off-site	8500	3900	4000	4000
8.6	Quantity treated on-site	0	0	0	0
8.7	Quantity treated off-site	0	0	0	0
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	N/A			
8.9	Production ratio or activity index	.90			

8.10	Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.			
	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	N/A	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)	YES [ ]	NO [X]

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

EPHM-2 REV. 5/97

STATE OF CONNECTICUT

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST PROGRAM
79 Elm St., Hartford, CT 06106-5127

Please type (or print) *(Form designed for use on elite (12 pitch) typewriter.)*

FOR STATE USE ONLY

FOR SPILLS WITHIN CONNECTICUT, CONTACT DEP - OIL AND CHEMICAL SPILL RESPONSE AT (860) 424-3338

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law, but may be required by State law

3. Generator's Name and Mailing Address

[illegible]

4. Generator's Phone ( )

A. State Manifest Document Number: **CT F1002974**

B. G.S.I. (Gen. Site Address)

5. Transporter 1 Company Name — 6. US EPA ID Number

7. Transporter 2 Company Name — 8. US EPA ID Number

C. S.T.I. (Trans. Lic. Plate #)

D. Tran. Phone ( )

9. Designated Facility Name and Site Address — 10. US EPA ID Number

Clean Harbors Of Conn Inc
51 Wooster Road
Bristol, CT 06010

E. S.T.I. (Trans. Lic. Plate #)

F. Tran. Phone ( )

G. State Facility's ID (Not Required)

H. Facility's Phone

11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. [illegible]	[illegible]	[illegible]	[illegible]	[illegible]	EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
		Interim	Final	Interim	Final
a. [illegible]	c.	a.		c.	
b.	d.	b.		d.	

15. Special Handling Instructions and Additional Information

[illegible]

Point of Departure:

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR,** if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name — Signature — Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name — Signature — Month Day Year

EPA Form 8700-22 (Rev. 9/91) Form Approved OMB No.2050 0039.

COPY 8: GENERATOR RETAINS

CT F 1002974

INSTRUCTIONS
FOR COMPLETING THE CONNECTICUT UNIFORM HAZARDOUS WASTE MANIFEST

IMPORTANT: READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. ALL 8 COPIES MUST BE TOTALLY LEGIBLE.

GENERAL INFORMATION

The Hazardous Waste Manifest is designed to track waste from the point of generation to final disposal ("cradle to grave"). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly.

Incomplete, incorrect or illegible manifests are violations of the law, and could subject you to civil or criminal liabilities as specified in Connecticut Hazardous Waste Regulations.

The Connecticut manifest contains 8 copies. ALL COPIES MUST BE LEGIBLE! (Illegible manifests submitted to the State will be returned to the Generator for proper completion). This form is designed for use on a 12 pitch (elite) typewriter. A ball point pen may also be used only if you press down **HARD.** The eight copies must be filed with the appropriate parties as they are completed.

* Be aware that hazardous wastes manifested into or out of Connecticut are subject to a hazardous waste assessment per C.G.S 22a-132. Please contact the Dept. of Revenue Services at (860) 541-3225 for more information.

USE OF THE MANIFEST

This manifest must be used for RCRA regulated hazardous wastes. It may also be used for state regulated hazardous wastes, or for other state regulated special wastes for which state regulations **Require** the use of this manifest.

Wastes which are not federally or state regulated may only appear on a manifest in a mixed shipment. RCRA regulated hazardous wastes should be listed first, then the state regulated wastes, then non-hazardous wastes. (Non-hazardous non-regulated wastes, like empty drums which are regulated by DOT, may also be listed under Item 15).

Copy Distribution Instructions are found on the back of the form along with tables and instructions for the transporter and facility.

GENERATOR SECTION

Item 1: GENERATOR'S US EPA ID NO-MANIFEST DOCUMENT NO. - Enter U.S. EPA 12 digit identification number (CT Conditionally Exempt Small Quantity Generators who have not obtained an EPA ID number should enter the letters "CESQG" here). Then enter a UNIQUE 5 digit number you assign to this manifest. Use of serially increasing numbers (eg. 00001, 00002, etc.) is recommended.

Item 2: PAGE 1 of - Enter the total number of pages used to complete this manifest. If you use more than one manifest for a shipment make sure to cross-reference each of the manifests in Item 15, by state manifest document numbers.

Item A: STATE MANIFEST DOCUMENT NUMBER - Number preprinted by CT.

Item 3: GENERATOR'S NAME & MAILING ADDRESS - Enter the name (as notified to EPA) & mailing address of the Generator. This address should be the location that will manage the returned manifest forms. (However, a manifest copy must be kept at the actual site).

Item 4: GENERATOR'S PHONE NUMBER - Enter the phone number of someone who is knowledgeable about this shipment, and who can respond to questions regarding the information on this manifest, or in case of an emergency (24 hrs).

Item B: G.S.I. (Gen. Site Address) - Enter the location address of the Generator - street, city (and state if different) where the waste is being picked up. Enter "same" if the mailing address and location address are identical.

Item 5: TRANSPORTER 1 COMPANY NAME - Enter the company name (as notified to EPA) of the first transporter who will transport the waste.

Item 6: US EPA ID NUMBER - Enter the US EPA 12 digit identification number of the first transporter identified in Item 5.

Item C: S.T.I. (Tran. Lic. Plate #) - Enter the state of registration and then the license plate number of the waste carrying portion of the vehicle. (e.g., NY 14235). NOTE: ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN CONNECTICUT MUST HAVE A VALID CONNECTICUT TRANSPORTERS PERMIT.

Item D: TRANSPORTER'S PHONE - Enter a telephone number with area code where an authorized agent of the transporter can be reached.

Item 7: TRANSPORTER 2 COMPANY NAME - If applicable enter the company name (as notified to EPA) of the 2nd transporter who will transport the waste. Whenever more than two transporters or four waste streams are involved in a shipment, the Generator shall fully complete additional manifests, listing the additional information.

Item 8: US EPA ID NUMBER - If applicable, enter the US EPA 12 digit identification number of the 2nd transporter identified in Item 7.

Item E: S.T.I. (Tran. Lic. Plate #) - If applicable, enter the 2nd transporter's state of registration & license plate number for the waste carrying portion of the vehicle being used to make the pick-up.

Item F: TRANSPORTER'S PHONE - If applicable, enter the 2nd transporter's telephone number with area code where an authorized agent of the transporter can be reached.

Item 9: DESIGNATED FACILITY NAME & SITE ADDRESS - Enter the company name (as notified to EPA) of the Treatment, Storage, or Disposal Facility designated to receive the waste listed on the manifest. The address must be the site address, which may differ from the mailing address.

Item 10: US EPA ID NUMBER - Enter the U.S. EPA 12 digit identification number of the designated Facility identified in Item 9.

Item G: STATE FACILITY ID - No entry required by Connecticut.

Item H: FACILITY PHONE - Enter the telephone number with area code for the Facility designated to receive the waste on the manifest.

Item 11: US DOT DESCRIPTION - All the following information must be entered: The correct US DOT (Dept. of Transportation) name for the waste as identified in 49 CFR Parts 171-177 (usually found in Column 2 of Section 172.101), the assigned DOT Hazard Class (usually found in Column 3) & the 4 digit UN/NA ID number (Column 3A). (Example: Waste acetone, flammable liquid, UN 1090 (F003) RQ.) US DOT requires the word "waste" before or in the shipping name of all hazardous waste.

Item 12: CONTAINERS (NO. & TYPE) - Enter the number of containers for each waste and the appropriate abbreviation from TABLE I (below) for the type of container used.

TABLE I - CONTAINER TYPE

DM = Metal drums, barrels, kegs	TP = Tanks, Portable	CM = Metal boxes, cartons, cases (incl. roll-offs)
DW = Wooden drums, barrels, kegs	TT = Cargo Tanks (tank trucks)	CW = Wooden boxes, cartons, cases
DF = Fiberboard or plastic drums, barrels, kegs	TC = Tank Cars	CF = Fiber or plastic boxes, cartons, cases
CY = Cylinders	DT = Dump Trucks	

P2SUL008447

CLEAN HARBORS ENVIRONMENTAL SERVICES, INC.
LAND DISPOSAL RESTRICTION NOTIFICATION FORM LDR-1

Manifest No. CTF1002974

THE HAZARDOUS WASTES IDENTIFIED ON THE HAZARDOUS WASTE MANIFEST IDENTIFIED ABOVE AND BEARING THE EPA HAZARDOUS WASTE CODES LISTED BELOW ARE RESTRICTED WASTES WHICH ARE PROHIBITED FROM LAND DISPOSAL WITHOUT FURTHER TREATMENT UNDER THE LAND DISPOSAL RESTRICTIONS, 40 CFR PART 268 AND RCRA SECTION 3004(D). IN ACCORDANCE WITH 40 CFR 268.7(a)(2), THE EPA WASTE CODE, WASTE SUBCATEGORY, AND TREATABILITY GROUPS, AS APPLICABLE, ARE INCLUDED BELOW.

INSTRUCTIONS -- COMPLETE ALL SECTIONS. REFER TO PAGE 3 OF THIS FORM FOR KEY TERMS/DEFINITIONS.
Column 1 - Line Item: Enter the manifest line item number (e.g., 11a) that corresponds to the waste code(s).
Column 2 - Waste Codes/Subcategory: Check off all applicable waste codes. For D001 through D043, also check applicable subcategory; for F001 through F005, check applicable constituents.
Column 3 - Wastewater/Non-wastewater: Check off "WW" for wastewater and "Non-WW" for non-wastewaters.
Column 4 - LDR Handling Code: Circle the appropriate handling code, as follows:

1 = The waste is a characteristic hazardous waste D001, D002, D003, D004-D011, or D018-43 which is intended for treatment/disposal in a CWA system, CWA-equivalent system, or Class I SDWA system. Underlying Hazardous Constituents (UHC's) are NOT required to be identified.

1A = The waste is a characteristic hazardous waste D001 High TOC Ignitable Liquids Subcategory (i.e., greater than or equal to 10% TOC). Pursuant to 40 CFR 268.40, the waste must be treated using organic recovery (RORGS) or combustion (CMBST) technology. UHC's are NOT required to be identified.

2 = The waste is a characteristic hazardous waste D001 (other than High TOC Ignitable Liquids), D002, D003 Explosive, Water Reactive or Other Reactive subcategory, D004-D011, D012-17 non-wastewater, or D018-43 which is intended for treatment/disposal in a non-CWA system, non-CWA-equivalent system, or non-Class I SDWA system located in the United States. All UHC's which are reasonably expected to be present must be identified, except for D001 waste that is intended to be treated using organic recovery (RORGS) or combustion (CMBST) technologies. Identify UHC's by completing Sections I and IV of CHI Form LDR-1 Addendum and attach completed Addendum to this form.

3 = The waste is a characteristic (i.e., D-code) or listed (i.e., F-, K-, U-, or P-code) hazardous waste which is intended for export and treatment/disposal at a facility located outside the United States. LDR treatment standards do not apply to hazardous waste treated/disposed in a foreign country, and per USEPA guidance, the identification of UHC's (if applicable) is not required for hazardous waste that is intended to be exported. Note however that if the exported waste is subsequently returned for treatment/disposal in the United States, all applicable LDR regulations would apply and a revised LDR notification would be required.

4 = The waste meets the definition of hazardous debris pursuant to 40 CFR 268.2(h) and is intended for treatment/disposal in compliance with the alternate debris treatment technologies of 40 CFR 268.45. In accordance with the requirements of 40 CFR 268.7(a)(2): the contaminants subject to treatment (CSTT's) must be identified as part of this notification. Identify CSTT's by completing Sections III and IV of CHI Form LDR-1 Addendum and attach completed Addendum to this form. These constituents are being treated to comply with 40 CFR 268.45.

5 = The waste is a characteristic waste D003 Reactive Sulfide, Reactive Cyanide, or Unexploded Ordnance subcategory, a characteristic waste D012-17 wastewater, or a listed (i.e., F-, K-, U-, or P-code) hazardous waste. UHC's are NOT required to be identified.

6 = The waste is a lab pack that is intended for incineration using the alternative lab pack treatment standard under 40 CFR 268.42(c). UHC's are NOT required to be identified; however, the generator must complete and attach the lab pack certification statement on CHI Form LDR-LP. Note that in accordance with 40 CFR Part 268 Appendix IV, lab packs which contain waste codes D009, F019, K003, K004, K005, K006, K062, K071, K100, K106, P010, P011, P012, P076, P078, U134, and U151 are not eligible for alternative lab pack treatment standard.

*** **NOTE: IF THE WASTE IS A SOIL CONTAMINATED WITH A LISTED OR CHARACTERISTIC WASTE AND THE GENERATOR WANTS TO USE THE ALTERNATE TREATMENT STANDARD FOR SOILS, CONTACT CORPORATE COMPLIANCE FOR THE APPROPRIATE LDR NOTIFICATION FORM.**

SECTION I. CHARACTERISTIC WASTES D001 THROUGH D043

COLUMN 1: LINE ITEM SEE MANIFEST	COLUMN 2: WASTE CODE / SUBCATEGORY	COLUMN 3: WASTEWATER/ NON-WASTEWATER	COLUMN 4: HANDLING CODE
	[ ] D001 Ignitables, except High TOC subcategory	[ ] WW [ ] Non-WW	1 2 3 4 6
	[ ] D001 High TOC Ignitable Liquids Subcategory (Greater than or equal to 10% TOC)	[ ] Non-WW only	1A 3 6
11a	[X] D002 Corrosives	[X] WW [ ] Non-WW	(1) 2 3 4 6
	[ ] D003		
	[ ] Reactive Sulfide, per 261.23(a)(5)	[ ] WW [ ] Non-WW	1 3 4 5 6
	[ ] Reactive Cyanide, per 261.23(a)(5)	[ ] WW [ ] Non-WW	1 3 4 5 6
	[ ] Explosive, per 261.23(a)(6), (7) & (8)	[ ] WW [ ] Non-WW	1 2 3 4 6
	[ ] Water Reactive, per 261.23(a)(2), (3) & (4)	[ ] Non-WW only	1 2 3 4 6
	[ ] Other Reactive, per 261.23(a)(1)	[ ] WW [ ] Non-WW	1 2 3 4 6
	[ ] Unexploded Ordnance, Emergency Response	[ ] WW [ ] Non-WW	1 3 4 5 6
	[ ] D004 Arsenic	[ ] WW [ ] Non-WW	1 2 3 4 6
	[ ] D005 Barium	[ ] WW [ ] Non-WW	1 2 3 4 6
11a	[X] D006		
	[X] Cadmium	[X] WW [ ] Non-WW	(1) 2 3 4 6
	[ ] Cadmium Containing Batteries	[ ] Non-WW only	2 3 6
11a	[X] D007 Chromium	[X] WW [ ] Non-WW	(1) 2 3 4 6
11a	[X] D008		
	[X] Lead	[X] WW [ ] Non-WW	(1) 2 3 4 6
	[ ] Lead Acid Batteries	[ ] Non-WW only	2 3 6

CLEAN HARBORS ENVIRONMENTAL SERVICES, INC.
LAND DISPOSAL RESTRICTION NOTIFICATION FORM LDR-1

Manifest No. CTI510029974

SECTION III. CALIFORNIA LIST WASTES

COLUMN 1: LINE ITEM SEE MANIFEST	COLUMN 2: WASTE CODE / SUBCATEGORY	COLUMN 3: WASTEWATER/ NON-WASTEWATER	COLUMN 4: HANDLING CODE
_____	Hazardous waste containing one or more of the following California List constituents:	[ ] WW [ ] Non-WW	1 2 3 4 5 6

[ ] ALL CALIFORNIA LIST CONSTITUENTS
[ ] Liquids with nickel greater than or equal to 134 mg/l
[ ] Liquids with thallium greater than or equal to 130 mg/l
[ ] Liquids with PCB's > or = 50 ppm
[ ] Waste containing HOC's > or = 1,000 mg/kg

SECTION IV. OTHER LISTED WASTES (F006-12, F019-F028, F037-38, F039, K-, U-, AND P-CODES)

COLUMN 1: LINE ITEM SEE MANIFEST	COLUMN 2: WASTE CODE / SUBCATEGORY	COLUMN 3: WASTEWATER/ NON-WASTEWATER	COLUMN 4: HANDLING CODE
_____	_____	[ ] WW [ ] Non-WW	3 4 5 6
_____	_____	[ ] WW [ ] Non-WW	3 4 5 6
_____	_____	[ ] WW [ ] Non-WW	3 4 5 6
_____	_____	[ ] WW [ ] Non-WW	3 4 5 6
_____	_____	[ ] WW [ ] Non-WW	3 4 5 6

[ ] CHECK HERE IF ADDITIONAL LISTED WASTE CODES ARE PRESENT. COMPLETE AND ATTACH LDR-1 CONTINUATION SHEET.
[ ] CHECK HERE IF WASTE CODE F039 (MULTISOURCE LEACHATE) IS PRESENT. IDENTIFY F039 CONSTITUENTS BY COMPLETING SECTIONS II AND IV OF CHI FORM LDR-1 ADDENDUM AND ATTACH COMPLETED ADDENDUM TO THIS FORM.

SECTION V. CONTACT NAME AND DATE

Print Name: DAVID WALZAK Date: 6/22/01

KEY TERMS/DEFINITIONS

CLASS I SDWA SYSTEM means a Class I deep well facility regulated under the Safe Drinking Water Act (SDWA).

CWA SYSTEM means a centralized wastewater treatment facility discharging under a Clean Water Act (CWA) permit. For example, a CWA facility would treat organic or inorganic aqueous wastes and discharge the treated effluent to the local sewer system. Examples of CWA treatment systems owned and operated by Clean Harbors include the wastewater treatment operations at Baltimore (including the CES system), Bristol, Chicago, Cincinnati and Cleveland.

CWA-EQUIVALENT SYSTEM means a "zero discharge system" that engages in "CWA-equivalent" treatment before land disposal. Zero-discharge facilities treat hazardous wastes using "CWA-equivalent" treatment methods, but do not discharge the treatment effluent to a sewer or water body (e.g., spray irrigation land farm). "CWA-equivalent" treatment methods means biological treatment for organics, alkaline chlorination, or ferrous sulfate precipitation for cyanide, precipitation/ sedimentation for metals, reduction of hexavalent chromium, or other treatment technology that can be demonstrated to perform equally or greater than these technologies.

HIGH TOC IGNITABLE LIQUIDS SUBCATEGORY means an ignitable liquid hazardous waste (waste code D001) which contains greater than or equal to 10% total organic carbon (TOC). Pursuant to 40 CFR 268.40, such wastes must be treated using organic recovery (RORGS) or combustion (CMBST) technology. Examples of RORGS technologies include the CES unit at Clean Harbors of Baltimore. Examples of CMBST technologies include hazardous waste fuel blending and subsequent reuse at a cement kiln, or destruction at a RCRA incinerator.

WASTEWATERS are wastes that contain less than 1% by weight total organic carbon (TOC) and less than 1% by weight total suspended solids (TSS). [See 40 CFR 268.2(f)]

CLEAN HARBORS ENVIRONMENTAL SERVICES, INC.
LAND DISPOSAL RESTRICTION NOTIFICATION FORM LDR-1 ADDENDUM

Manifest No. CTF1002974

122. _____ [ ] Dieldrin
123. _____ [ ] Diethyl phthalate
124. _____ [ ] 2,4-Dimethyl phenol
125. _____ [ ] Dimethyl phthalate
126. _____ [ ] Di-n-butyl phthalate
127. _____ [ ] 1,4-Dinitrobenzene
128. _____ [ ] 4,6-Dinitro-o-cresol
129. _____ [ ] 2,4-Dinitrophenol
130. _____ [ ] 2,4-Dinitrotoluene
131. _____ [ ] 2,6-Dinitrotoluene
132. _____ [ ] Di-n-octyl phthalate
133. _____ [ ] p-Dimethylaminoazobenzene (*)
134. _____ [ ] Di-n-propylnitrosoamine
135. _____ [ ] 1,4-Dioxane (*)
136. _____ [ ] Diphenylamine (difficult to distinguish from diphenylnitrosamine)
137. _____ [ ] Diphenylnitrosamine (difficult to distinguish from diphenylamine)
138. _____ [ ] 1,2-Diphenylhydrazine
139. _____ [ ] Disulfoton
266. _____ [ ] Dithiocarbamates (Total) (*)
140. _____ [ ] Endosulfan I
141. _____ [ ] Endosulfan II
142. _____ [ ] Endosulfan sulfate
143. _____ [ ] Endrin
144. _____ [ ] Endrin aldehyde
267. _____ [ ] EPTC (*)
145. _____ [ ] Ethyl acetate
146. _____ [ ] Ethyl cyanide (propanenitrile)
147. _____ [ ] Ethyl benzene
148. _____ [ ] Ethyl ether
149. _____ [ ] bis(2-Ethylhexyl)phthalate
150. _____ [ ] Ethyl methacrylate
151. _____ [ ] Ethylene oxide
152. _____ [ ] Famphur
153. _____ [ ] Fluoranthene
154. _____ [ ] Fluorene
155. _____ [ ] Fluoride
268. _____ [ ] Formetanate hydrochloride (*)
156. _____ [ ] Heptachlor
157. _____ [ ] Heptachlor epoxide
158. _____ [ ] Hexachlorobenzene
159. _____ [ ] Hexachlorobutadiene
160. _____ [ ] Hexachlorocylopentadiene
161. _____ [ ] HxCDDs (All hexachlorodibenzo-p-dioxins)
162. _____ [ ] HxCDFs (All hexachlorodibenzo-furans)
163. _____ [ ] Hexachloroethane
164. _____ [ ] Hexachloropropylene
165. _____ [ ] Indeno (1,2,3-c,d)pyrene
270. _____ [ ] 3-Iodo-2-propynyl n-butylcarbamate (*)
166. _____ [ ] Iodomethane
167. _____ [ ] Isobutyl alcohol
168. _____ [ ] Isodrin
169. _____ [ ] Isosafrole
170. _____ [ ] Kepone
171. _____ [ ] Lead
172. _____ [ ] Mercury--Nonwastewater from Retort
173. _____ [ ] Mercury--All others
174. _____ [ ] Methacrylonitrile
175. _____ [ ] Methanol
176. _____ [ ] Methapyrilene
272. _____ [ ] Methiocarb (*)
273. _____ [ ] Methomyl (*)
177. _____ [ ] Methoxychlor
178. _____ [ ] 3-Methylcholanthrene
179. _____ [ ] 4,4-Methylene-bis(2-chloroaniline)
180. _____ [ ] Methylene chloride
181. _____ [ ] Methyl ethyl ketone
182. _____ [ ] Methyl isobutyl ketone
183. _____ [ ] Methyl methacrylate
184. _____ [ ] Methyl methansulfonate
185. _____ [ ] Methyl parathion
274. _____ [ ] Metolcarb (*)
275. _____ [ ] Mexacarbate (*)
276. _____ [ ] Molinate (*)
186. _____ [ ] Naphthalene
187. _____ [ ] 2-Naphthylamine
188. _____ [ ] Nickel
189. _____ [ ] o-Nitroaniline (*)
190. _____ [ ] p-Nitroaniline
191. _____ [ ] Nitrobenzene
192. _____ [ ] 5-Nitro-o-toluidine
193. _____ [ ] o-Nitrophenol (*)
194. _____ [ ] p-Nitrophenol
195. _____ [ ] N-Nitrosodiethylamine
196. _____ [ ] N-Nitrosodimethylamine
197. _____ [ ] N-Nitroso-di-n-butylamine
198. _____ [ ] N-Nitrosomethylethylamine
199. _____ [ ] N-Nitrosomorpholine
200. _____ [ ] N-Nitrosopiperidine
201. _____ [ ] N-Nitrosopyrrolidine
277. _____ [ ] Oxamyl (*)
202. _____ [ ] Parathion
203. _____ [ ] Total PCBs (sum of all PCB isomers, or all Arochlors)
278. _____ [ ] Pebulate (*)
204. _____ [ ] Pentachlorobenzene
205. _____ [ ] PeCDDs (All pentachlorodibenzo-p-dioxins)
206. _____ [ ] PeCDFs (All pentachlorodibenzofurans)
207. _____ [ ] Pentachloroethane (*)
208. _____ [ ] Pentachloronitrobenzene
209. _____ [ ] Pentachlorophenol
210. _____ [ ] Phenacetin
211. _____ [ ] Phenanthrene
212. _____ [ ] Phenol
213. _____ [ ] Phorate
214. _____ [ ] Phthalic acid (*)
215. _____ [ ] Phthalic anhydride
280. _____ [ ] Physostigmine (*)
281. _____ [ ] Physostigmine salicylate (*)
282. _____ [ ] Promecarb (*)
216. _____ [ ] Pronamide
283. _____ [ ] Propham (*)
284. _____ [ ] Propoxur (*)
285. _____ [ ] Prosulfocarb (*)
217. _____ [ ] Pyrene
218. _____ [ ] Pyridine
219. _____ [ ] Safrole
220. _____ [ ] Selenium
221. _____ [ ] Silver
222. _____ [ ] Silvex (2,4,5-TP)
223. _____ [ ] Sulfide
224. _____ [ ] 2,4,5-T (2,4,5-Trichlorophenoxyacetic acid)
225. _____ [ ] 1,2,4,5-Tetrachlorobenzene
226. _____ [ ] TCDDs (All tetrachlorodibenzo-p-dioxins)
227. _____ [ ] TCDFs (All tetrachlorodibenzofurans)
228. _____ [ ] 1,1,1,2-Tetrachloroethane
229. _____ [ ] 1,1,2,2-Tetrachloroethane
230. _____ [ ] Tetrachloroethylene
231. _____ [ ] 2,3,4,6-Tetrachlorophenol
232. _____ [ ] Thallium
286. _____ [ ] Thiodicarb (*)
287. _____ [ ] Thiophanate-methyl (*)
233. _____ [ ] Toluene
234. _____ [ ] Toxaphene
289. _____ [ ] Triallate (*)
235. _____ [ ] Tribromomethane (Bromoform)

CycleChem

INVOICE NO.	CUSTOMER NO.	INVOICE DATE	ORDER NO.	GEN CODE
W088187	08-1047408	07/10/2008	88187	945948 1

FOR ADDITIONAL INFORMATION PERTAINING TO THIS INVOICE PLEASE DIAL
PHONE: 908-355-5800 • FAX: 908-355-0562

PICK UP FROM:
SULZER METCO US INC
Attn: JIM KOURKOUMELISI
1101 PROSPECT AVE
WESTBURY, NY 11590

BILL TO:
SULZER METCO US INC
Attn: JIM KOURKOUMELISI
1101 PROSPECT AVE
WESTBURY, NY 11590

TELEPHONE NUMBER

POR

EPA ID NO.	MANIFEST NO.	DATE RECEIVED	P.O. #
NYD131318651	CVCC113125	7/2/2008	4530114674

PRODUCT CODE	SEQUENCE NUMBER	QUANTITY ORDERED	DESCRIPTION	UNITS	RATE	CONT.	TOTAL
PC04	0036	1	METALICERAMIC POWDER & 90% WATER	2036.00	0.90/G	TT	1,832.40

LINE 14

SULZER METCO (US) INC.
JUL 15 2008
EHS DEPARTMENT

INVOICE

Disposal Subtotal* $1832.40

COMMENTS/ADDITIONAL CHARGES		AMOUNT
	QA/QC Fee	No Charge
	Manifest Prep Fee	No Charge
	Label Prep Fee	No Charge
	Reg. Admin. Fee	No Charge
	Transportation*	900.00
	Tax On * Items: 8.625% X $2732.40	235.67

Please Remit payment in full to:
Cycle Chem, Inc.
P.O. Box 18173, Newark, N.J. 07191

PAY THIS AMOUNT 2,968.07

PLEASE NOTE: INTEREST CHARGES OF 1.5% PER MONTH (18% PER YEAR WILL ACCRUE ON ALL PAST DUE AMOUNTS. ON UNPAID AMOUNTS, INTEREST AND ALL EXPENSES OF COLLECTIONS INCLUDING A REASONABLE ATTORNEY FEE IN AN AMOUNT OF 20% WILL BE CHARGED.

THE WASTE LISTED ON THIS INVOICE HAS BEEN RECEIVED BY OUR HAZARDOUS WASTE FACILITY AND IS BEING HANDLED IN FULL COMPLIANCE WITH THE RCRA REGULATIONS CONCERNING THE TREATMENT, STORAGE AND DISPOSAL OF THE DESCRIBED MATERIAL.

EPA
United States Environmental Protection Agency

FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER: 11801PRKNL220MI

Toxic Chemical, Category, or Generic Name: ALUMINUM POWDER

WHERE TO SEND COMPLETED FORMS:
1. EPCRA Reporting Center, P.O. Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

For EPA use only

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 92

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?
[ ] Yes (Answer question 2.2; Attach substantiation forms)
[X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [X] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official: JOE MACRI, MANAGER FACILITIES

Signature: Joseph Macri

Date Signed: June 30, 1993

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: METCO DIVISION PERKIN-ELMER CORPORATION

TRI Facility ID Number: 11801PRKNL220MI

Street Address: 220 Miller Place

City: Hicksville

County: Nassau

State: New York

Zip Code: 11801

Mailing Address (if different from street address):

City:

State:

Zip Code:

PUT LABEL HERE

EPA
United States Environmental Protection Agency

EPA FORM R

PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
ALUMINUM POWDER

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check only one)	a. [ ] An entire facility	b. [X] Part of a facility
4.3	Technical Contact	Name: JOE MACRI	Telephone Number (include area code): (516) 334-1300
4.4	Public Contact	Name: JOE MACRI	Telephone Number (include area code): (516) 334-1300

4.5	SIC Code (4-digit)	a. 3399	b.	c.	d.	e.	f.
4.6	Latitude and Longitude	Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		086	13	00	003	47	00

4.7	Dun & Bradstreet Number(s) (9 digits)	a. 05-773-1663
		b.
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. NYD981558570
		b.
4.9	Facility NPDES Permit Number(s) (9 characters)	a. N/A
		b.
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. N/A
		b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	[ ] NA PERKIN-ELMER CORPORATION
5.2	Parent Company's Dun & Bradstreet Number	[ ] NA (9 digits) 00-118-4480

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
ALUMINUM POWDER

SECTION 1. TOXIC CHEMICAL IDENTITY

(Important: DO NOT complete this section if you complete Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	7429-90-5
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	ALUMINUM (FUME OR DUST)
1.3	Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)
	N/A

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
	N/A

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1	Manufacture the toxic chemical:	a. [ ] Produce b. [ ] Import	If produce or import: c. [ ] For on-site use/processing d. [ ] For sale/distribution e. [ ] As a byproduct f. [ ] As an impurity
3.2	Process the toxic chemical:	a. [ ] As a reactant b. [ ] As a formulation component	c. [X] As an article component d. [X] Repackaging
3.3	Otherwise use the toxic chemical:	a. [ ] As a chemical processing aid b. [ ] As a manufacturing aid	c. [ ] Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	04	(Enter two-digit code from instruction package.)

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
ALUMINUM POWDER

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X] NA			
5.2	Stack or point air emissions	[ ] NA	310	C	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name				
	N/A				
5.3.2	Stream or Water Body Name				
	N/A				
5.3.3	Stream or Water Body Name				
	N/A				
5.4	Underground injections on-site	[X] NA			
5.5	Releases to land on-site				
5.5.1	Landfill	[X] NA			
5.5.2	Land treatment/ application farming	[X] NA			
5.5.3	Surface impoundment	[X] NA			
5.5.4	Other disposal	[X] NA			

[ ] Check here only if additional Section 5.3 information is provided on page 5 of this form.

Range Codes: A = 1 - 10 pounds; B = 1
C = 500 - 999 pounds.

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
ALUMINUM POWDER

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3	Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__	Stream or Water Body Name			
	N/A			
5.3.__	Stream or Water Body Name			
	N/A			
5.3.__	Stream or Water Body Name			
	N/A			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)
N/A	

6.1.B POTW Name and Location Information

6.1.B.__ POTW Name		6.1.B.__ POTW Name	
N/A			
Street Address		Street Address	
City	County	City	County
State	Zip Code	State	Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ] (example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 C = 500 - 999 pounds.

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United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 11801PRKNL220MI

Toxic Chemical, Category, or Generic Name: ALUMINUM POWDER

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: I. GANZ METAL, INC.

Street Address: 96 WHYTHE AVENUE

City: BROOKLYN | County: KINGS

State: NY | Zip Code: 11211 | Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. B	1. M	1. M 24
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: LONI-JO SCRAP METAL

Street Address: 70 KINKEL STREET

City: WESTBURY | County: NASSAU

State: NY | Zip Code: 11590 | Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 1700	1. M	1. M 24
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Section 6.2 page this is, here. [ ] (example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 1
C = 500 - 999 pounds

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
ALUMINUM POWDER

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] **Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.**

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b 1 2 3 4 5 6 7 8	7A.1c	7A.1d %	7A.1e Yes [ ] No [ ]
7A.2a	7A.2b 1 2 3 4 5 6 7 8	7A.2c	7A.2d %	7A.2e Yes [ ] No [ ]
7A.3a	7A.3b 1 2 3 4 5 6 7 8	7A.3c	7A.3d %	7A.3e Yes [ ] No [ ]
7A.4a	7A.4b 1 2 3 4 5 6 7 8	7A.4c	7A.4d %	7A.4e Yes [ ] No [ ]
7A.5a	7A.5b 1 2 3 4 5 6 7 8	7A.5c	7A.5d %	7A.5e Yes [ ] No [ ]

If additional copies of page 7 are attached, indicate the total number of pages in this box [ ] and indicate which page 7 this is, here. [ ] (example: 1, 2, 3, etc.)

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category, or Generic Name
ALUMINUM POWDER

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Chemical, Category, or Generic Name
ALUMINUM POWDER

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

All quantity estimates can be reported using up to two significant figures.		Column A 1991 (pounds/year)	Column B 1992 (pounds/year)	Column C 1993 (pounds/year)	Column D 1994 (pounds/year)
8.1	Quantity released*	0	0	0	0
8.2	Quantity used for energy recovery on-site	0	0	0	0
8.3	Quantity used for energy recovery off-site	0	0	0	0
8.4	Quantity recycled on-site	0	0	0	0
8.5	Quantity recycled off-site	3700	1800	1800	1800
8.6	Quantity treated on-site	0	0	0	0
8.7	Quantity treated off-site	0	0	0	0
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	N/A			
8.9	Production ratio or activity index	.95			

8.10	Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.			
	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	W19	a. T04	b.	c.
8.10.2	W29	a. T04	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)	YES [ ]	NO [X]

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

NYC 554428-1

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4/97)

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Document No.

2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number: NYC 554428-1

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a.	11		21		EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. | c.

b. | d.

K. Handling Codes for Wastes Listed Above

a. | c.

b. | d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR**, if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Art Bouchard | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name: [illegible] | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name: Joe Zimmerman | Signature | Mo. Day Year

COPY 5-Generator-Mailed by TSD facility

P2SUL005570

NYC 554428-1

2-118-08

Please print or type. DO NOT STAPLE.

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

(Hazardous Waste Manifest 4/97)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No.: NYD 057731663
Manifest Document No.: 998285
2. Page 1 of 1

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address
SULZER METCO (US), INC
325 DUFFY AVENUE
HICKSVILLE NY 11808

4. Generator's Phone (516) 338-2517

A. State Manifest Document Number: NYC 554428-1

B. Generator's ID: SAME

5. Transporter 1 (Company Name): SAFETY-KLEEN SYSTEMS, INC

6. US EPA ID Number: ILD 984908202

C. State Transporter's ID: MYT9330

D. Transporter's Telephone: 516) 842-6311

7. Transporter 2 (Company Name):

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address 211808
SAFETY-KLEEN SYSTEMS, INC
BO SEABRO
NO AMITYVILLE, NY 11701

10. US EPA ID Number: NYD 000708198

G. State Facility ID:

H. Facility's Telephone: 516) 842-6311

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a. WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII(D001 D018, D039, D040)(ERG#128)6.7LBS/GAL	11	DM	81	G	EPA D001 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

GENERATOR

J. Additional Descriptions for Materials Listed Above
1(A) D018 D039
a. (A) D040
b.
c.
d.

K. Handling Codes for Wastes Listed Above
a. R
b.
c.
d.

15. Special Handling Instructions and Additional Information
#
EMERGENCY RESP#1-800-468-1760 24HR
9907 96674608 998285 2-118-08-1500 01

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: BILL BOUCHARD
Signature: B Bouchard
Mo. 02 Day 18 Year 99

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: ERASMO EMPAYNADO JR.
Signature: Erasmo Empaynado
Mo. 02 Day 18 Year 99

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name:
Signature:
Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name:
Signature:
Mo. Day Year

A: 704 B: C: D:

COPY 3-Disposer State-mailed by generator

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

NYC 554428-1

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4/97)

In case of emergency or spill, immediately call the National Response Center (800)-424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Document No.

2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number NYC 554428-1

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a.	11		21		EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. | c.

b. | d.

K. Handling Codes for Wastes Listed Above

a. | c.

b. | d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR,** if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford

Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

COPY 8-Generator-retained by generator

P2SUL005572

K54214-05732 SAFETY KLEEN 01/25/99 PAGE: 1
LOCATION: 111908 LAND DISPOSAL RESTRICTION NOTICE 19:08:03

EPA ID NO. NYD000708198
(DESIGNATED FACILITY)

TO: SAFETY-KLEEN SYSTEMS, INC.
80 SEAGRO
NORTHVILLE, NY 11701

UNDER MANIFEST/BILL OF LADING NUMBER NYC554207 THE GENERATOR NOTED BELOW IS SHIPPING YOU A WASTE DETERMINED TO BE RESTRICTED UNDER 40 CFR PART 268. IN ACCORDANCE WITH 40 CFR 268.7 AND ANY/OR 264.73(C), THE GENERATOR HEREBY PROVIDES NOTICE THAT THE WASTE IS RESTRICTED FROM LAND DISPOSAL. A COPY OF THIS FORM MUST BE KEPT BY THE GENERATOR FOR FIVE(5) YEARS FROM THE DATE OF SHIPMENT

SKDOT#: 0000704

WASTE NAME: SOLVENT 125
WASTE CODE(S): D001 F016 D039 D040
TREATABILITY GROUP: NONWASTEWATERS

EPA WASTE CODE	WASTE DESCRIPTION AND TREATMENT/REGULATORY SUBCATEGORY OR REGULATED HAZARDOUS CONSTITUENT	TREATMENT STANDARD (*) CONCENTRATION OR TECHNOLOGY CODE
D001	HIGH TOT IGNITABLE CHARACTERISTIC WASTE	RORGS; OR CMBST **
D018	BENZENE	10 MG/KG ****
D039	TETRACHLOROETHYLENE	6.0 MG/KG ****
D040	TRICHLOROETHYLENE	7.0 MG/KG ****

THE CONSTITUENT CONCENTRATION IS BASED ON KNOWLEDGE OF THE WASTE (VIA MATERIAL SAFETY DATA SHEETS FOR THE CHEMICAL(S) USED AND THE PROCESS WHICH CREATED THE WASTE).

NOTES: * THESE TREATMENT STANDARDS DO NOT PRECLUDE RECLAMATION PRIOR TO FINAL DISPOSITION.
** NEW TREATMENT STANDARDS UNDER FEDERAL RULES EFFECTIVE 12-19-94.
*** TREATMENT STANDARDS APPLICABLE IN CERTAIN HSWA-AUTHORIZED STATES AND MEET UNIVERSAL TREATMENT STANDARDS
**** NEW TREATMENT STANDARDS UNDER FEDERAL RULES EFFECTIVE 7-8-96.
***** NEW TREATMENT STANDARDS UNDER FEDERAL RULES EFFECTIVE 8-24-98.
ONE NOTICE: GENERATOR IS NOT REQUIRED TO TEST UNDERLYING CONSTITUENTS WHEN TREATER MONITORS FOR ALL REGULATED CONSTITUENTS PRIOR TO DISPOSAL.
EXP NOTICE: THIS FORM EXPIRES ON 12/31/99

GENERATOR NAME: DRILLER METOD (USA) INC. EPA ID: NYD057731663

SEQ#: 107 LOC: 111908 CUST: 0-118-00-1 ACC TYPE: 01 REF#: 998285 SW: 9907

TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFER

DEFINITIONS

Accumulation

A site that does not hold RCRA Interim Status or a RCRA permit (i.e., a site that does not have active RCRA Part A or Part B permit applications) may accumulate hazardous waste for a short period of time before shipping it off site. The waste must be accumulated in either tanks or containers; it may not be accumulated in surface impoundments. For further information consult 6 NYCRR Part 372.2(a)(8).

Generators of more than 1,000 kg (2,200 lbs) of non-acute hazardous waste per month may accumulate their waste for up to 90 days before shipping it off site.

Generators of 100 kg (220 lbs) to 1,000 kg (2,200 lbs) of hazardous waste per month may accumulate up to 6,000 kg of waste for up to 180 days before shipping it off site. If the nearest treatment, storage, disposal, or recycling facility to which they can send their waste is more than 200 miles away, they may accumulate their waste for 270 days.

Activity/Production Index

A measure of changes in production, activity, economics and/or other factors that affected the quantity of hazardous waste generated in 1993, compared to 1992. The Index is used to distinguish inter-year hazardous waste generation quantity changes resulting from waste reduction activity, and from changes resulting from production, activity, economics or other factors.

Acute Hazardous Waste

Any hazardous waste with an EPA Waste Code beginning with the letter "P", or any of the following "F" codes: F020, F021, F022, F023, F026, and F027. These wastes are subject to stringent quantity standards for accumulation and generation.

By-product Material

(1) any radioactive material (except special nuclear material) yielded in or made radioactive by exposure to the radiation incident to the process of producing or utilizing special nuclear material; and (2) the tailings or wastes produced by the extraction or concentration of uranium or thorium from any ore processed primarily for its source material content.

Chemical Abstracts Service (CAS) Number

The Chemical Abstracts Service (CAS) number identifies a toxic chemical by a unique eight-digit number.

Confidential Business Information (CBI)

Information a facility does not wish to make available to the general public for competitive business reasons. Confidential Business Information (CBI) may be claimed for certain information in your report. A claim may be made in accordance with 6 NYCRR Part 616.

Conditionally Exempt Small Quantity Generator (CESQG)

A CESQG meets the following criteria every month:

(a) in every single month, the site generated no more than 100 kg (220 lbs) of non-acute hazardous waste, and no more than 1 kg (2.2 lbs) of acute hazardous waste, and no more than 100 kg (220 lbs) of material from the cleanup spillage of acute hazardous waste; and

(b) the site accumulated at any time no more than 1,000 kg (2,200 lbs) of non-acute hazardous waste, and no more than 1 kg (2.2 lbs) of acute hazardous waste, and no more than 100 kg (220 lbs) of material from the cleanup of a spillage of acute hazardous waste; and

Note: Definitions are not legally binding.

State of New Jersey
Department of Environmental Protection and Energy
Hazardous Waste Regulation Program
Manifest Section
CN 421, Trenton, NJ 08625-0421

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.
Manifest Document No.
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number
NJA

B. State Generator's ID

5. Transporter 1 Company Name
6. US EPA ID Number
C. State Transporter's ID

7. Transporter 2 Company Name
8. US EPA ID Number
D. Transporter's Phone ( )
E. State Transporter's ID

9. Designated Facility Name and Site Address
10. US EPA ID Number
F. Transporter's Phone ( )
G. State Facility's ID
H. Facility's Phone ( )

11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group)

	HM	12. Containers No.	Type	13. Total Quantity	14. Unit WT/Vol	Waste No.
a.	X					
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above
a.
b.
c.
d.

K. Handling Codes for Wastes Listed Above
a.
b.
c.
d.

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

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Printed/Typed Name
Signature
Month Day Year

GENERATOR

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

TRANSPORTER

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name
Signature
Month Day Year

FACILITY

EPA Form 8700-22 (Rev. 9/88) Previous editions are obsolete.

SIGNATURE INFORMATION *MUST* BE LEGIBLE ON ALL COPIES

G. TOP MAIL TO GENERATOR

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

PESUL 00600

State of New Jersey
Department of Environmental Protection and Energy
Hazardous Waste Regulation Program
Manifest Section
CN 421, Trenton, NJ 08625-0421

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.
Manifest Document No.
2. Page 1 of
Information in the shaded areas is not required by Federal law.

A. State Manifest Document Number
NJA 2581201

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

5. Transporter 1 Company Name
6. US EPA ID Number

7. Transporter 2 Company Name
8. US EPA ID Number

9. Designated Facility Name and Site Address
10. US EPA ID Number

SERVICE-TECH CORP.
1200 SYCAMORE STREET
CINCINNATI, OH 45230

14a. State Generator's ID

G. State Trans. ID
Date No.

D. Transporter 1 Phone

E. State Trans. ID
Date No.

F. Transporter 2 Phone

G. State Facility ID

H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group)

	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.
a.	X		TM		P
b.					
c.					
d.					

GENERATOR

J. Additional Descriptions for Materials Listed Above
J.1

K. Handling Codes for Wastes Listed Above

a. c.
b. d.

a. c.
b. d.

15. Special Handling Instructions and Additional Information

EMERGENCY RESPONSE CONTACT 24 HRS. [illegible]
SE [illegible] AUTHORIZED TO OBTAIN LICENSED [illegible]
POLICE [illegible]
SERVICE [illegible]

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Printed/Typed Name | Signature | Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name | Signature | Month Day Year

EPA Form 8700-22 (Rev. 9/88) Previous editions are obsolete.

SIGNATURE AND INFORMATION *MUST* BE LEGIBLE ON ALL COPIES

8—GENERATOR COPY

P2SUL006002

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

NJA 2581201

Is your RETURN ADDRESS completed on the reverse side?

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
State of New Jersey
Dept. of Environmental Protection
and Energy
Hazardous Waste Reg. Program
Manifest Section
CN 421, Trenton, NJ 08625-0421

4a. Article Number
Z 024 624 332

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)
STATE OF NEW JERSEY
CAPITOL POST OFFICE

8. Addressee's Address (Only if requested and fee is paid)

6.

Thank you for using Return Receipt Service.

RECEIPT

PS Form 3800, March 1993

Receipt for Certified Mail
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Z 024 624 332

Sent to NJ DEPT ENVIR & ENERGY-HAZ WASTE PROTE
Street and No. MANIFEST SECTION CN 421
P.O., State and ZIP Code TRENTON NJ 08625-0421

Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	$

Postmark or Date

Fold at line over top of envelope to the right of the return address

CERTIFIED MAIL

Z 024 624 332

Is your RETURN ADDRESS completed on the reverse side?

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
State of New Jersey
Dept. of Environmental Protection
and Energy
Hazardous Waste Reg. Program
Manifest Section
CN 421, Trenton, NJ 08625-0421

4a. Article Number
Z 024 624 332

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

Thank you for using Return Receipt Service.

PS Form 3811, December 1991 *U.S. GPO: 1993—352-714 DOMESTIC RETURN RECEIPT

Code	Waste description
HAZARDOUS WASTE FROM NONSPECIFIC SOURCES	
F001	The following spent halogenated solvents used in degreasing: Tetrachloroethylene, trichlorethylene, methylene chloride, 1,1,1-trichloroethane, carbon tetrachloride and chlorinated fluorocarbons; all spent solvent mixtures/blends used in degreasing containing, before use, a total of ten percent or more (by volume) of one or more of the above halogenated solvents or those solvents listed in F002, F004, and F005; and still bottoms from the recovery of these spent solvents and spent solvent mixtures.
F002	The following spent halogenated solvents: Tetrachloroethylene, methylene chloride, trichloroethylene, 1,1,1-trichloroethane, chlorobenzene, 1,1,2-trichloro-1,2,2-trifluoroethane, ortho-dichlorobenzene, trichlorofluoromethane, and 1,1,2, trichloroethane; all spent solvent mixtures/blends containing, before use, a total of ten percent or more (by volume) of one or more of the above halogenated solvents or those solvents listed in F001, F004, and F005; and still bottoms from the recovery of these spent solvents and spent solvent mixtures.
F003	The following spent non-halogenated solvents: Xylene, acetone, ethyl acetate, ethyl benzene, ethyl ether, methyl isobutyl ketone, n-butyl alcohol, cyclohexanone, and methanol; all spent solvent mixtures/ blends containing, before use, only the above spent nonhalogenated solvents; and all spent solvent mixtures/blends containing, before use, one or more of the above nonhalogenated solvents, and a total of ten percent or more (by volume) of one or more of those solvents listed in F001, F002, F004, and F005; and still bottoms from the recovery of these spent solvents and spent solvent mixtures.
F004	The following spent nonhalogenated solvents: cresols, cresylic acid, and nitrobenzene; and the still bottoms from the recovery of these solvents; all spent solvent mixtures/blends containing, before use, a total of ten percent or more (by volume) of one or more of the above nonhalogenated solvents or those solvents listed in F001, F002, and F005; and still bottoms from the recovery of these spent solvents and spent solvent mixtures.
F005	The following spent nonhalogenated solvents: toluene, methyl ethyl ketone, carbon disulfide, isobutanol, pyridine, benzene, 2-ethoxyethanol, and 2-nitropropane; all spent solvent mixtures/blends containing, before use, a total of ten percent or more (by volume) of one or more of the above nonhalogenated solvents or those solvents listed in F001, F002, or F004; and still bottoms from the recovery of these spent solvents and spent solvent mixtures.
F006	Wastewater treatment sludges from electroplating operations except from the following processes: (1) sulfuric acid anodizing of aluminum; (2) tin plating on carbon steel; (3) zinc plating (segregated basis) on carbon steel; (4) aluminum or zinc-aluminum plating on carbon steel; (5) cleaning/stripping associated with tin, zinc, and aluminum plating on carbon steel; and (6) chemical etching and milling of aluminum.
F007	Spent cyanide plating bath solutions from electroplating operations.
F008	Plating bath residues from the bottom of plating baths from electroplating operations in which cyanides are used in the process.
F009	Spent stripping and cleaning bath solutions from electroplating operations in which cyanides are used in the process.

FORM GM

Box B: EPA hazardous waste code

Enter the EPA hazardous waste code(s) that applies to the waste reported in Box A. EPA hazardous waste codes are listed beginning on page 74. If you need more room for additional codes, create a continuation page as described in the Special Instructions section beginning on page 49. If more than one waste code applies, list the primary waste code (the code that best describes the mixture) first.. If fewer than five codes are applicable, leave the remaining spaces blank. If the waste is regulated only by the New York State, leave all spaces blank.

Box C: State hazardous waste code

Enter the New York State hazardous waste codes that apply to the waste reported in Box A. The codes and descriptions are provided on page 73 . Otherwise, leave Box C blank. Again, if you have more than one waste code, list the primary waste code first. If you need space for additional codes, make a continuation page.

Box D: SIC Code

Enter the four-digit Standard Industrial Classification (SIC) Code of the overall production, distribution, or service activity of the site that generated this waste. Please provide the SIC Code for the overall activity of the site, even if a different code better describes the specific industrial process that generated the waste. SIC Codes are listed beginning on page 62.

Box E: Origin and system type

Review the origin codes below. Enter the code that best describes the process or activity that was the source of the hazardous waste reported in Box A. If the waste being reported is a residual, report the system type that generated it in the space provided.

Code	Origin
1	The hazardous waste was generated on site from a production process, service activity, or routine cleanup. This includes off-specification, spent or out-of-date chemicals and wastes from facility manitenance and housekeeping. **Examples:** Floor sweepings Contaminated personnel protective equipment Wastes from closed loop recycling systems Laboratory clean outs
2	The hazardous waste was the result of a spill cleanup, equipment decommissioning, or other remedial cleanup activity.
3	The hazardous waste was derived from the management of a non-hazardous waste.
4	The hazardous waste was received from off site and was not recycled or treated on site.
5	The hazardous waste was a residual from the on-site treatment, disposal, or recycling of a previously existing hazardous waste.

☞	**Skip to Box F** if you selected code 1, 2, 3, or 4. **Report System Type** if you selected code 5.

CR	J.K. 2/7/05
FS	
OFFC	

Site Address:
SAME

25

PPW 11/19/2004
WORK ORDER NO. D3912218

DOCUMENT NO. 58454

STRAIGHT BILL OF LADING

TRANSPORTER 1 Clean Harbors Env Services Inc — VEHICLE ID # 5182 / 087643

EPA ID # M A D 0 3 9 3 2 2 2 5 0 — TRANS. 1 PHONE (781) 849-1800

TRANSPORTER 2 Maxmee Express, Inc. — VEHICLE ID # 5141/090827

EPA ID # NJD 986607380 — TRANS. 2 PHONE (805) 742-5542

DESIGNATED FACILITY			SHIPPER		
Spring Grove Resource Recovery			Sulzer Metco US Inc		
FACILITY EPA ID #			SHIPPER EPA ID #		
O H D 0 0 0 8 1 6 6 2 9			N Y D 1 3 1 3 1 8 6 5 1		
ADDRESS			ADDRESS		
4879 Spring Grove Avenue			1101 Prospect Avenue		
CITY	STATE	ZIP	CITY	STATE	ZIP
Cincinnati	OH	45232	Westbury	NY	11590

CONTAINERS NO. & SIZE	TYPE	HM	DESCRIPTION OF MATERIALS	TOTAL QUANTITY	UNIT WT/VOL
2x55	DM		A. NON DOT REGULATED MATERIAL, (ABSORBENT PADS, OIL FILTERS), NON DOT HAZARDOUS, NONE	295	P
1x55	DM		B. NON DOT REGULATED MATERIAL, (KITCHEN GREASE), NON DOT HAZARDOUS, NONE	432	P
4x55	DM		C. NON DOT REGULATED MATERIAL, (NYLON SOLIDS), NON DOT HAZARDOUS, NONE	768	P
1x55	DM		D. NON DOT REGULATED MATERIAL, (WATER SOLUBLE OIL), NON DOT HAZARDOUS, NONE	420	P
			~~E. UNIVERSAL WASTE, (MERCURY CONTAINING BULBS), NONE, NONE~~		
3x55	DM		F. NON DOT REGULATED MATERIAL, (PETROLEUM OIL), NON DOT HAZARDOUS, NONE	1178	P
2x4'	CF		G. NON DOT REGULATED MATERIAL, (UNIVERSAL WASTE LIGHT TUBES), NON DOT HAZARDOUS, NONE	40	P
			H.		

SPECIAL HANDLING INSTRUCTIONS
A: CH189102 B: CH66105 C: CH189144 D: CH189141 E: CHCFL2-48 F: CH189111 G: CHCFL1-63

EMERGENCY PHONE #: (800) 483-3718

DEPE07259 NJ DECAL # 087643

SHIPPERS CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

	PRINT	SIGN	DATE
SHIPPER	DAVID WALZAK		2/4/05
TRANSPORTER 1	FRANK RICCIANDELLI		2/4/05
TRANSPORTER 2	MICHAEL PAYNE		2/9/05
RECEIVED BY	Nicole Kody		02/10/05

1

CHI 107

CleanHarbors® ENVIRONMENTAL SERVICES, INC.

Land Disposal Restriction Notification Form

Date: 11 / 04 / 2004

MANIFEST INFORMATION

Generator: Sulzer Metco US Inc
Address: 1101 Prospect Avenue
Westbury, NY 11590
EPA ID#: N Y D 1 3 1 3 1 8 6 5 1

Manifest No
MDC1025883
Sales Order No: D3875061
Manifest Document No:

Waste analysis data, where available, is attached

Signature: [illegible]
Print Name: DAVID WALCZAK
Title: Fac Spec III
Date: 11/5/04

WASTEWATER DISCHARGE PERMIT

Permittee:	Spring Grove Resource Recovery, Inc. (Clean Harbors)	**MSD Permit Number:**	CIU-0113
		Effective Date:	1/1/2007
Address:	4879 Spring Grove Avenue Cincinnati, Ohio 45232	**Expiration Date:**	12/31/2009
		Federal: 437	

In accordance with the provisions of Article XV, Rules and Regulations of the Metropolitan Sewer District of Greater Cincinnati, Hamilton County, Ohio (known hereinafter as "MSD"), the Permittee is authorized to discharge into the Wastewater Treatment System of MSD subject to the conditions set forth herein.

Issuance of this permit does not constitute expressed or implied approval or permission for a violation of any provision of MSD Rules and Regulations, nor does issuance constitute a waiver by the Department of Sewers, City of Cincinnati, or the Board of County Commissioners of Hamilton County, Ohio, of the right to seek any lawful remedy or penalty for any such violation.

In case the permit makes reference to, or includes in its terms, a plan for pretreating wastewater before its discharge into the Wastewater Treatment System, the issuance of the permit shall not constitute expressed or implied agreement or guarantee that the pretreatment facility constructed in accordance with said plan will operate as intended or in compliance with applicable MSD Rules and Regulations, or that the wastewater so pretreated will be acceptable for discharge to the Wastewater Treatment System.

This permit may be modified by MSD, as required or authorized by MSD Rules and Regulations, or as required by the Federal Government or agencies thereof.

Failure on the part of the Permittee to fulfill any of the specified conditions shall be sufficient cause for immediate revocation of this permit. This permit is further subject to termination upon thirty (30) days written notice to the Permittee by an authorized representative of MSD.

Violations of this permit are punishable by civil penalties of up to $10,000 per violation and by criminal penalties of up to $25,000 per violation or six months in prison or both.

Any assignment or transfer of this permit shall automatically make it void.

Beverly B. Head
Superintendent
Division of Industrial Waste

James A. Parrott
Director - Interim

closure plan and closure cost estimate in the revised application did not satisfy those conditions. As a result, we are unable to grant such an exemption.

The revised application states that the maximum inventory of PCB waste proposed for storage at the site will be scaled back from 87,344 gallons in containers by limiting storage to 11,880 gallons in containers. Although the closure cost estimate may be adjusted to account for the limited storage, comments 3, 13.f, 20-22, 25, 28, 30, 32, and 35-40 of the enclosure must be satisfactorily addressed prior to any reduction in the actual closure cost assurance.

Financial assurance for TSCA closure can continue to be provided for through the use of closure insurance, as specified in 40 CFR 761.65(g)(5), while the facility operates under interim approval. However, until the cancellation, exclusion and fund location issues relating to the use of insurance, as identified in the memorandum from Tony Baney, Chief, Operations Branch to Regional Toxic Substance Branch Chiefs, dated July 5, 1995 (enclosed) have been addressed, closure insurance may not be used as the financial assurance mechanism for TSCA closure under a final TSCA approval.

Finally, since storage of PCBs in Building H or on the roll-off pad was not addressed in the July 1990 or August 1991 commercial storage applications, the storage of PCBs in Building H or on the roll-off pad under interim approval to commercially store PCB waste is prohibited.

If you have any questions regarding this letter or the enclosed comments, please contact me at 312-353-2291.

Sincerely,

Tony Martig

Tony Martig, Environmental Engineer
Toxics Program Section

Enclosures

§20.1001 Purpose.

(a) The regulations in this part establish standards for protection against ionizing radiation resulting from activities conducted under licenses issued by the Nuclear Regulatory Commission. These regulations are issued under the Atomic Energy Act of 1954, as amended, and the Energy Reorganization Act of 1974, as amended.

(b) It is the purpose of the regulations in this part to control the receipt, possession, use, transfer, and disposal of licensed material by any licensee in such a manner that the total dose to an individual (including doses resulting from licensed and unlicensed radioactive material and from radiation sources other than background radiation) does not exceed the standards for protection against radiation prescribed in the regulations in this part. However, nothing in this part shall be construed as limiting actions that may be necessary to protect health and safety.

PART 20 -- STANDARDS FOR PROTECTION AGAINST RADIATION

Subpart A -- General Provisions

Source: 56 FR 23391, May 21, 1991, unless otherwise noted.

20.1001 Purpose.

20.1002 Scope.

20.1003 Definitions.

20.1004 Units of radiation dose.

20.1005 Units of radioactivity.

20.1006 Interpretations.

20.1007 Communications.

20.1008 Implementation.

20.1009 Reporting, recording, and application requirements: OMB approval.

Subpart B -- Radiation Protection Programs

Source: 56 FR 23396, May 21, 1991, unless otherwise noted.

20.1101 Radiation protection programs.

Subpart C -- Occupational Dose Limits

Source: 56 FR 23396, May 21, 1991, unless otherwise noted.

20.1201 Occupational dose limits for adults.

20.1202 Compliance with requirements for summation of external and internal doses.

20.1203 Determination of external dose from airborne radioactive material.

20.1204 Determination of internal exposure.

20.1205 [Reserved]

20.1206 Planned special exposures.

20.1207 Occupational dose limits for minors.

20.1208 Dose to an embryo/fetus.

Subpart D -- Radiation Dose Limits for Individual Members of the Public

Source: 56 FR 23398, May 21, 1991, unless otherwise noted.

20.1301 Dose limits for individual members of the public.

20.1302 Compliance with dose limits for individual members of the public.

Subpart E -- Radiological Criteria for License Termination

20.1401 General provisions and scope.

20.1402 Radiological criteria for unrestricted use.

20.1403 Criteria for license termination under restricted conditions.

20.1404 Alternate criteria for license termination.

20.1405 Public notification and public participation.

20.1406 Minimization of contamination.

Subpart F -- Surveys and Monitoring

Source: 56 FR 23398, May 21, 1991, unless otherwise noted.

20.1501 General.

20.1502 Conditions requiring individual monitoring of external and internal occupational dose.

Subpart G -- Control of Exposure From External Sources in Restricted Areas

Source: 56 FR 23398, May 21, 1991, unless otherwise noted.

20.1601 Control of access to high radiation areas.

20.1602 Control of access to very high radiation areas.

Subpart H -- Respiratory Protection and Controls to Restrict Internal Exposure in Restricted Areas

Source: 56 FR 23400, May 21, 1991, unless otherwise noted.

20.1701 Use of process or other engineering controls.

20.1702 Use of other controls.

20.1703 Use of individual respiratory protection equipment.

20.1704 Further restrictions on the use of respiratory protection equipment.

Subpart I -- Storage and Control of Licensed Material

Source: 56 FR 23401, May 21, 1991, unless otherwise noted.

20.1801 Security of stored material.

20.1802 Control of material not in storage.

Subpart J -- Precautionary Procedures

Source: 56 FR 23401, May 21, 1991, unless otherwise noted.

20.1901 Caution signs.

20.1902 Posting requirements.

20.1903 Exceptions to posting requirements.

20.1904 Labeling containers.

20.1905 Exemptions to labeling requirements.

20.1906 Procedures for receiving and opening packages.

Subpart K -- Waste Disposal

Source: 56 FR 23403, May 21, 1991, unless otherwise noted.

20.2001 General requirements.

20.2002 Method for obtaining approval of proposed disposal procedures.

20.2003 Disposal by release into sanitary sewerage.

20.2004 Treatment or disposal by incineration.

20.2005 Disposal of specific wastes.

20.2006 Transfer for disposal and manifests.

20.2007 Compliance with environmental and health protection regulations.

Subpart L -- Records

Source: 56 FR 23404, May 21, 1991, unless otherwise noted.

20.2101 General provisions.

20.2102 Records of radiation protection programs.

20.2103 Records of surveys.

20.2104 Determination of prior occupational dose.

20.2105 Records of planned special exposures.

20.2106 Records of individual monitoring results.

20.2107 Records of dose to individual members of the public.

20.2108 Records of waste disposal.

20.2109 [Reserved]

20.2110 Form of records.

Subpart M -- Reports

Source: 56 FR 23406, May 21, 1991, unless otherwise noted.

20.2201 Reports of theft or loss of licensed material.

20.2202 Notification of incidents.

20.2203 Reports of exposures, radiation levels, and concentrations of radioactive material exceeding the constraints or limits.

20.2204 Reports of planned special exposures.

20.2205 Reports to individuals of exceeding dose limits.

20.2206 Reports of individual monitoring.

Subpart N -- Exemptions and Additional Requirements

Source: 56 FR 23408, May 21, 1991, unless otherwise noted.

20.2301 Applications for exemptions.

20.2302 Additional requirements.

Subpart O -- Enforcement

20.2401 Violations.

20.2402 Criminal penalties.

Appendix A to Part 20 -- Protection Factors for Respirators

Appendix B to Part 20 -- Annual Limits on Intake (ALIs) and Derived Air Concentrations (DACs) of Radionuclides for Occupational Exposure; Effluent Concentrations; Concentrations for Release to Sewerage

Appendix C to Part 20 -- Quantities of Licensed Material Requiring Labeling

Appendix D to Part 20 -- United States Nuclear Regulatory Commission Regional Offices

Appendix E to Part 20 -- [Reserved]

Appendix F to Part 20 -- [Reserved]

Appendix G to Part 20 -- Requirements for Transfers of Low-Level Radioactive Waste Intended for Disposal at Licensed Land Disposal Facilities and Manifests

Authority: Secs. 53, 63, 65, 81, 103, 104, 161, 182, 186, 68 Stat. 930, 933, 935, 936, 937, 948, 953, 955, as amended, sec. 1701, 106 Stat. 2951, 2952, 2953 (42 U.S.C. 2073, 2093, 2095, 2111, 2133, 2134, 2201, 2232, 2236, 2297f), secs. 201, as amended, 202, 206, 88 Stat. 1242, as amended, 1244, 1246 (42 U.S.C. 5841, 5842, 5846).

(IMPORTANT: Type or print; read instructions before completing form)

Form Approved OMB Number: 2070-0093
Approval Expires: 11/92

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FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Aluminum Powder

WHERE TO SEND COMPLETED FORMS:
1. EPCRA Reporting Center, P.O. Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

For EPA use only

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 94

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?
[ ] Yes (Answer question 2.2; Attach substantiation forms)
[X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [X] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official: Joseph D. Reardon, Global Quality

Signature: Joseph D Reardon

Date Signed: July 20, 1995

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name	Sulzer Metco (US) Inc.
TRI Facility ID Number	11590PRKNL1101P
Street Address	1101 Prospect Avenue
City	Westbury
County	Nassau
State	New York
Zip Code	11590
Mailing Address (if different from street address)	
City	
State	
Zip Code	

PUT LABEL HERE

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PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Aluminum Powder

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check a or b; check c if applicable)	a. ☐ An entire facility	b. ☒ Part of a facility	c. ☐ A Federal facility			
4.3	Technical Contact	Name: Joseph D. Reardon			Telephone Number (include area code): (516) 334-1300		
4.4	Public Contact	Name: Joseph D. Reardon			Telephone Number (include area code): (516) 334-1300		
4.5	SIC Code (4-digit)	a. 3542	b.	c.	d.	e.	f.
4.6	Latitude and Longitude	Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		075	09	50	027	53	16
4.7	Dun & Bradstreet Number(s) (9 digits)	a. 15-208-4398					
		b.					
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. NYD131318651					
		b.					
4.9	Facility NPDES Permit Number(s) (9 characters)	a. N/A					
		b.					
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. N/A					
		b.					

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	☐ NA Sulzer Inc.
5.2	Parent Company's Dun & Bradstreet Number	☐ NA (9 digits) 00-182-6957

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PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Aluminum Powder

SECTION 1. TOXIC CHEMICAL IDENTITY

(Important: DO NOT complete this section if you complete Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	7429-90-5
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	Aluminum (Fume or Dust)
1.3	Generic Chemical Name (Important: Complete **only** if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)
	N/A

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
	N/A

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1	**Manufacture the toxic chemical:**	a. ☐ Produce b. ☐ Import	If produce or import: c. ☐ For on-site use/processing d. ☐ For sale/distribution e. ☐ As a byproduct f. ☐ As an impurity
3.2	**Process the toxic chemical:**	a. ☐ As a reactant b. ☐ As a formulation component	c. ☐ As an article component d. ☐ Repackaging
3.3	**Otherwise use the toxic chemical:**	a. ☐ As a chemical processing aid b. ☐ As a manufacturing aid	c. ☒ Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	04 (Enter two-digit code from instruction package.)	

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Aluminum Powder

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X] NA			
5.2	Stack or point air emissions	[ ] NA	A	C	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name: N/A				
5.3.2	Stream or Water Body Name: N/A				
5.3.3	Stream or Water Body Name: N/A				
5.4	Underground injections on-site	[X] NA			
5.5	Releases to land on-site				
5.5.1	Landfill	[X] NA			
5.5.2	Land treatment/ application farming	[X] NA			
5.5.3	Surface impoundment	[X] NA			
5.5.4	Other disposal	[X] NA			

[ ] Check here only if additional Section 5.3 information is provided on page 5 of this form.

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Aluminum Powder

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3	Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__	Stream or Water Body Name			
	N/A			
5.3.__	Stream or Water Body Name			
	N/A			
5.3.__	Stream or Water Body Name			
	N/A			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)
N/A	

6.1.B POTW Name and Location Information

6.1.B.__ POTW Name	N/A	6.1.B.__ POTW Name	
Street Address		Street Address	
City	County	City	County
State	Zip Code	State	Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ]
(example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Aluminum Powder

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. Off-site EPA Identification Number (RCRA ID No.): NJD089216790

Off-Site Location Name: Chemical Waste Managemet of New Jersey, Inc.

Street Address: 100 Lister Avenue

City: Newark | County:

State: New Jersey | Zip Code: 07105 | Is location under control of reporting facility or parent company? [X] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. B	1. M	1. M 72
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: N/A

Street Address:

City: | County:

State: | Zip Code: | Is location under control of reporting facility or parent company? [ ] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Section 6.2 page this is, here. [ ] (example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounc

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Aluminum Powder

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] **Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.**

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b 1 2 3 4 5 6 7 8	7A.1c	7A.1d %	7A.1e Yes No
7A.2a	7A.2b 1 2 3 4 5 6 7 8	7A.2c	7A.2d %	7A.2e Yes No
7A.3a	7A.3b 1 2 3 4 5 6 7 8	7A.3c	7A.3d %	7A.3e Yes No
7A.4a	7A.4b 1 2 3 4 5 6 7 8	7A.4c	7A.4d %	7A.4e Yes No
7A.5a	7A.5b 1 2 3 4 5 6 7 8	7A.5c	7A.5d %	7A.5e Yes No

If additional copies of page 7 are attached, indicate the total number of pages in this box [ ] and indicate which page 7 this is, here. [ ] (example: 1, 2, 3, etc.)

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Aluminum Powder

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.**

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.**

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Chemical, Category, or Generic Name
Aluminum Powder

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

All quantity estimates can be reported using up to two significant figures.		Column A Prior Year (pounds/year)	Column B Current Reporting Year (pounds/year)	Column C Following Year (pounds/year)	Column D Second Following Year (pounds/year)
8.1	Quantity released *	0	0	0	0
8.2	Quantity used for energy recovery on-site	0	0	0	0
8.3	Quantity used for energy recovery off-site	0	0	0	0
8.4	Quantity recycled on-site	0	0	0	0
8.5	Quantity recycled off-site	200	200	200	200
8.6	Quantity treated on-site	0	0	0	0
8.7	Quantity treated off-site	0	0	0	0
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	N/A			
8.9	Production ratio or activity index	.90			

8.10	Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.			
	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	N/A	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)	YES [ ]	NO [X]

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

Form Approved OMB No.: 2070-0093

Approval Expires: 01/91

(Important: Type or print; read instructions before completing form.)

EPA U.S. Environmental Protection Agency

TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

Public reporting burden for this collection of information is estimated to vary from 30 to 34 hours per response, with an average of 32 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Chief, Information Policy Branch (PM-223), US EPA, 401 M St., SW, Washington, D.C. 20460 Attn: TRI Burden and to the Office of Information and Regulatory Affairs, Office of Management and Budget Paperwork Reduction Project (2070-0093), Washington, D.C. 20603.

EPA FORM R

PART I. FACILITY IDENTIFICATION INFORMATION

(This space for your optional use.)

1.	1.1 Are you claiming the chemical identity on page 3 trade secret? [ ] Yes (Answer question 1.2; Attach substantiation forms.) [X] No (Do not answer 1.2; Go to question 1.3.)	1.2 If "Yes" in 1.1, is this copy: [ ] Sanitized [ ] Unsanitized	1.3 Reporting Year 19 89

2. CERTIFICATION (Read and sign after completing all sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official: Patrick A. Tighe Superintendent, Facilities

Signature: Patrick A. Tighe

Date signed: June 29, 1990

3. FACILITY IDENTIFICATION

3.1	Facility or Establishment Name: METCO DIVISION PERKIN-ELMER CORPORATION	
	Street Address: 1101 Prospect Avenue	
	City: Westbury	County: Nassau
	State: New York	Zip Code: 11590
	TRI Facility Identification Number: 11590PRKNL1101P	
3.2	This report contains information for (Check only one): a. [ ] An entire facility b. [X] Part of a facility.	
3.3	Technical Contact: Patrick A. Tighe	Telephone Number (include area code): 516 334-1300 Ext. 495
3.4	Public Contact: Same as 3.3	Telephone Number (include area code):
3.5	SIC Code (4 digit) a. 3542 b. c. d. e. f.	
3.6	Latitude: Degrees Minutes Seconds: 0750950	Longitude: Degrees Minutes Seconds: 0275316
3.7	Dun & Bradstreet Number(s) a. 057731663	b.
3.8	EPA Identification Number(s) (RCRA I.D. No.) a. NYD131318651	b.
3.9	NPDES Permit Number(s) a.	b.
3.10	Receiving Streams or Water Bodies (enter one name per box) a. N/A	b.
	c.	d.
	e.	f.
3.11	Underground Injection Well Code (UIC) Identification Number(s) a. N/A	b.

WHERE TO SEND COMPLETED FORMS:

1. EPCRA REPORTING CENTER
   P.O. BOX 23779
   WASHINGTON, DC 20026-3779
   ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix G)

4. PARENT COMPANY INFORMATION

4.1	Name of Parent Company: Perkin-Elmer Corp.	4.2	Parent Company's Dun & Bradstreet Number: 00-118-4480

(Important: Type or print; read instructions before completing form.)

EPA

EPA FORM R
PART II. OFF-SITE LOCATIONS TO WHICH TOXIC CHEMICALS ARE TRANSFERRED IN WASTES

(This space for your optional use.)

1. PUBLICLY OWNED TREATMENT WORKS (POTWs)

1.1 POTW name		1.2 POTW name	
N/A			
Street Address		Street Address	
City	County	City	County
State	Zip	State	Zip

2. OTHER OFF-SITE LOCATIONS (DO NOT REPORT LOCATIONS TO WHICH WASTES ARE SENT ONLY FOR RECYCLING OR REUSE).

2.1 Off-site location name		2.2 Off-site location name	
N/A			
EPA Identification Number (RCRA ID. No.)		EPA Identification Number (RCRA ID. No.)	
Street Address		Street Address	
City	County	City	County
State	Zip	State	Zip
Is location under control of reporting facility or parent company? [ ] Yes [ ] No		Is location under control of reporting facility or parent company? [ ] Yes [ ] No	

2.3 Off-site location name		2.4 Off-site location name	
EPA Identification Number (RCRA ID. No.)		EPA Identification Number (RCRA ID. No.)	
Street Address		Street Address	
City	County	City	County
State	Zip	State	Zip
Is location under control of reporting facility or parent company? [ ] Yes [ ] No		Is location under control of reporting facility or parent company? [ ] Yes [ ] No	

2.5 Off-site location name		2.6 Off-site location name	
EPA Identification Number (RCRA ID. No.)		EPA Identification Number (RCRA ID. No.)	
Street Address		Street Address	
City	County	City	County
State	Zip	State	Zip
Is location under control of reporting facility or parent company? [ ] Yes [ ] No		Is location under control of reporting facility or parent company? [ ] Yes [ ] No	

[ ] Check if additional pages of Part II are attached. How many? _____

(Important: Type or print; read instructions before completing form.)

EPA

EPA FORM R
PART III. CHEMICAL-SPECIFIC INFORMATION

(This space for your optional use.)

1. CHEMICAL IDENTITY (Do not complete this section if you complete Section 2.)

1.1	[Reserved]
1.2	CAS Number (Enter only one number exactly as it appears on the 313 list. Enter NA if reporting a chemical category.) 007440-02-5
1.3	Chemical or Chemical Category Name (Enter only one name exactly as it appears on the 313 list.) NICKEL POWDER
1.4	Generic Chemical Name (Complete only if Part I, Section 1.1 is checked "Yes." Generic name must be structurally descriptive.)

2. MIXTURE COMPONENT IDENTITY (Do not complete this section if you complete Section 1.)

Generic Chemical Name Provided by Supplier (Limit the name to a maximum of 70 characters (e.g., numbers, letters, spaces, punctuation).)

3. ACTIVITIES AND USES OF THE CHEMICAL AT THE FACILITY (Check all that apply.)

3.1	Manufacture the chemical:	a. [ ] Produce b. [ ] Import	If produce or import: c. [ ] For on-site use/processing e. [ ] As a byproduct	d. [ ] For sale/distribution f. [ ] As an impurity
3.2	Process the chemical:	a. [ ] As a reactant d. [ ] Repackaging only	b. [ ] As a formulation component	c. [X] As an article component
3.3	Otherwise use the chemical:	a. [ ] As a chemical processing aid	b. [ ] As a manufacturing aid	c. [ ] Ancillary or other use

4. MAXIMUM AMOUNT OF THE CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

[0][4] (enter code)

5. RELEASES OF THE CHEMICAL TO THE ENVIRONMENT ON-SITE

You may report releases of less than 1,000 pounds by checking ranges under A.1. (Do not use both A.1 and A.2)		A. Total Release (pounds/year) A.1 Reporting Ranges 0 / 1-499 / 500-999	A.2 Enter Estimate	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1 Fugitive or non-point air emissions	5.1a	[X] [ ] [ ]		5.1b [ ]	
5.2 Stack or point air emissions	5.2a	[X] [ ] [ ]		5.2b [ ]	
5.3 Discharges to receiving streams or water bodies (Enter letter code for stream from Part I Section 3.10 in the box provided.) 5.3.1 [ ]	5.3.1a	[N/A] [ ] [ ]		5.3.1b [ ]	5.3.1c %
5.3.2 [ ]	5.3.2a	[N/A] [ ] [ ]		5.3.2b [ ]	5.3.2c %
5.3.3 [ ]	5.3.3a	[N/A] [ ] [ ]		5.3.3b [ ]	5.3.3c %
5.4 Underground injection on-site	5.4a	[N/A] [ ] [ ]		5.4b [ ]	
5.5 Releases to land on-site 5.5.1 Landfill	5.5.1a	[N/A] [ ] [ ]		5.5.1b [ ]	
5.5.2 Land treatment/application farming	5.5.2a	[N/A] [ ] [ ]		5.5.2b [ ]	
5.5.3 Surface impoundment	5.5.3a	[N/A] [ ] [ ]		5.5.3b [ ]	
5.5.4 Other disposal	5.5.4a	[N/A] [ ] [ ]		5.5.4b [ ]	

[ ] (Check if additional information is provided on Part IV-Supplemental Information.)

(Important: Type or print; read instructions before completing form.)

EPA

EPA FORM R
PART III. CHEMICAL-SPECIFIC INFORMATION (continued)

(This space for your optional use.)

6. TRANSFERS OF THE CHEMICAL IN WASTE TO OFF-SITE LOCATIONS

You may report transfers of less than 1,000 pounds by checking ranges under A.1. (Do not use both A.1 and A.2)	A. Total Transfers (pounds/year) A.1 Reporting Ranges 0 / 1-499 / 500-999	A.2 Enter Estimate	B. Basis of Estimate (enter code)	C. Type of Treatment/ Disposal (enter code)
6.1.1 Discharge to POTW (enter location number from Part II, Section 1.) 1	[N/A] [ ] [ ]		6.1.1b	
6.2.1 Other off-site location (enter location number from Part II, Section 2.) 2	[N/A] [ ] [ ]		6.2.1b	6.2.1c M
6.2.2 Other off-site location (enter location number from Part II, Section 2.) 2	[N/A] [ ] [ ]		6.2.2b	6.2.2c M
6.2.3 Other off-site location (enter location number from Part II, Section 2.) 2	[N/A] [ ] [ ]		6.2.3b	6.2.3c M

[ ] (Check if additional information is provided on Part IV-Supplemental Information.)

7. WASTE TREATMENT METHODS AND EFFICIENCY

[NA] Not Applicable (NA) - Check if no on-site treatment is applied to any wastestream containing the chemical or chemical category.

A. General Wastestream (enter code)	B. Treatment Method (enter code)	C. Range of Influent Concentration (enter code)	D. Sequential Treatment? (check if applicable)	E. Treatment Efficiency Estimate	F. Based on Operating Data? Yes	No
7.1a	7.1b	7.1c	7.1d [ ]	7.1e %	7.1f [ ]	[ ]
7.2a	7.2b	7.2c	7.2d [ ]	7.2e %	7.2f [ ]	[ ]
7.3a	7.3b	7.3c	7.3d [ ]	7.3e %	7.3f [ ]	[ ]
7.4a	7.4b	7.4c	7.4d [ ]	7.4e %	7.4f [ ]	[ ]
7.5a	7.5b	7.5c	7.5d [ ]	7.5e %	7.5f [ ]	[ ]
7.6a	7.6b	7.6c	7.6d [ ]	7.6e %	7.6f [ ]	[ ]
7.7a	7.7b	7.7c	7.7d [ ]	7.7e %	7.7f [ ]	[ ]
7.8a	7.8b	7.8c	7.8d [ ]	7.8e %	7.8f [ ]	[ ]
7.9a	7.9b	7.9c	7.9d [ ]	7.9e %	7.9f [ ]	[ ]
7.10a	7.10b	7.10c	7.10d [ ]	7.10e %	7.10f [ ]	[ ]

[ ] (Check if additional information is provided on Part IV-Supplemental Information.)

8. POLLUTION PREVENTION: OPTIONAL INFORMATION ON WASTE MINIMIZATION

(Indicate actions taken to reduce the amount of the chemical being released from the facility. See the instructions for coded items and an explanation of what information to include.)

A. Type of Modification (enter code)	B. Quantity of the Chemical in Wastes Prior to Treatment or Disposal: Current reporting year (pounds/year)	Prior year (pounds/year)	Or percent change (Check (+) or (-))	C. Index	D. Reason for Action (enter code)
M 7			+ - %	.	R

EPA

EPA FORM R
PART IV. SUPPLEMENTAL INFORMATION

Use this section if you need additional space for answers to questions in Part III. Number the lines used sequentially from lines in prior sections (e.g., 5.3.4, 6.1.2, 7.11)

(This space for your optional use.)

ADDITIONAL INFORMATION ON RELEASES OF THE CHEMICAL TO THE ENVIRONMENT ON-SITE (Part III, Section 5.3)

You may report releases of less than 1,000 pounds by checking ranges under A.1. (Do not use both A.1 and A.2)		A. Total Release (pounds/year) A.1 Reporting Ranges 0 1-499 500-999	A.2 Enter Estimate	B. Basis of Estimate (enter code in box provided)	C.% From Stormwater
5.3 Discharges to receiving streams or water bodies	5.3.___ ☐	5.3.___a [ ] [ ] [ ]		5.3.___b ☐	5.3.___c %
(Enter letter code for stream from Part I Section 3.10 in the box provided.)	5.3.___ ☐	5.3.___a [ ] [ ] [ ]		5.3.___b ☐	5.3.___c %
	5.3.___ ☐	5.3.___a [ ] [ ] [ ]		5.3.___b ☐	5.3.___c %

ADDITIONAL INFORMATION ON TRANSFERS OF THE CHEMICAL IN WASTE TO OFF-SITE LOCATIONS (Part III, Section 6)

You may report transfers of less than 1,000 pounds by checking ranges under A.1. (Do not use both A.1 and A.2)	A. Total Transfers (pounds/year) A.1 Reporting Ranges 0 1-499 500-999	A.2 Enter Estimate	B. Basis of Estimate (enter code in box provided)	C. Type of Treatment/ Disposal (enter code in box provided)
6.1.___ Discharge to POTW (enter location number from Part II, Section 1.) 1 ☐	[ ] [ ] [ ]		6.1.___b ☐	
6.2.___ Other off-site location (enter location number from Part II, Section 2.) 2 ☐	[ ] [ ] [ ]		6.2.___b ☐	6.2.___c M ☐☐
6.2.___ Other off-site location (enter location number from Part II, Section 2.) 2 ☐	[ ] [ ] [ ]		6.2.___b ☐	6.2.___c M ☐☐
6.2.___ Other off-site location (enter location number from Part II, Section 2.) 2 ☐	[ ] [ ] [ ]		6.2.___b ☐	6.2.___c M ☐☐

ADDITIONAL INFORMATION ON WASTE TREATMENT METHODS AND EFFICIENCY (Part III, Section 7)

A. General Wastestream (enter code in box provided)	B. Treatment Method (enter code in box provided)	C. Range of Influent Concentration (enter code)	D. Sequential Treatment? (check if applicable)	E. Treatment Efficiency Estimate	F. Based on Operating Data? Yes No
7.___a ☐	7.___b ☐☐☐	7.___c ☐	7.___d [ ]	7.___e %	7.___f [ ] [ ]
7.___a ☐	7.___b ☐☐☐	7.___c ☐	7.___d [ ]	7.___e %	7.___f [ ] [ ]
7.___a ☐	7.___b ☐☐☐	7.___c ☐	7.___d [ ]	7.___e %	7.___f [ ] [ ]
7.___a ☐	7.___b ☐☐☐	7.___c ☐	7.___d [ ]	7.___e %	7.___f [ ] [ ]
7.___a ☐	7.___b ☐☐☐	7.___c ☐	7.___d [ ]	7.___e %	7.___f [ ] [ ]
7.___a ☐	7.___b ☐☐☐	7.___c ☐	7.___d [ ]	7.___e %	7.___f [ ] [ ]
7.___a ☐	7.___b ☐☐☐	7.___c ☐	7.___d [ ]	7.___e %	7.___f [ ] [ ]
7.___a ☐	7.___b ☐☐☐	7.___c ☐	7.___d [ ]	7.___e %	7.___f [ ] [ ]
7.___a ☐	7.___b ☐☐☐	7.___c ☐	7.___d [ ]	7.___e %	7.___f [ ] [ ]

WORK COPY PA

SITE NAME: METCO DIVISION PERKIN-ELMER PROSPECT AVENUE FACILITY

EPA ID NO. NYD 131 318 651

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

1993 HAZARDOUS WASTE REPORT

FORM GM

WASTE GENERATION AND MANAGEMENT

INSTRUCTIONS: Read the detailed instructions beginning on page 13 of the Hazardous Waste Report booklet before completing this form.

Sec I

A. Waste description: - Instructions, Page 15
LAB PACK OF POISONOUS LIQUID OUTDATED CHEMICALS FROM RESEARCH LABORATORY; LAB PACK OF MIXED CHEMICALS

B. EPA hazardous waste code: Instructions, Page 16: P029

C. New York State hazardous waste code: Instructions, Page 16

D. SIC code: Page 16: 3542

E. Origin Code: Page 16: 1
System type: M

F. Source code: Page 17: A 58

G. Point of measurement: Page 17: 1

H. Form code: Page 17: B 001

I. RCRA Radioactive- mixed: Page 17: 2

J. Reported TRI constituent: Page 18: 2

K. CAS numbers: Page 18
1. ____ 2. ____ 3. ____ 4. ____ 5. ____

Sec II

A. Quantity of Hazardous Waste generated in 1992: Instructions, Page 18: NA

B. Quantity of Hazardous Waste generated in 1993: - Instructions, Page 18: 50.0

C. UOM: Instr., Page 19: 1
Density: ____ ☐ 1. lbs/gal. ☐ 2. sg

D. Did this site treat on site, dispose of on site, recycle on site, or discharge to a sewer/POTW? Instr., Page 19
☐ 1. Yes (continue to system 1)
☒ 2. No (Skip to Sec. III)

ON-SITE SYSTEM 1 — PS Page Number
On-site system type Instr., Page 19: M
Quantity treated, disposed of, or recycled on site in 1993:

ON-SITE SYSTEM 2 — PS Page Number
On-site system type: Instr., Page 19: M
Quantity treated, disposed of, or recycled on site in 1993:

Sec III

A. Was any of this waste shipped off site in 1993? Instructions, Page 20
☒ 1. Yes (continue to Box "B")
☐ 2. No (Skip to Sec. IV)

	B. EPA ID Number of facility to which waste was shipped: Instr., Page 20	C. System type shipped to Instr., Page 20	D. Off-site availability code: Instr., Page 21	E. Total quantity shipped to this facility in 1993: Instr., Page 21
Site 1	NJD 089 216 790	M 041	1	50.0
Site 2		M		

Sec IV

A. Did any new activities in 1993 result in reduction of this waste? Instructions, Page 22
☐ 1. Yes (continue to Box "B")
☒ 2. No (This form is now complete)

B. Activity: - Instr., Page 22	C. Other effects? Instr., Page 22	D. Quantity recycled in 1993 due to new activities: Instr., Page 22	E. Activity/production index: Instr., Page 22	F. 1993 source reduction quantity: Instr., Page 24
W W / W W	☐ 1. Yes ☐ 2. No			

Comments:

CLEAR FLO TECHNOLOGIES, INC.
1110 A Rte. 109
N. Lindenhurst, N.Y. 11757
Tele: (631) 956-7600
Fax: (631) 956-7020

MANIFEST NUMBER

Part 1	Part 2	Part 3
041707	6:00 PM	
Date of Pick-Up	Time of Pick-Up	Cronological Number /Also Used as Sample #
(Use 2 Digit Numbers) Example 040103	(Military Time)	(Assigned at Clear Flo-Receiving Station)

LIQUID WASTE DISCHARGE MANIFEST

1. WASTEWATER STREAM IDENTIFICATION (Sections 1A, 1B, & 1C must be completed by generator or hauler)

A. Volume:	4000	Gallons	
B. Type:	☐ Leachate	☐ Storm Drain	☒ Other: Rinsate
C. Source:	☐ Home/Apt.	☒ Office/Commercial	☐ Municipal
			☐ Other

Description of Other and special handling instructions, if any _____

2. GENERATOR OF WASTEWATER (Sections 2A, 2B, & 2C must be completed by generator or hauler)

A. Complete Name (print or type): Sulzer Metco B. Tele. No.: 631-[illegible]

C. Complete Pickup Address: 1101 Prospect Place Huntington NY

ALL WASTEWATERS ARE SUBJECT TO THE TERMS AND CONDITONS CONTAINED IN THE DISCHARGE PERMIT

The undersigned, being duly authorized, does hereby certify to the best of their knowledge to the accuracy of the source and type of wastewater identified and subject to this manifest. **SECTION D GENERATOR SIGNATURE REQUIRED.**

D. Signature of Generator or Agent: [illegible] Date: 4-17-07

3. **HAULER OF LIQUID WASTE** (Sections 3A, 3B, 3C, 3D, and 3E must be completed by hauler)

A. Company Name (print or type): Eastern Environmental Solutions Inc.
B. SCDPW Permit No: _____ C. Vehicle License No: [illegible] D. Pump Out Date: 4-17-07
E. NYS DEC Permit No: 10698

The above described liquid waste was picked up and hauled by me to the disposal facility named below and was discharged. I certify under penalty of perjury that the foregoing is true and correct.

F. Signature of authorized agent and title: [illegible]

4. ACKNOWLEDGMENT OF CLEAR FLO TECHNOLOGIES, INC. (must be completed by disposer)

The above hauler delivered the described wastewater to the disposal facility and it was accepted.

Disposal Date: _____ Sample No.: _____

Signature of authorized agent and title: _____

PINK–GENERATOR YELLOW–TRANSPORTER WHITE–DISPOSAL FACILITY GOLD–FILE

Forms Completed by Platers, Inc.

Form IC (continued)

Section V collects information on the site's 1993 RCRA generator status. Code 1 is checked in **Box A** to indicate RCRA LQG status; **Box B** is skipped according to the instructions on the form.

Section VI ascertains on-site waste management status. In **Box A**, code 3 is entered to indicate that the site had RCRA-permitted or interim status storage during 1993; the site used RCRA-permitted storage containers. Code 1 is entered in **Box B** to indicate that the site had no RCRA-permitted or interim status treatment, disposal, or recycling units. Code 3 is entered in **Box C** to indicate that units exempt from RCRA permitting requirements were used during 1993 to treat RCRA hazardous waste.

Section VII asks about waste minimization activities implemented by the site during 1992 and 1993. "Yes" is checked in **Box A** because the site began recycling spent solvent in 1992. **Box B** is checked "Yes" to indicate that the site did systematically investigate opportunities for source reduction or recycling during 1992 or 1993. "No" is checked in **Box C** because the site never actively started a source reduction program even though it investigated the possibility of replacing the cadmium cyanide bath with a less toxic feedstock. In **Box D**, item c is checked "Yes" to indicate that new or additional source reduction activities were not economically feasible in 1992 or 1993; all other items in **Box D** are checked "No". In **Box E**, all items are checked "No" to indicate that no factors delayed or limited the site's ability to initiate new or additional on-site or off-site recycling activities during 1992 or 1993.

NYC 525985-7

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4/97)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Document No. | 2. Page 1 of | Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number NYC 525985-7

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. c.

b. d.

K. Handling Codes for Wastes Listed Above

a. c.

b. d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR,** if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford

Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

COPY 5-Generator-Mailed by TSD facility

P2SUL005460

NYC 525985-7

2-118-08

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4/97)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No.: NYD 057731663
Manifest Document No.: 65836
2. Page 1 of 1
Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address
SULZER METCO (US), INC
1101 PROSPECT AVE
WESTBURY NY 11590- 031
4. Generator's Phone (516) 938-1661

A. State Manifest Document Number: NYC 525985-7
B. Generator's ID: SAME

5. Transporter 1 (Company Name): SAFETY-KLEEN CORP.
6. US EPA ID Number: ILD 984908202

C. State Transporter's ID: ET42/17(NJ)
D. Transporter's Telephone: 516) 842-6311

7. Transporter 2 (Company Name)
8. US EPA ID Number

E. State Transporter's ID
F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address 211808
SAFETY-KLEEN CORP.
80 SEABRO
NO AMITYVILLE, NY 11701
10. US EPA ID Number: NYD 000708198

G. State Facility ID
H. Facility's Telephone: 516) 842-6311

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a. WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII(D001) (D006, D008, D018, D027D039D040) (ERG#128)	11	DM	81	G	EPA D001 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
I(A) D006 D008
(A) D018, D027, D039, D040
a. c.
b. d.

K. Handling Codes for Wastes Listed Above
a. R c.
b. d.

15. Special Handling Instructions and Additional Information
*
EMERGENCY RESP#1-800-468-1760 24HR
9823 95406510 065836 2-118-08-1500 01

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR**, if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford

Printed/Typed Name: L La Rusha
Signature
Mo. Day Year: 06 08 98

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: RICHARD ANDERSON
Signature: R Anderson
Mo. Day Year: 06 08 98

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name
Signature
Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name
Signature
Mo. Day Year

A: 10082 B: C: D:

COPY 3-Disposer State-mailed by generator

P2SUL005461

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

NYC 525985-7

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4/97)

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No.
Manifest Document No.
2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number NYC 525985-7

B. Generator's ID

5. Transporter 1 (Company Name)
6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name)
8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. c.

b. d.

K. Handling Codes for Wastes Listed Above

a. c.

b. d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

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Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name | Signature | Mo. Day Year

COPY 8-Generator-retained by generator

P2SUL005462

K54214-R3732 SAFETY-KLEEN CORP. 05/25/98 PAGE: 1
LOCATION: 211000 LAND DISPOSAL RESTRICTION NOTICE 15:31:12

TO: SAFETY-KLEEN CORP. EPA ID NO. NYD000708198
30 ROABRO (DESIGNATED FACILITY)
NO AMITYVILLE NY 11701

NJC259857

UNDER MANIFEST/SALES SERVICE NUMBER [illegible] THE GENERATOR NOTED BELOW IS SHIPPING YOU A WASTE DETERMINED TO BE RESTRICTED UNDER 40 CFR PART 268. IN ACCORDANCE WITH 40 CFR 268.7 AND ANYCRR 376.4(C), THE GENERATOR HEREBY PROVIDES NOTICE THAT THE WASTE IS RESTRICTED FROM LAND DISPOSAL. A COPY OF THIS FORM MUST BE KEPT BY THE GENERATOR FOR FIVE(5) YEARS FROM THE DATE OF SHIPMENT.

WASTE NAME: 6/62 SOLVENT 105 D001 SKDOT#: 0010082
WASTE CODE(S): D001 D006 D008 D018 D027 D039 D040
TREATABILITY GROUP: NONWASTEWATERS

EPA WASTE CODE	WASTE DESCRIPTION AND TREATMENT/REGULATORY SUBCATEGORY OR REGULATED HAZARDOUS CONSTITUENT	TREATMENT STANDARD (*) CONCENTRATION OR TECHNOLOGY CODE
D001	HIGH TOC IGNITABLE CHARACTERISTIC WASTE.	RORGS, OR CMBST **
D006	CADMIUM (CD)	1.0 MG/L TCLP
D008	LEAD (PB)	5.0 MG/L EP OR TCLP
D018	BENZENE	10 MG/KG ****
D027	P-DICHLOROBENZENE (1,4-DICHLOROBENZENE)	6.0 MG/KG ****
D039	TETRACHLOROETHYLENE	5.0 MG/KG ****
D040	TRICHLOROETHYLENE	6.0 MG/KG ****

N O T E S

THE CONSTITUENT COMPOSITION IS BASED ON KNOWLEDGE OF THE WASTE (VIA MATERIAL SAFETY DATA SHEETS FOR THE CHEMICAL(S) USED, AND THE PROCESS WHICH CREATED THE WASTE).

NOTES: * THESE TREATMENT STANDARDS DO NOT PRECLUDE RECLAMATION PRIOR TO FINAL DISPOSITION.
** NEW TREATMENT STANDARDS UNDER FEDERAL RULES EFFECTIVE 12-19-94.
*** TREATMENT STANDARDS APPLICABLE IN CERTAIN HSWA-AUTHORIZED STATES AND MEET UNIVERSAL TREATMENT STANDARDS.
**** NEW TREATMENT STANDARDS UNDER FEDERAL RULES EFFECTIVE 7-8-96.

UHC NOTICE: GENERATOR IS NOT REQUIRED TO LIST UNDERLYING CONSTITUENTS BECAUSE TREATER WILL MONITOR FOR ALL REGULATED CONSTITUENTS PRIOR TO DISPOSAL.

GENERATOR NAME: SUFFOLK REFCO (USA), INC EPA ID: NYD057731663

SEQ#: 1988 LOC: 211000 CUST: 3-118-08-1500 TERM: 01 REF#: 65836 SW: 9823

TOP COPY: GENERATOR MIDDLE COPY: [illegible] BOTTOM COPY: TRANSFER

P2SUL005463

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL
CONSERVATION
DIV SOLID & HAZARDOUS MATERIALS
MANIFEST SECTION
PO BOX 12820
ALBANY NY 12212

4a. Article Number

P 341 833 729

4b. Service Type

☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: *(Print Name)*

6. Signature: *(Addressee or Agent)*

X

8. Addressee's Address *(Only if requested and fee is paid)*

PS Form **3811**, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

P 341 833 729

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail *(See reverse)*

Sent to	STATE OF NEW YORK DEC DIV SOLID & HAZ MATERIALS
Street & Number	PO BOX 12820
Post Office, State, & ZIP Code	ALBANY NY 12212
Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form **3800**, April 1995

Fold at line over top of envelope to the right of the return address

CERTIFIED

P 341 833 729

MAIL

EPHM-2 REV. 5/97

STATE OF CONNECTICUT

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST PROGRAM
79 Elm St., Hartford, CT 06106-5127

Please type (or print) *(Form designed for use on elite (12-pitch) typewriter.)*

FOR STATE USE ONLY

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILL RESPONSE AT (203) 566-3338

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

COPY 3: FACILITY TO GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. [illegible] Manifest Document No. [illegible]
2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but may be required by State law

3. Generator's Name and Mailing Address
Colgate Palmolive Co. Inc.
1101 Prospect Avenue
Westbury, NY 11590

4. Generator's Phone (516 338-2337)

A. State Manifest Document Number: CT F 1107931

B. G.S.I. (Gen. Site Address): SAME

5. Transporter 1 Company Name: Clean Harbors Env Services Inc
6. US EPA ID Number: [illegible]

7. Transporter 2 Company Name: Oak Tanker Company Inc.
8. US EPA ID Number: [illegible]

C. S.T.I. (Trans. Lic. Plate #): [illegible]
D. Tran. Phone (201 849-1300
E. S.T.I. (Trans. Lic. Plate #): [illegible]
F. Tran. Phone ([illegible]

9. Designated Facility Name and Site Address: Clean Harbors of Conn Inc
51 Broderick Road
Bristol, CT 06010
10. US EPA ID Number: CTD000604488

G. State Facility's ID (Not Required)
H. Facility's Phone 860 583-8917

11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CORROSIVE AUTO SOLUTION, 8, (B), UN [illegible]	045	DT	02471	P	EPA D002 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
(L), (C, E), (ERG#: 154)
a. c.
b. d.

K. Handling Codes for Wastes Listed Above

	Interim	Final		Interim	Final
a.	T	D3	c.		
b.			d.		

15. Special Handling Instructions and Additional Information
IN EMERGENCY, CALL CHEM TREC 1-800-[illegible]
WO [illegible]
[illegible]

Point of Departure:

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR,** if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name: [illegible] | Signature: [illegible] | Month Day Year: [illegible]

17. Transporter 1 Acknowledgement of Receipt of Materials

TRANSPORTER

Printed/Typed Name: [illegible] | Signature: [illegible] | Month Day Year: [illegible]

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: [illegible] | Signature: [illegible] | Month Day Year: [illegible]

19. Discrepancy Indication Space

FACILITY

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: [illegible] | Signature: [illegible] | Month Day Year: [illegible]

EPA Form 8700-22 (Rev. 9/91) Form Approved OMB No.2050-0039

Clean Harbors has drop-off sites [illegible] waste [illegible]

COPY 3: FACILITY TO GENERATOR

P2SUL006776

EPHM-2 REV. 5/97

STATE OF CONNECTICUT

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST PROGRAM
79 Elm St., Hartford, CT 06106-5127

Please type (or print) *(Form designed for use on elite (12-pitch) typewriter.)*

FOR STATE USE ONLY

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law, but may be required by State law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number **CT F 1107931**

B. G.S.I. (Gen. Site Address)

5. Transporter 1 Company Name — 6. US EPA ID Number

7. Transporter 2 Company Name — 8. US EPA ID Number

C. S.T.I. (Trans. Lic. Plate #)

D. Tran. Phone ( )

9. Designated Facility Name and Site Address — 10. US EPA ID Number

E. S.T.I. (Trans. Lic. Plate #)

F. Tran. Phone ( )

G. State Facility's ID (Not Required)

H. Facility's Phone

11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above	Interim	Final	Interim	Final
a.	c.	a.			c.	
b.	d.	b.			d.	

15. Special Handling Instructions and Additional Information

Point of Departure:

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.

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Printed/Typed Name	Signature	Month	Day	Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year

GENERATOR — TRANSPORTER — FACILITY

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILL RESPONSE AT (203) 696-3338

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

COPY 8: GENERATOR RETAINS

EPA Form 8700-22 (Rev. 9/91) Form Approved OMB No.2050-0039

COPY 8: GENERATOR RETAINS

P2SUL006777

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21. Generator's US EPA ID No. NYD013138651

Manifest Document No. 07431

22. Page

Information in the shaded areas is not required by Federal law.

23. Generator's Name: Sulzer Metco US Inc, 1101 Prospect Ave, Westbury NY 11590

L. State Manifest Document Number

M. State Generator's ID

24. Transporter 3 Company Name: Clean Harbors Environmental

25. US EPA ID Number: MAD039322250

N. State Transporter's ID

O. Transporter's Phone

26. Transporter ___ Company Name

27. US EPA ID Number

P. State Transporter's ID

Q. Transporter's Phone

	28. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	29. Containers No.	Type	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
a.							
b.							
c.							
d.							
e.							
f.							
g.							
h.							
i.							

GENERATOR

S. Additional Descriptions for Materials Listed Above

T. Handling Codes for Wastes Listed Above

32. Special Handling Instructions and Additional Information

TRANSPORTER

33. Transporter 3 Acknowledgement of Receipt of Materials

Printed/Typed Name: Robert J. Mac

Signature

Date: Month 10 Day 28 Year 02

34. Transporter ___ Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date: Month Day Year

FACILITY

35. Discrepancy Indication Space

Style CF 18 LABELMASTER® (800) 621-5808 www.labelmaster.com

EPA Form 8700-22A (Rev. 9-88) Previous editions are obsolete.

TRANSPORTER #1

48-14-1 (9/86)—7f

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type.

Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. N Y D 1 3 1 3 1 8 6 5 1 — Manifest Document No. 1 8 6 5 1

2. Page 1 of

Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
METCO
1102 PROSPECT AVE.
WESTBURY, N.Y. 11590

4. Generator's Phone (516) 334 4300

A. State Manifest Document No. NY A 640268 1

B. Generator's ID SAME

C. [redacted]

5. Transporter 1 (Company Name) TECHTRONICS ECOLOGICAL CORP

6. US EPA ID Number N Y D 0 0 0 8 2 4 3 3 4

D. Transporter's Phone (718) 522 3838

7. Transporter 2 (Company Name)

8. US EPA ID Number

E. State Transporter's ID [illegible]

F. Transporter's Phone ( )

9. Designated Facility Name and Site Address
TECHTRONICS ECOLOGICAL CORP
8 WALWORTH ST
BROOKLYN, N.Y. 11205

10. US EPA ID Number N Y D 0 0 0 8 2 4 3 3 4

G. State Facility's ID

H. Facility's Phone (718) 522 3838

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. (TOLUENE) (F005) "RQ"WASTE,FLAMMABLE LIQUID NOS,FLAMMABLE LIQUID UN1993	2	D M	1210	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials listed Above
a. TOLUENE c.
b. d.

K. Handling Codes for Wastes Listed Above
a. B c.
b. d.

15. Special Handling Instructions and Additional Information

PO# 73231

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

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Printed/Typed Name: Ahmhm Tercher — Signature: [signature] — Mo. Day Year: 01 20 88

GENERATOR

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: LUIS TORRES — Signature: [signature] — Mo. Day Year: 01 20 88

18. Transporter 2 (Acknowledgement or Receipt of Materials)
Printed/Typed Name — Signature — Mo. Day Year

TRANSPORTER

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: Marilyn Brown — Signature: [signature] — Mo. Day Year: 01 20 88

FACILITY

NY A 640268 1

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

EPA Form 8700-22 (Rev. 9-86) Previous edition is obsolete.

COPY 3—Generator—mailed by TSD facility

To PURCHASING DEPT.

Date 1/12/88

To be used for waste disposal

Date required ASAP

METCO INC.

REQUEST FOR PURCHASE

REQUISITION NUMBER: 23481

PURCHASE ORDER NO. 73231

CONTACT = Marilyn

TEL. NO. = 718 522-3838

SHIP VIA	F.O.B.	TERMS	PROMISED DELIVERY DATE
YT	SP	7 30	1/18/88

GRAY AREAS FOR PURCHASING USE ONLY

ITEM	QUANTITY	DESCRIPTION	TAX	PRICE
	15	55 gal drums of Unichrome Lacquer		
		to be disposed of per all legal requirements		125.00 ea
		per quote #6464 dated 4/13/87		
		Arrange pick up schedule with Mr. Teicher		
		EPA I.D. # NYD 13318651		
		With PO Copy		
				TOTAL

SUGGESTED SOURCE OF SUPPLY: Technic 718-522-3838

WORK ORDER NUMBER	CHARGE NUMBER	REQUESTED BY	APPROVED BY	APPROVED BY
	11.69	A. Teicher	A. Teicher	

BUYER

DELIVER TO: PLANT Newport Hq. DEPT. Plant Engineering ATTN. A. Teicher

RETURN TO REQUISITIONER

RETAIN BY REQUISITIONER

P2SUL008519

48-14-1 (9/86)—7f

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type.

Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. NYD131131651 — Manifest Document No. 13651

2. Page 1 of — Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
MEMCO
1102 PROSPECT AVE.
WESTBURY, N.Y. 11590

4. Generator's Phone (516) 334 4300

A. State Manifest Document No. NY A 640268 1

B. Generator's ID [redacted]

5. Transporter 1 (Company Name) TECHTRONICS ECOLOGICAL CORP

6. US EPA ID Number NYD000824334

C. [redacted]

D. Transporter's Phone (718) 522 3836

7. Transporter 2 (Company Name)

8. US EPA ID Number

E. State Transporter's ID [illegible]

F. Transporter's Phone ( )

9. Designated Facility Name and Site Address
TECHTRONICS ECOLOGICAL CORP
3 WALWORTH ST
BROOKLYN, N.Y. 11205

10. US EPA ID Number NYD000824334

G. State Facility's ID

H. Facility's Phone (718) 522 3836

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. (TOLUENE) (F005) RQ WASTE, FLAMMABLE LIQUID NOS, FLAMMABLE LIQUID UN1993	[illegible]	DM	[illegible]	G	F005
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
a. TOLUENE b. c. d.

K. Handling Codes for Wastes Listed Above
a. [illegible] b. c. d.

15. Special Handling Instructions and Additional Information

PO# 73231

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

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Printed/Typed Name — Signature — Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name — Signature — Mo. Day Year

18. Transporter 2 (Acknowledgement or Receipt of Materials)
Printed/Typed Name — Signature — Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Mo. Day Year

GENERATOR

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

NY A 640268 1

EPA Form 8700-22 (Rev. 9-86) Previous edition is obsolete. **COPY 8—Generator—retained by generator**

BOWE SYSTEC INC
99 SEAVIEW BOULEVARD
PORT WASHINGTON, NY 11050-4610
Sales: (516) 621-3300
Parts & Service: (516) 621-3374
Accounting: (516) 621-3453
Fax: (516) 621-3569

May 3, 1993

Mr. Jim Zanetti
METCO
325 Duffy Avenue
Hicksville, N.Y.

Dear Jim Zanetti,

As you may know, Bowe Systec, Inc. is the owner of the property located immediately adjacent to the east of the Metco facility (at Section 11, Block H, Lot 484). Both of our properties are shown on the enclosed tax map for reference and accuracy.

Recently, we have been directed by the New York State Department of Environmental Conservation (NYSDEC) to conduct a groundwater investigation in the area surrounding our facility. Based on the groundwater flow direction map (constructed by our hydrogeologist) in this area of Hicksville and the location of Metco's recharge basin, a temporary well must be drilled and installed on your property. The purpose of the temporary well is to conduct a subsurface sampling program to determine background conditions for our property. We therefore seek your written authorization to access the recharge basin on your property so that we may conduct the work as required by NYSDEC.

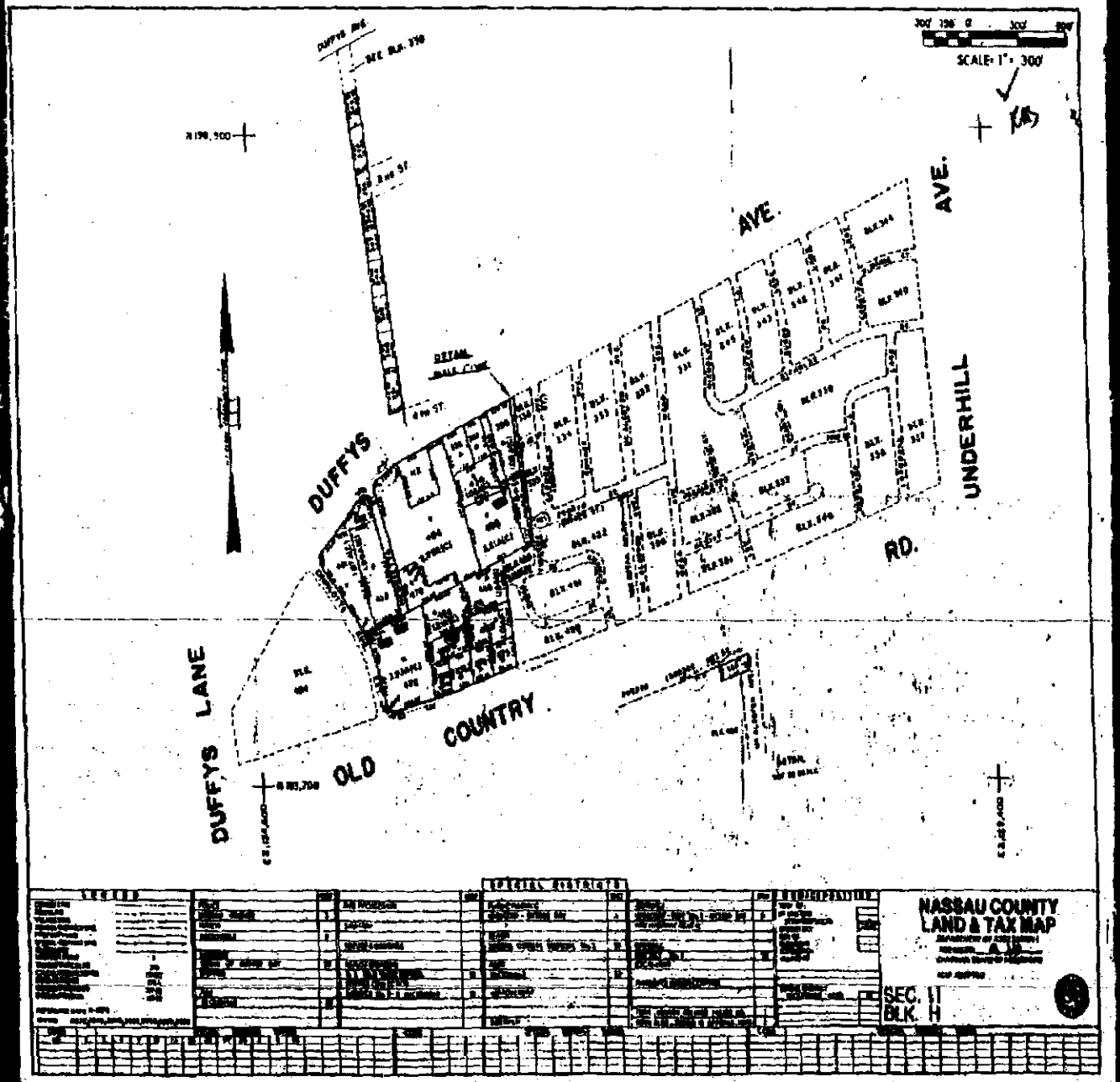
We will provide all necessary efforts in order to access the drilling location and will not obstruct your normal daily business operations while we are working. In addition, your site will also be restored to the pre-existing conditions (after our work) at no cost to you.

Since the importance of time has been stressed by NYSDEC, we ask that you provide us with your written authorization within the next week. Should you require any additional information from Bowe regarding this matter, please feel free to call me at any time.

Very truly yours,

Richard Reilly
National Service Director

Enclosure
cc: John Lombard
Harold Shaw, Esq.
Jamie Ascher, NYSDEC
Martin O. Klein, C.P.G.


SCALE: 1" = 300'
DUFFYS AVE.
DUFFYS LANE
OLD COUNTRY RD.
UNDERHILL AVE.
RETAIL
NASSAU COUNTY
LAND & TAX MAP
SEC. 11
BLK. H

Form Approved OMB No 2050 0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: PERKIN-ELMER CORPORATION METCO DIVISION
Street: 220 MILLER PLACE
City: HICKSVILLE County: NASSAU State: NY Zip: 11801
SIC Code: 3399 Dun & Brad Number: 05-773-1663

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name
Name: JOSEPH MACRI Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY, NY 11590

Emergency Contact
Name: JOSEPH MACRI Title: MANAGER FACILITIES
Phone: (516) 334-1300 EXT. 2374 24 Hr Phone: (800) 424-9300
Name: Title:
Phone: ( ) 24 Hr Phone: ( )

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 92

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7440-02-0 Trade Secret ☐ Chem. Name: Nickel Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 04 Avg. Daily Amount (code): 04 No. of Days On-site (days): 365	D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Production Floor	☐
CAS 7440-47-3 Trade Secret ☐ Chem. Name: Chromium Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire X Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 03 Avg. Daily Amount (code): 03 No. of Days On-site (days): 365	D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor Hardened Steel Hoppers E 1 4 Warehouse, Production Floor I 1 4 Production Floor	☐
CAS 7440-48-4 Trade Secret ☐ Chem. Name: Cobalt Check all that apply: Pure X, Mix X, Solid X, Liquid ☐, Gas ☐, EHS ☐ EHS Name:	Fire X Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code): 04 Avg. Daily Amount (code): 04 No. of Days On-site (days): 365	D 1 4 Warehouse, Production Floor N 1 4 Production Floor R 1 4 Production Floor Hardened Steel Hoppers E 1 4 Production Floor I 1 4 Production Floor	☐

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 2 and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

JOSEPH MACRI MANAGER FACILITIES
Name and official title of owner operator OR owner operator's authorized representative

Signature: J Macri

02-26-93
Date signed

Optional Attachments

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

48-14-1 (3-89)-7f

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

Form Approved OMB No. 2050-0039, Expires 9-30-94

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No.

2. Page 1 of

Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number: NY C 222351-6

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Phone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility's ID

H. Facility's Phone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	1		7		EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a | c

b | d

K. Handling Codes for Wastes Listed Above

a | c

b | d

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR**, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Bill Powers | Signature | Mo. Day Year: 04 07 93

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)

Printed/Typed Name: Carey Carlson | Signature | Mo. Day Year: 04 07 93

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name: J. Zimmerman | Signature | Mo. Day Year: 04 07 93

NY C 222351-6

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 5-Generator-Mailed by TSD facility

P2SUL005711

48-14-1 (3-89)–7f

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

Form Approved OMB No. 2050-0039, Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest Document No.

2. Page 1 of

Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number

NY C 22 b

B. Generator's ID

5. Transporter 1 (Company Name)

6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Phone ( )

7. Transporter 2 (Company Name)

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone ( )

9. Designated Facility Name and Site Address

10. US EPA ID Number

G. State Facility's ID

H. Facility's Phone

( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a

c

b

d

K. Handling Codes for Wastes Listed Above

a

c

b

d

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically able and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is me and that I can afford.

Signature Mo. Day Year

edgement of Receipt of Materials)

Signature Mo. Day Year

Receipt of Materials)

Signature Mo. Day Year

Enter

y received.

manifest. The
provide ultimate

mail copies to
's State

ational Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

NY C 22235

P2SUL005712

safety-kleen®

2-118-08

NOTICE OF LAND DISPOSAL RESTRICTION OF WASTE

TO: SAFETY-KLEEN CORP.
(DESIGNATED FACILITY)

EPA ID NO. NYD000708199
(DESIGNATED FACILITY)

80 SEABRC

ADDRESS: NO AMITYVILLE NY 11701

OPTION A

Under manifest number _____, the generator noted below is shipping to you a waste determined to be restricted under 40 CFR Part 268. In accordance with 40 CFR Part 268.7, the generator hereby provides notice that the waste is restricted from land disposal. A copy of this form must be kept by the generator and facility for five (5) years from the date of waste shipment.

OPTION B
SQG CUSTOMERS ONLY
(PARTS WASHER AND IMMERSION CLEANER 609 AND 699)

In accordance with 40 CFR 268.7, the generator hereby provides notice that the waste is restricted from land disposal. I am a small quantity generator (100-1,000 kg/mo) in accordance with 40 CFR 268.7. This notice applies to all waste shipments under my service contract with Safety-Kleen Corp. It covers today's shipment on manifest No. NYC 222 [illegible] 6, or sales/service acknowledgement No. 245 [illegible], and all subsequent shipments. A copy of this notice will be maintained with the service contract(s) or sales/service acknowledgment(s) for five (5) years beyond the termination of the service contract.

PLEASE CHECK THE APPROPRIATE BOXES

✓	WASTE NAME	EPA * WASTE CODE	THE WASTE MAY CONTAIN THE FOLLOWING RESTRICTED CONSTITUENTS	TREATMENT STANDARD (mg/l) OR METHOD (FOR NON-WASTE WATER)
☑	Waste Petroleum Naphtha (105)	D001, D018, D039,	Ignitable Liquid (High TOC Subcategory) Halogenated Organic Compounds (HOC's) ≥ 1000 mg/l Benzene Tetrachloroethylene	Incineration (INCIN), fuel substitution (FSUBS) or recovery (RORGS) (40 CFR 268.42) (non-waste water) INCIN (40 CFR 268.42) (non-waste water) Not Established Not Established
☐	Waste Petroleum Naphtha (140)	D001,	Ignitable Liquid (High TOC Subcategory)	INCIN, FSUBS, or RORGS (40 CFR 268.42) (non-waste water)
☐	Waste Petroleum Naphtha (sludges from Safety-Kleen Service Center Operations)	D001, D006, D007, D008, D039,	All of the above, plus: __ Cadmium __ Chromium __ Lead __ Tetrachloroethylene	 1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste Water) Not Established
☐	Waste Compound Cleaning Liquid/ Immersion cleaner 699	 D006, D007, D008, D018, D021, D027, D039, D040,	HOC's ≥ 1000 mg/l __ Cadmium __ Chromium __ Lead __ Benzene __ Chlorobenzene __ 1, 4-Dichlorobenzene __ Tetrachloroethylene __ Trichloroethylene	INCIN (40 CFR 268.42) (non-waste water) 1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste Water Not Established Not Established Not Established Not Established Not Established
☐	Waste Perchloroethylene	F002,	Tetrachloroethylene	5.6 (non-waste water)
☐	Waste Perc. Filters This hazardous debris is subject to the alternative treatment standards of 40CFR 268.45.	F002,	Tetrachloroethylene	5.6 (non-waste water)
☐	Waste Trichlorotrifluoroethane	F002,	Trichlorotrifluoroethane	28.0 (non-waste water)
☐	Waste 1,1,1 Trichloroethane	F002,	1, 1, 1 Trichloroethane	5.6 (non-waste water)
☐	Waste Petroleum Naphtha (Dry Cleaning)	D001, D039,	Ignitable Liquid (High TOC Subcategory) Tetrachloroethylene	INCIN, FSUBS, or RORGS (40 CFR 268.42) (non-waste water) Not Established
☐	Waste Paint Related Material	F003, F005, F003, F005, F003, F003, D001, D006, D007, D008,	Acetone Methyl Ethyl Ketone Methyl Isobutyl Ketone Toluene Xylene Methanol Ignitable Liquid (High TOC Subcategory) Cadmium Chromium Lead (TOC Subcategory)	160.0 (non-waste water) 36.0 (non-waste water) 33.0 (non-waste water) 28.0 (non-waste water) 28.0 (non-waste water) 0.75(non-waste water) INCIN, FSUBS, or RORGS (40 CFR 268.42) (non-waste water) 1.0 (non-waste water) 5.0 (non-waste water) 5.0 (non-waste water)
☐	Waste Antifreeze	D008, D039,	Lead Tetrachloroethylene	5.0 (non-waste water) Not Established

GENERATOR

The constituent composition is based on knowledge of the waste (via Material Safety Data Sheets for the chemical(s) used, and the process which created the waste).

*These treatment standards do not preclude reclamation prior to final disposition. 2314 2-113-08-1500 04 [illegible]

Generator Company: [illegible] EPA ID NO.: NYD057731663

Generator's Signature: X [signature] Date: 4-7-93

Printed Name and Title of Generator: Bill Bonnano VP MGR

Safety-Kleen Corp. manages the above waste through its recycling and fuels programs in accordance with all applicable elements of the land disposal restrictions.

Part No. 1328 (1/93)

VEOLIA
ENVIRONMENTAL SERVICES

SHIPPING DOCUMENT	1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Shipping Document Tracking Number
	NYD131318651	1	(800) 535-5053	ZZ 00013309

5. Generator's Name and Mailing Address
SULZER METCO (US), INC.
1101 PROSPECT AVENUE
ATTN: PETER DIPIETRANTONIO
WESTBURY, NY 11590
Generator's Phone: 516 338-2337

Generator's Site Address (if different than mailing address): SAME

6. Transporter 1 Company Name: FREEHOLD CARTAGE INC — U.S. EPA ID Number: NJD054126164

7. Transporter 2 Company Name — U.S. EPA ID Number:

8. Designated Facility Name and Site Address
VEOLIA ES TECHNICAL SOLUTIONS L.L.C.
1 EDEN LANE
FLANDERS, NJ 07836
Facility's Phone: 973 347-1909 — U.S. EPA ID Number: NJD980536593

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Codes		
	1. NON HAZARDOUS MATERIAL, NONE, NONE	056	DM	33600	P	ID27 L		
	2. USED CONSUMER ELECTRONICS FOR RECYCLE, NONE, NONE	002 ~~001~~	CF	0080 ~~00500~~	P	NONE R		
	3. ~~NON HAZARDOUS ELECTRONICS NONE, NONE~~	1		300	P	~~NONE~~		
	4.							

14. Special Handling Instructions and Additional Information
INFOTRAC ACCOUNT #86072
Line 1 = Solid Waste (VEX 5218) NJDEP 20071-21023
Licence Plate # 1653939 (ME) County of origin Nassau

15. **GENERATOR S/OFFEROR S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

Generator's/Offeror's Printed/Typed Name: JOHN E. MONSALVE — Signature: [signature] — Month 03 Day 12 Year 07

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Shipment
Transporter 1 Printed/Typed Name: Anthony Callamaras — Signature: [signature] — Month 03 Day 12 Year 07
Transporter 2 Printed/Typed Name — Signature — Month Day Year

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Changes to Line 2+3 verified with Generator [signature] 3/13/07
Shipping Document Tracking Number:
18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)
1. H141 2. H141 3. H141 4.

20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in Item 18a — 6:30
Printed/Typed Name: David Esposito — Signature: [signature] — Month 3 Day 12 Year 07

GENERATOR — INT'L — TRANSPORTER — DESIGNATED FACILITY

DESIGNATED FACILITY TO GENERATOR

VEOLIA
ENVIRONMENTAL SERVICES

SHIPPING DOCUMENT	1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Shipping Document Tracking Number
	[illegible]	1	[illegible]	ZZ 00013309

GENERATOR

5. Generator's Name and Mailing Address: SULZER METCO (US), INC. / 1101 SHOPPER AVENUE / ALLENTOWN (LEHIGH) PA 18109 / VALLEY, NY 10309
Generator's Site Address (if different than mailing address): SAME
Generator's Phone: [illegible]

6. Transporter 1 Company Name: [illegible] / U.S. EPA ID Number: [illegible]

7. Transporter 2 Company Name / U.S. EPA ID Number:

8. Designated Facility Name and Site Address: VEOLIA ES TECHNICAL SOLUTIONS LLC / 1 FELLOW LANE / FLANDERS, NJ 07836 / U.S. EPA ID Number: [illegible]
Facility's Phone: [illegible]

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Codes
	1. NON-HAZARDOUS MATERIAL, NOT REGULATED	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
	2. USED CONSUMER ELECTRONICS FOR RECYCLING, NOS	[illegible] 2	[illegible]	[illegible] 8	[illegible]	NONE [illegible]
	3.					
	4.					

14. Special Handling Instructions and Additional Information: [illegible]

15. **GENERATOR S/OFFEROR S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

Generator's/Offeror's Printed/Typed Name: [illegible] | Signature: [illegible] | Month | Day | Year

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Shipment
Transporter 1 Printed/Typed Name: Anthony Cattamarra | Signature: [illegible] | Month: 03 | Day | Year
Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY

16. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Shipping Document Tracking Number:

18b. Alternate Facility (or Generator) | U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)

1.	2.	3.	4.

20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in Item 18a
Printed/Typed Name | Signature | Month | Day | Year

GENERATOR / SHIPPER'S INITIAL COPY

VEOLIA
ENVIRONMENTAL SERVICES

SHIPPING DOCUMENT	1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Shipping Document Tracking Number
	NYD131318651	1	(800) 535-5053	ZZ 00013309

5. Generator's Name and Mailing Address
SULZER METCO (US), INC.
1101 PROSPECT AVENUE
ATTN: PETER DIPIETRANTONIO
WESTBURY, NY 11590
Generator's Phone: 516 338-2337

Generator's Site Address (if different than mailing address)
SAME

6. Transporter 1 Company Name
FREEHOLD CARTAGE INC
U.S. EPA ID Number: NJD054126164

7. Transporter 2 Company Name
U.S. EPA ID Number:

8. Designated Facility Name and Site Address
VEOLIA ES TECHNICAL SOLUTIONS L.L.C.
1 EDEN LANE
FLANDERS, NJ 07836
Facility's Phone: 973 347-1909
U.S. EPA ID Number: NJD980536693

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Codes
	1. NON HAZARDOUS MATERIAL, NONE, NONE	056	DM	33600	P	ID27 L
	2. USED CONSUMER ELECTRONICS FOR RECYCLE, NONE, NONE	001	CF	00800	P	NONE R
	3. ~~NON HAZARDOUS MATERIAL, NONE, NONE~~	~~1~~		~~300~~		
	4.					

14. Special Handling Instructions and Additional Information
INFOTRAC ACCOUNT #88072

16. **GENERATOR S/OFFEROR S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

Generator's/Offeror's Printed/Typed Name: [illegible] Signature: [illegible] Month 03 Day [illegible] Year [illegible]

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Shipment
Transporter 1 Printed/Typed Name: Anthony Callamaras Signature: [illegible] Month 03 Day 12 Year 0[illegible]
Transporter 2 Printed/Typed Name: Signature: Month Day Year

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Shipping Document Tracking Number:
18b. Alternate Facility (or Generator) U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in Item 18a
Printed/Typed Name Signature Month Day Year

GENERATOR / SHIPPER'S INITIAL COPY

CleanHarbors
ENVIRONMENTAL SERVICES, INC.

Land Disposal Restriction Notification Form

Date: 02 / 01 / 2007

MANIFEST INFORMATION

Generator: Sulzer Metco US Inc
Address: 1101 Prospect Avenue
Westbury, NY 11590
EPA ID#: N Y D 1 3 1 3 1 8 6 5 1

Manifest No
000600960FLE
Sales Order No: D31382248
Manifest Document No:

LINE ITEM INFORMATION

Line Item:	Page No:	Profile No:	Treatability Group:	LDR Disposal Category:
1	1	CH189135	NON- WASTEWATER	2 : This is subject to LDR.

EPA Waste Codes
D007

EPA Waste Subcategory
Toxicity Characteristic for Chromium

Certification

Applies to Manifest Line Items

Pursuant to 40 CFR 268.7(a), I hereby notify that this shipment contains waste restricted under 40 CFR Part 268. 1

Waste analysis data, where available, is attached

Signature: [signature]
Print Name: DAVID WALZAK
Title: FOUNDRY TECH.
Date: 2/2/07

SULZER

Sulzer Metco (US) Inc.
1101 Prospect Avenue
Westbury, NY 11590
United States of America
www.sulzermetco.com
(516) 334-1300

FEDERAL EXPRESS

February 28, 2006

New York State
Department of Environmental Conservation
Division of Solid & Hazardous Materials
Hazardous Waste Manifest & Reporting Section
9th Floor
625 Broadway
Albany, NY 12233-7250

Subject: 2005 Hazardous Waste Generator Report

Dear Sir/Madam:

Enclosed is the completed 2005 Hazardous Waste Generator Report for Sulzer Metco's facility located at 1101 Prospect Avenue in Westbury, New York, EPA ID# NYD 131318651.

Please feel free to contact us with any questions.

Sincerely,
Sulzer Metco (US) Inc.

Peter DiPietrantonio
Environmental, Health & Safety Specialist

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS
625 BROADWAY, 9th FLOOR, ALBANY, NY 12233-7251
Phone: (518) 402-8610 • FAX: (518) 402-9024 (Attn: BHWR)

2005 HAZARDOUS WASTE REGULATORY FEE INFORMATION FORM

NOTE: Please carefully read the instructions before completing the form.

SECTION 1 - GENERAL

NAME OF GENERATOR OR TSD FACILITY: SULZER METCO (US), INC.
EPA ID #: NYD113113816511

FACILITY MAILING ADDRESS: 1101 PROSPECT AVENUE

CITY: WESTBURY
STATE: NY
ZIP CODE: 11590

LOCATION OF GENERATOR OR FACILITY (If different from above): SAME

AT LEAST ONE BLOCK MUST BE CHECKED (see definitions)
☒ Generator Only ☐ Treatment, Storage, Disposal (TSD) Facility Only ☐ Generator and TSD Facility

SECTION II - GENERATOR (Report all quantities in TONS) Please see the Instructions

1.(a) TOTAL HAZARDOUS WASTE (other than wastewater) generated at this facility in 2005, including any recycled or exempted waste: 7.8 tons
(b) Hazardous Waste exempted from Regulatory Fees by 72-0402(1) and 3(1)* (if any): — tons
(c) SUBTRACT Line (b) from Line (a): 7.8 tons

2.(a) TOTAL HAZARDOUS WASTEWATER generated at this facility in 2005, including that treated by on-site systems and including recycled or exempted wastewater: — tons
(b) Hazardous Wastewater exempted from Regulatory Fees by 72-0402(1) and 3(1)* (if any): — tons
(c) SUBTRACT Line (b) from Line (a): — tons

3. Recycled Waste: ECL 72-0403(2) contains an exemption from Surcharge Fees for recycled waste for those recycling more than 90% of hazardous waste or hazardous wastewater. Claims (including backup documentation) for the recycling exemption must be made by means of a written certification submitted to the Department in addition to this form (see instructions). If applicable, show the amounts claimed to be eligible for the 90% recycling exemption from Surcharge Fees for 2005:
(a) Recycled Hazardous Waste — tons
(b) Recycled Hazardous Wastewater — tons

* 72-0402(1) & 72-0403(1) only exempt universal wastes, & certain remedial wastes from formally approved Department programs

SECTION III - TREATMENT, STORAGE AND DISPOSAL FACILITY (Complete This Section ONLY If Your Facility is a RCRA TSD Facility)

1. Please check all applicable Hazardous Waste TSD Facility units.
☐ Landfill ☐ Surface Impoundment
☐ Incinerator/Energy Recovery How Many Incinerators/Energy Recovery Units? _____
2. TOTAL HAZARDOUS WASTE RECEIVED from OFF SITE during 2005 _____ tons
Please summarize and convert the total to tons.
3. TOTAL HAZARDOUS WASTE MANAGED in RCRA REGULATED TSD UNITS during 2005 _____ tons
For RCRA TSD Facility Units: Summarize all totals and convert the totals to tons.
4. Amount of hazardous waste stored on-site on December 31, 2005 _____ tons
5. Is your facility under post-closure care? ☐ Yes ☐ No

SECTION IV - CERTIFICATION

I hereby affirm under penalty of perjury that the information provided in this form and attached statements and exhibits is true to the best of my knowledge and belief and accurately represents the hazardous waste activity at this site during 2005. This activity may be subject to regulatory base fees and surcharge fees.

NAME: W. GREGORY WUEST TITLE: DIRECTOR, QEH&S

(ORIGINAL ONLY - NO PHOTOCOPIES) SIGNATURE: W. Wuest DATE: 2/28/06

CONTACT IF OTHER THAN ABOVE: PETER DI PIETRANTONIO TELEPHONE NUMBER: (516) 338-2337

A PAPER COPY OF THIS FORM MUST BE COMPLETED, SIGNED AND RETURNED TO NYSDEC

MAIL COMPLETED FORM TO: NYSDEC 625 BROADWAY ALBANY, NY 12233-7250	NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION **SITE IDENTIFICATION FORM** 2005	

1. Reason for Submittal (See instructions on page 8) MARK ALL BOX(ES) THAT APPLY	**Reason for Submittal:** ☐ To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities). ☐ To provide Subsequent Notification of Regulated Waste Activity (to update site identification information). ☐ As a component of a First RCRA Hazardous Waste Part A Permit Application. ☐ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #_____). X As a component of the Hazardous Waste Report.
2. Site EPA ID Number (See page 8)	**EPA ID Number** N Y D 1 3 1 3 1 8 6 5 1
3. Site Name (See page 8)	**Name:** SULZER METCO (US), INC.
4. Site Location Information (See page 8)	**Street Address:** 1101 PROSPECT AVENUE **City, Town, or Village:** WESTBURY **State:** NY **County Name:** NASSAU **Zip Code:** 11590
5. Site Land Type (See page 8)	**Site Land Type:** ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other
6. North American Industry Classification System (NAICS) Code(s) for the Site (See page 8)	**A.** 333298 **B.** 332117 **C.** **D.**
7. Site Mailing Address (See page 9)	**Street or P. O. Box:** SAME **City, Town, or Village:** **State:** **Country:** **Zip Code:**
8. Site Contact Person (See page 9)	**First Name:** PETER **MI:** A **Last Name:** DiPIETRANTONIO **Phone Number:** 516 338-2337 **Extension:** — **Email address:** PETER.DIPIETRANTONIO@SULZER
9. Operator and Legal Owner of the Site (See pages 9)	**A. Name of Site's Operator:** SULZER METCO (US), INC. **Date Became Operator (mm/dd/yyyy):** 04/18/1994 **Operator Type:** ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐

N Y D 1 3 1 3 8 6 5 1

9. Operator and Legal Owner of the Site -con't (See pages 9)	B. Name of Site's Legal Owner: SULZER METCO (US) INC.	Date Became Owner (mm/dd/yyyy): 04/18/1994
	Owner Type: ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other	
	Street or P O Box: SAME	City:
	State:	
	Country:	Zip Code:

10. Type of Regulated Waste Activity
Mark Yes or No for all activities; complete any additional boxes as instructed. (See instructions on pages 10 -12.)

A. Hazardous Waste Activities in 2006
Complete all parts for 1 through 6.

Y ☒ N ☐ **1. Generator of Hazardous Waste**
If Yes, choose only one of the following - a, b, or c.

- ☐ a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or
- ☒ b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste; or
- ☐ c. CESQG: Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste

In addition, indicate other generator activities.

Y ☐ N ☒ d. United States Importer of Hazardous Waste

Y ☐ N ☒ e. Mixed Waste (hazardous and radioactive) Generator

Y ☐ N ☒ **2. Transporter of Hazardous Waste**

Y ☐ N ☒ **3. Treater, Storer, or Disposer of Hazardous Waste (at your site)** Note: A hazardous waste permit is required for this activity.

Y ☐ N ☒ **4. Recycler of Hazardous Waste (at your site)**

Y ☐ N ☒ **5. Exempt Boiler and/or Industrial Furnace**
If Yes, mark each that applies.

- ☐ a. Small Quantity On-site Burner Exemption
- ☐ b. Smelting, Melting, and Refining Furnace Exemption

Y ☐ N ☒ **6. Underground Injection Control**

B. Universal Waste Activities

Y ☐ N ☒ **1. Large Quantity Handler of Universal Waste (accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste generated and/or accumulated at your site. If Yes, mark all boxes that apply:**

	Generate	Accumulate
a. Batteries	☐	☐
b. Pesticides	☐	☐
c. Thermostats	☐	☐
d. Lamps	☐	☐

Y ☐ N ☒ **2. Destination Facility for Universal Waste**
Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities
Mark all boxes that apply.

Y ☐ N ☒ **1. Used Oil Transporter**
If Yes, mark each that applies.
- ☐ a. Transporter
- ☐ b. Transfer Facility

Y ☐ N ☒ **2. Used Oil Processor and/or Re-refiner**
If Yes, mark each that applies.
- ☐ a. Processor
- ☐ b. Re-refiner

Y ☐ N ☒ **3. Off-Specification Used Oil Burner**

Y ☐ N ☒ **4. Used Oil Fuel Marketer**
If Yes, mark each that applies.
- ☐ a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
- ☐ b. Marketer Who First Claims the Used Oil Meets the Specifications

NYD013138651

11. Description of Hazardous Wastes (See instructions on page 12)

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

D001	D002	D007	F003	D006	D008	

B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations.

12. Comments (See instructions on page 13)

D006, D008 are small quantity contaminants.

13. 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 assure 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. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.
(See instructions on page 13)

SIGNATURE of owner, operator, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
	W. GREGORY WUEST, DIRECTOR QESH	2/28/2006

SITE NAME: SULZER METCO (US), INC.

EPA ID NO: NYD 1 3 1 3 1 8 6 5 1

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

2005 Hazardous Waste Report

FORM GM

WASTE GENERATION AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 15 to 19 of this booklet before completing this form.

Sec. 1

A. Waste description (page 16) WASTE CERAMIC POWDER CONTAINING CHROMIUM FROM COATING OPERATIONS

B. EPA hazardous waste code (page 17) D007

C. State hazardous waste code (page 17)

D. Source code (page 17) G21

Management Method code for Source code G25 H

E. Form code (Page 17) W319

F. Quantity generated in 2005 (Page 17) 5225.0

G. UOM (Page 17) 1

Density ☐ lbs/gal ☐ sg

Sec. 2

Was any of this waste managed on site? (page 18)

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)

☒ 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management Quantity treated, disposed, or recycled on site in 2005 (page 18) Method code H

ON-SITE PROCESS SYSTEM 2

On-site Management Quantity treated, disposed, or recycled on site in 2005 (page 18) Method code H

Sec. 3

A. Was any of this waste shipped off site in 2005 for treatment, disposal, or recycling? (page19)

☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2005
Site 1	OHD 000 816 629	H141	5225.0
Site 2		H	
Site 3		H	

Comments:

Section 1, Box E: Ceramic powder with metals.

SITE NAME: SULZER METCO (US), INC.

EPA ID NO: NYD 131 318 651

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

2005 Hazardous Waste Report

FORM GM

WASTE GENERATION AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 15 to 19 of this booklet before completing this form.

Sec. 1

A. Waste description (page 16) WASTE CHROMIC ACID SOLUTION FROM COPPER COMPONENT DEGREASING

B. EPA hazardous waste code (page 17): D002 D007

C. State hazardous waste code (page 17):

D. Source code (page 17): G02

Management Method code for Source code G25: H

E. Form code (Page 17): W119

F. Quantity generated in 2005 (Page 17): 7340.0

G. UOM (Page 17): L

Density: ☐ lbs/gal ☐ sg

Sec. 2

Was any of this waste managed on site? (page 18)

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)

☒ 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management Quantity treated, disposed, or recycled on site in 2005 (page 18): H

ON-SITE PROCESS SYSTEM 2

On-site Management Quantity treated, disposed, or Method code recycled on site in 2005 (page 18): H

Sec. 3

A. Was any of this waste shipped off site in 2005 for treatment, disposal, or recycling? (page19)

☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2005
Site 1	04D 000 816 629	H141	7340.0
Site 2		H	
Site 3		H	

Comments:

Section 1, Box E: Acidic aqueous waste with less than 5% acid; pH < 2, containing chromium.

SITE NAME: SULZER METCO (US), INC.

EPA ID NO: NYD 131 318 651

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

2005 Hazardous Waste Report

FORM GM

WASTE GENERATION AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 15 to 19 of this booklet before completing this form.

Sec. 1

A. Waste description (page 16) MIXED SPENT ACID FROM LAB OPERATION

B. EPA hazardous waste code (page 17): D002 D006 D007 D008

C. State hazardous waste code (page 17):

D. Source code (page 17): G22

Management Method code for Source code G25: H

E. Form code (Page 17): W119

F. Quantity generated in 2005 (Page 17): 970.0

G. UOM (Page 17): L

Density: ☐ lbs/gal ☐ sg

Sec. 2

Was any of this waste managed on site? (page 18)

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)

☒ 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management Quantity treated, disposed, or Method code recycled on site in 2005 (page 18): H

ON-SITE PROCESS SYSTEM 2

On-site Management Quantity treated, disposed, or Method code recycled on site in 2005 (page 18): H

Sec. 3

A. Was any of this waste shipped off site in 2005 for treatment, disposal, or recycling? (page19)

☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2005
Site 1	OHD 000 816 629	H141	970.0
Site 2		H	
Site 3		H	

Comments:
Section 1, Box E: Spent acid with dissolved metals from laboratory.

SITE NAME: SULZER METCO (US), INC.

EPA ID NO: N Y D 1 3 1 3 1 8 6 5 1

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

2005 Hazardous Waste Report

FORM GM

WASTE GENERATION AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 15 to 19 of this booklet before completing this form.

Sec. 1

A. Waste description (page 16) WASTE FILTER CARTRIDGES FROM DUST COLLECTOR

B. EPA hazardous waste code (page 17) D 0 0 7

C. State hazardous waste code (page 17)

D. Source code (page 17) G 2 1

Management Method code for Source code G25 H

E. Form code (Page 17) W 3 1 0

F. Quantity generated in 2005 (Page 17) 1 2 1 9 . 0

G. UOM (Page 17) 1

Density . ☐ lbs/gal ☐ sg

Sec. 2

Was any of this waste managed on site? (page 18)

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)

☒ 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management Quantity treated, disposed, or Method code recycled on site in 2005 (page 18)

H . .

ON-SITE PROCESS SYSTEM 2

On-site Management Quantity treated, disposed, or Method code recycled on site in 2005 (page 18)

H . .

Sec. 3

A. Was any of this waste shipped off site in 2005 for treatment, disposal, or recycling? (page19)

☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2005
Site 1	O H D 0 0 0 8 1 6 6 2 9	H 1 4 1	1 2 1 9 . 0
Site 2		H	.
Site 3		H	.

Comments:

SITE NAME: SULZER METCO (US), INC.

EPA ID NO: NYD 013 318 651

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

2005 Hazardous Waste Report

FORM GM

WASTE GENERATION AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 15 to 19 of this booklet before completing this form.

Sec. 1

A. Waste description (page 16) WASTE METHANOL SOLUTION W/GRAPHITE

B. EPA hazardous waste code (page 17) F003

C. State hazardous waste code (page 17)

D. Source code (page 17) G01

Management Method code for Source code G25 H

E. Form code (Page 17) W219

F. Quantity generated in 2005 (Page 17) 923.0

G. UOM (Page 17) L

Density ☐ lbs/gal ☐ sg

Sec. 2

Was any of this waste managed on site? (page 18)

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)

☒ 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management Quantity treated, disposed, or recycled on site in 2005 (page 18) Method code H

ON-SITE PROCESS SYSTEM 2

On-site Management Quantity treated, disposed, or recycled on site in 2005 (page 18) Method code H

Sec. 3

A. Was any of this waste shipped off site in 2005 for treatment, disposal, or recycling? (page19)

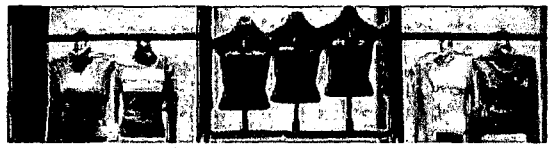
☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2005
Site 1	OHD 000 816 629	H141	923.0
Site 2		H	
Site 3		H	

Comments:

Section 1, Box E: Aqueous, ignitable solution with methanol and graphite

GE Lighting North America



Resources

Resources to help you make smarter lighting choices.

- Ally of The Year - 2000
- Lamp Material Information
- TCLP Test Results
- Lamp Recyclers
- State Lamp Disposal Policies/Contact List

TCLP Test Results

Toxicity Characteristic Leaching Procedure (TCLP) Test Results for:

GE Ecolux Fluorescent Lamps

F32T8/SP30/ECO	F32T8/SP35/ECO	F32T8/SP41/ECO 60%
F32T8/SPX30/ECO	F32T8/SPX35/ECO	F32T8/SPX41/ECO
F40CW/WM/ECO	F40SP30/RS/WM/ECO	F40/SP35/WM/ECO
F40SP41/RS/WM/ECO	F40SPX30/RS/WM/ECO	F40SPX35/RS/WM/EC
F40SPX41/RS/WM/ECO	F96T12/CW/WM/ECO	F96T12/SP65/WM/ECC
F96T12/SP30/WM/ECO	F96T12/SP35/WM/ECO	F96T12/SP41/WM/ECC
F96T12/SPX30/WM/ECO	F96T12/SPX35/WM/ECO	F96T12/SPX41/WM/EC

CovRguard™

F40CW/RS/WM/ECO/CVG	F32T8/SP30/ECO/CVG	F32T8/SP35/ECO/
F32T8/SP41/ECO/CVG	F96T12/CW/WM/ECO/CVG	

High Pressure Sodium

LU70/ECO/NC-Mercury	LU70/ECO/NC-Lead	LU70/ECO/NC-Barium
LU100/ECO/NC-Mercury	LU100/ECO/NC-Lead	LU100/ECO/NC-Barium
LU150/ECO/NC-Mercury	LU150/ECO/NC-Lead	LU150/ECO/NC-Barium
LU250/ECO/NC-Mercury	LU250/ECO/NC-Lead	LU250/ECO/NC-Barium
LU400/ECO/NC-Mercury	LU400/ECO/NC-Lead	LU400/ECO/NC-Barium

METAL HALIDE

MVR250/U

400 in machine shop

½ bender & 3/4

2 - ex. cord

hammer drill - ¼ bit

ladder 6' & 8'

snake

cordless / box tip / charger

self-tap screw

100' - 3/4 EMT STRAPS 24
COUP 12
CONN 4

150'

~~200~~' - 1½ EMT

10 - 90° BENDS

24 - ½ COUP COMPRESSION

4 - ½ CONN COMPRESSION

12 - ½ STRAPS

TPS - plugs

- #12 THHN

3 - box to mount exit sign

10 - ½ magnets

TPS - ¼ x 20 x 3/8 RHMS

3 - EXIT SIGNS

2 - T-4 BOX & BLANK

INSTRUCTIONS
FOR COMPLETING THE CONNECTICUT UNIFORM HAZARDOUS WASTE MANIFEST

IMPORTANT: READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. ALL 8 COPIES MUST BE TOTALLY LEGIBLE.

GENERAL INFORMATION

The Hazardous Waste Manifest is designed to track waste from the point of generation to final disposal ("cradle to grave"). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly.

Incomplete, incorrect or illegible manifests are violations of the law, and could subject you to civil or criminal liabilities as specified in Connecticut Hazardous Waste Regulations.

The Connecticut manifest contains 8 copies. ALL COPIES MUST BE LEGIBLE! (Illegible manifests submitted to the State will be returned to the Generator for proper completion). This form is designed for use on a 12 pitch (elite) typewriter. A ball point pen may also be used only if you press down **HARD.** The eight copies must be filed with the appropriate parties as they are completed.

* Be aware that hazardous wastes manifested into or out of Connecticut are subject to a hazardous waste assessment per C.G.S 22a-132. Please contact the Dept. of Revenue Services at (860) 541-3225 for more information.

USE OF THE MANIFEST

This manifest must be used for RCRA regulated hazardous wastes. It may also be used for state regulated hazardous wastes, or for other state regulated special wastes for which state regulations **Require** the use of this manifest.

Wastes which are not federally or state regulated may only appear on a manifest in a mixed shipment. RCRA regulated hazardous wastes should be listed first, then the state regulated wastes, then non-hazardous wastes. (Non-hazardous non-regulated wastes, like empty drums which are regulated by DOT, may also be listed under Item 15).

Copy Distribution Instructions are found on the back of the form along with tables and instructions for the transporter and facility.

GENERATOR SECTION

Item 1: GENERATOR'S US EPA ID NO-MANIFEST DOCUMENT NO. - Enter U.S. EPA 12 digit identification number (CT Conditionally Exempt Small Quantity Generators who have not obtained an EPA ID number should enter the letters "CESQG" here). Then enter a UNIQUE 5 digit number you assign to this manifest. Use of serially increasing numbers (eg. 00001, 00002, etc.) is recommended.

Item 2: PAGE 1 of - Enter the total number of pages used to complete this manifest. If you use more than one manifest for a shipment make sure to cross-reference each of the manifests in Item 15, by state manifest document numbers.

Item A: STATE MANIFEST DOCUMENT NUMBER - Number preprinted by CT.

Item 3: GENERATOR'S NAME & MAILING ADDRESS - Enter the name (as notified to EPA) & mailing address of the Generator. This address should be the location that will manage the returned manifest forms. (However, a manifest copy must be kept at the actual site).

Item 4: GENERATOR'S PHONE NUMBER - Enter the phone number of someone who is knowledgeable about this shipment, and who can respond to questions regarding the information on this manifest, or in case of an emergency (24 hrs).

Item B: G.S.I. (Gen. Site Address) - Enter the location address of the Generator - street, city (and state if different) where the waste is being picked up. Enter "same" if the mailing address and location address are identical.

Item 5: TRANSPORTER 1 COMPANY NAME - Enter the company name (as notified to EPA) of the first transporter who will transport the waste.

Item 6: US EPA ID NUMBER - Enter the US EPA 12 digit identification number of the first transporter identified in Item 5.

Item C: S.T.I. (Tran. Lic. Plate #) - Enter the state of registration and then the license plate number of the waste carrying portion of the vehicle. (e.g., NY 14235). NOTE: ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN CONNECTICUT MUST HAVE A VALID CONNECTICUT TRANSPORTERS PERMIT.

Item D: TRANSPORTER'S PHONE - Enter a telephone number with area code where an authorized agent of the transporter can be reached.

Item 7: TRANSPORTER 2 COMPANY NAME - If applicable enter the company name (as notified to EPA) of the 2nd transporter who will transport the waste. Whenever more than two transporters or four waste streams are involved in a shipment, the Generator shall fully complete additional manifests, listing the additional information.

Item 8: US EPA ID NUMBER - If applicable, enter the US EPA 12 digit identification number of the 2nd transporter identified in Item 7.

Item E: S.T.I. (Tran. Lic. Plate #) - If applicable, enter the 2nd transporter's state of registration & license plate number for the waste carrying portion of the vehicle being used to make the pick-up.

Item F: TRANSPORTER'S PHONE - If applicable, enter the 2nd transporter's telephone number with area code where an authorized agent of the transporter can be reached.

Item 9: DESIGNATED FACILITY NAME & SITE ADDRESS - Enter the company name (as notified to EPA) of the Treatment, Storage, or Disposal Facility designated to receive the waste listed on the manifest. The address must be the site address, which may differ from the mailing address.

Item 10: US EPA ID NUMBER - Enter the U.S. EPA 12 digit identification number of the designated Facility identified in Item 9.

Item G: STATE FACILITY ID - No entry required by Connecticut.

Item H: FACILITY PHONE - Enter the telephone number with area code for the Facility designated to receive the waste on the manifest.

Item 11: US DOT DESCRIPTION - All the following information must be entered: The correct US DOT (Dept. of Transportation) name for the waste as identified in 49 CFR Parts 171-177 (usually found in Column 2 of Section 172.101), the assigned DOT Hazard Class (usually found in Column 3) & the 4 digit UN/NA ID number (Column 3A). (Example: Waste acetone, flammable liquid, UN 1090 (F003) RQ.) US DOT requires the word "waste" before or in the shipping name of all hazardous waste.

Item 12: CONTAINERS (NO. & TYPE) - Enter the number of containers for each waste and the appropriate abbreviation from TABLE I (below) for the type of container used.

TABLE I - CONTAINER TYPE

DM = Metal drums, barrels, kegs	TP = Tanks, Portable	CM = Metal boxes, cartons, cases (incl. roll-offs)
DW = Wooden drums, barrels, kegs	TT = Cargo Tanks (tank trucks)	CW = Wooden boxes, cartons, cases
DF = Fiberboard or plastic drums, barrels, kegs	TC = Tank Cars	CF = Fiber or plastic boxes, cartons, cases
CY = Cylinders	DT = Dump Trucks	BA = Burlap, cloth, paper, plastic bags

Item 13: TOTAL QUANTITY - Enter the total quantity of waste described on each line, relative to the units used in Item 14.

Item 14: UNIT (Wt./Vol.) - Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line. DO NOT use fractions.

TABLE II - UNITS OF MEASURE

G = Gallons (liquids only)	L = Liters (liquids only)	Y = Cubic Yards
P = Pounds	K = Kilograms	N = Cubic Meters
T = Tons (2000 lb.)	M = Metric Tons (1000 kg.)	

Item I: WASTE NO: EPA - Enter the EPA waste number from 40 CFR Part 261, Subparts C & D. If none is applicable, enter "NONE". DO NOT leave blank. Enter other applicable EPA waste codes under Item J.

WASTE NO: STATE - Enter the Destination State Waste Code if one exists. If there is no Destination State Waste Code, enter the Generator State Code here. If there is both a Destination and Generator State Code, enter the Destination State Waste Code under Item I, and the Generator State Code under Item J. If no State Waste Code exists, enter "NONE".

Note: Place an asterisk (*) after the waste no. for waste which generators believe qualifies for exemption under Generator tax act C.G.S. 22a-132 and cite reason for exemption under Item J.

Item J: ADDITIONAL DESCRIPTIONS FOR MATERIALS LISTED ABOVE - Enter the following information: For each waste listed in Item 11 (a-e) above, list:

Other applicable waste codes in addition to those listed under Item I.

The specific gravity for items listed in gallons, liters or cubic yards under Item 14.

The physical state (liquid / solid / gas), if not part of D.O.T. shipping name.

Description (chemical names, constituent percentages, etc.) for any waste which has a US DOT shipping name ending in "N.O.S."

Item 15: SPECIAL HANDLING INSTRUCTIONS & ADDITIONAL INFORMATION - Use this space to indicate special transport, treatment, storage or disposal, or Bill of Lading information. If an alternate facility is designated, note it here. For INTERNATIONAL SHIPMENTS, the Generator must enter here the point of departure from the U.S. through which the waste must travel before entering a foreign country (City & State). This space may also be used for emergency response numbers, and other information the Generator wishes to include about the shipment. For Exports-Transporters must sign and enter the date the waste left the United States in this space.

Item K: HANDLING CODES - To be completed by receiving facility.

If final disposition is to occur at the facility, enter the appropriate handling code from 40 CFR, Part 265, Appendix I, Table 2 for each waste listed on this manifest under "Final".

If ultimate disposition will not occur at the facility listed on this manifest, enter the appropriate handling code from the table in 40 CFR under "Interim" (the ultimate handling method employed at your facility). Then enter the final handling method code which is intended for each waste listed on the manifest under the column entitled "Final". (Example: Waste is being stored in containers at facility on this manifest. Waste will then be transhipped to another facility where it will be incinerated. Enter "S01" under "Interim" and "T08" under "Final".)

Item 16: GENERATOR'S CERTIFICATION - The Generator must read, sign (by hand) & date the certification (with date of transfer to transporter). If a mode other than highway is used, the word "highway" should be lined out & the appropriate mode (rail, water, or air) inserted in the space below. If another mode **in addition to** the highway mode is used, enter the appropriate mode (e.g. "and rail") in space below. Primary exporters shipping hazardous waste to a facility located outside of the United States must add to the end of the first sentence of the certification the following words "and conforms to the terms of the EPA Acknowledgement of Consent to the shipment."

TRANSPORTER SECTION

Item 17: TRANSPORTER 1 ACKNOWLEDGEMENT - Print or type the name of the person accepting the waste on behalf of the 1st transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.

Item 18: TRANSPORTER 2 ACKNOWLEDGEMENT - If applicable, follow the instructions for Item 17 for Transporter 2.

DESIGNATED FACILITY (TSDF) SECTION

Item K: HANDLING CODES (TSDF COMPLETES) - Follow Instructions for Item K listed above.

Item 19: DISCREPANCY INDICATION SPACE - The authorized representative of the designated facility's owner or operator must note in this space any significant discrepancy between the waste described on the manifest & the waste actually received at the facility. Any rejected materials should be listed here, along with an indication of the disposition of the rejected materials. A receiving facility whose EPA ID number is different from the one listed in Item 10 shall list the correct EPA ID number, facility name and address here. **You must also comply with any applicable Discrepancy or Rejection reporting requirements. Federal and State regulations vary.**

Item 20: FACILITY OWNER OR OPERATOR CERTIFICATION - Print or type the name of the person accepting the waste on behalf of the owner or operator of the designated TSDF. That person must acknowledge acceptance of the waste described on the manifest by signing (by hand) & entering the date of receipt. The signature of the authorized TSDF agent indicates acceptance (except for items specified in Item 19) & agreement with statements on this manifest.

Note: FOR INTERSTATE SHIPMENTS (between different states) YOU SHOULD COMPLETE THE MANIFEST ACCORDING TO THE DESTINATION STATE'S INSTRUCTIONS. YOU MAY BE REQUIRED TO COMPLY WITH OTHER REGULATIONS (and Generator State instructions) regarding the manifest. You may wish to contact your State agencies for more information on this subject.

REMINDER: ALL 8 COPIES OF THIS FORM MUST BE TOTALLY LEGIBLE.

SHIFT TIME 0630

DAY & DATE Wednesday 1/5/04

JOB # BK889156

QUOTE / TASK #

CLIENT Sulzer Metco US Inc

BILLING ADDRESS
1101 Prospect Av
Westbury NY 11590

CleanHarbors
ENVIRONMENTAL SERVICES, INC.
(24 HOUR SERVICE)

P.O. #/COD AMOUNT

T&M ☐ CONTRACT ☐ CHANGE ORDER ☐

JOB LOCATION

CONTACT:

JOB DESCRIPTION: Go to Sulzer
Pump out Drums, & Transport to CT

LABOR:

NAME	TITLE	PER DIEM	ST	OT	DT
	SUPERVISOR				
	FOREMAN				
M Wiggins	EQ. OPERATOR				
	EQ. OPERATOR				
	FIELD TECH				
	FIELD TECH				
	FIELD TECH				

COMMENTS:

0800 Pre-trip Endc, load extra Hose
left Shop 0730, Arrived on site 0840
Loaded End 1040

DISPOSAL: Bristol CT

DESTINATION	AMOUNT	MANIFEST #
LIQUID (BULK)	1968 GALS.	CTF1172869
SOLID (BULK)	TONS/YDS.	
LIQUID (DRUMS)	# OF DRUMS AMT. GAL.	
SOLID (DRUMS)	# OF DRUMS AMT. GAL.	
LOADING TIME	START 0900	END 1040

JOB COMPLETED ☐ YES ☐ NO

MATERIAL:

QTY.	DESCRIPTION
	SPEEDI DRI
	DRUM TYPE:
	DRUM TYPE:
	RAIN GEAR
	POLY SHEETING ROLL
	POLY BAG ROLL
	SORBENT PADS BL.
	SORBENT BOOM EA.
	SORBENT BOOM BL.
	SORBENT SWEEP BL.
	SORBENT SNARE (ON ROPE) BL.
	ROPE TYPE:
	DEGREASER: WHAT TYPE?
	5 GAL BUCKET
	DUCT TAPE
	SSH&SP
	POLY LINER (ROLL OFF)

NUMBER OF COMPLETE INITIAL PPE SETS	NUMBER OF EMPLOYEES IN PPE

PPE LEVEL (CIRCLE ONE)
A B C D

PPE TYPE (CIRCLE ONE)
1 2 3 4 5

ADDITIONAL PPE ITEMS USED AFTER INITIAL SETS

QTY.	DESCRIPTION
	CARTRIDGE TYPE:
	RESP. TYPE:
	SUIT TYPE:
	INNER GLOVE TYPE:
	OUTER GLOVE TYPE:
	AIR BOTTLES

EQUIPMENT:

QTY.	TYPE	FLEET #	# OF HRS	DAILY RATE
	PICK-UP TRUCK			
	VACUUM TRAILER			
	TRACTOR			
1	VACUUM ST. TRUCK	442		
	BOX TRUCK			
	VACTOR			
	COMPRESSOR			
	BACKHOE			
	BOBCAT			
	RACK TRUCK			
	METER TYPE:			
	COMMS PACKAGE			

ANALYSIS:

QTY.	TYPE	DESTINATION

SUBCONTRACTORS:

NAME OF COMPANY	DESCRIPTION

SIGNATURE: (CLEAN HARBORS REPRESENTATIVE)

Date: 1/5/04

Customer: Sulzer metco (Company Name)

By: (Signature)

Joe Fordiana (Print Name)

Over Load. (Title)

Date: 1/5/05

CHI 115 Rev. 9/01

IMPORTANT – PAYMENT TERMS ON BACK

(CUSTOMER)

Payment Terms

By signing this Daily Work Sheet, Customer acknowledges receipt of the labor, equipment and materials described herein, and agrees to pay Clean Harbors for same in accordance with Clean Harbors' published Rate Schedule. Customer's obligation to pay the amounts due pursuant to this Daily Work Sheet shall not be conditioned upon or limited by the types, amounts or availability of insurance coverage.

Clean Harbors' standard terms of payment are net fifteen (15) days from the date of invoice. Interest shall accrue at the rate of one and one half (1.5%) percent per month, or at the maximum rate allowed by law, after fifteen (15) days. In the event that legal or other action is required to collect unpaid balances or invoices, Customer agrees to pay all costs of collection, including reasonable attorneys' fees, which may be incurred by Clean Harbors. "Legal or other action" as used above shall include bankruptcy and insolvency proceedings.

Customer hereby assigns to Clean Harbors all rights to any insurance payments that Customer may be entitled to receive to pay for the labor, equipment or materials provided under this Daily Work Sheet and hereby authorizes its insurance company or agent to pay Clean Harbors directly.

Customer agrees that Clean Harbors shall not be responsible for pre-existing contamination at the job location, natural resource damage, or for incidental, consequential or special damages, including loss of use or lost profits, resulting from or arising out of the performance of services hereunder by Clean Harbors, its employees, agents and/or subcontractors.

Prospect Avenue HazWaste Generation 2001, Consolidated Report

Profile #	Pounds	Waste Name	TSDF EPA ID#	EPA Waste Codes
CH13495	N/a	Super Agitene (Parts Cleaning)		D001
CH189108	800 2,048 1,744 **4,592**	RCRA Metals & Ceramic Powder (Powder Coating Operations)	OHD 000816629 CTD 000604488 CTD 000604488	D007
CH189112	N/a	Mixed Spent Acids (Cleaning of Metals)		D002, D007
CH189132	502 **502**	Paint Related Material (Waste Paint/Adhesives)	MDD 980555189	D001, D035, F003, F005
CH189135	469 **469**	Filters w/RCRA Metals (Changing of Filters)	OHD 000816629	D007
CH189142	2,850 800 1,891 945 2,285 1,954 **10,725**	Copper Cleaner/Chromic Acid	CTD 000604488 CTD 000604488 CTD 000604488 CTD 000604488 CTD 000604488 MDD 980554653	D002, D006, D007, D008
SK	**1,212**	Aqueous Parts Washer	NYD 000708198	D039
SK	**8,730**	Non Aqueous Parts Washer (P-105)	NYD 000708198	D001, D018, D039, D040
Total HW = **Tons =**	**26,230** **13.12**			

All Prospect HW Shipments '01

Ship Date	Quantity (gal)	sg	Lbs.	Treatment Code/Description
1/18	89	6.7	596	R
			596	
2/13	111	6.7	744	R
2/20	15	8.3	125	T
2/26	5	6.7	34	R
2/26			*1,954*	*Copper Cleaner/CrO3*
			2,856	
3/21	82	6.7	549	R
3/21	18	8.3	149	T
			699	
4/9	101	6.7	677	R
4/25	12	8.3	100	T
			776	
5/17	89	6.7	596	R
5/17	16	8.3	133	T
5/2			*2,048*	*Ceramic Pdrs w/Cr*
5/2			*2,850*	*Copper Cleaner/CrO3*
5/2			*502*	*Waste Paint*
			6,129	
6/5	107	6.7	717	R
6/11	16	8.3	133	T
6/18	7	6.7	47	R
6/27	116	6.7	777	R
6/22			*800*	*Copper Cleaner/CrO3*
6/22			*800*	*Ceramic Pdrs w/Cr*
			3,274	
7/31	91	6.7	610	R
7/31	15	6.7	101	R
			710	
8/30	97	6.7	650	R
8/30	18	8.3	149	T
8/22			*1,891*	*Copper Cleaner/CrO3*
8/22			*469*	*Filters w/Cr*
			3,159	
9/25	99	6.7	663	R
9/25	12	6.7	80	R
			744	
10/4	18	8.3	149	T
10/25	88	6.7	590	R
10/30			*945*	*Copper Cleaner/CrO3*
10/30			*1,744*	*Ceramic Pdrs w/Cr*
			3,428	
11/2	18	8.3	149	T
11/20	15	6.7	101	R
11/20	88	6.7	590	R
11/29	15	8.3	125	T
11/29			*2,285*	*Copper Cleaner/CrO3*
			3,249	
12/17	91	6.7	610	R
			610	
Annual			**26,230**	**13.1 tons**

48-19-002(1/96)—10g

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS
50 WOLF ROAD • ALBANY, NY 12233-7250

HAZARDOUS WASTE REGULATORY FEE INFORMATION

NOTE: Please carefully read the instructions before completing this form.

SECTION I—GENERAL

NAME OF GENERATOR OR TSD FACILITY: SULZER METCO (US), INC.
EPA ID: NYD 1 3 1 3 1 8 6 5 1

FACILITY MAILING ADDRESS: 1101 PROSPECT AVENUE

CITY: WESTBURY
STATE: NY
ZIP CODE: 1 1 5 9 0 -

LOCATION OF GENERATOR OR FACILITY (If different from above): SAME

CITY:
STATE:
ZIP CODE:

AT LEAST ONE BLOCK **MUST** BE CHECKED

☒ Generator Only ☐ Treatment, Storage, Disposal (TSD) Facility Only ☐ Generator and TSD (See definitions)

SECTION II—GENERATOR

1. Summarize all hazardous waste totals, in tons, (excluding wastewater) produced at this facility. DO NOT include waste that is exempt from fees (see instructions)

   TOTAL HAZARDOUS WASTE (Excluding wastewater) 13.1 tons

2. Summarize total hazardous wastewater generated, including hazardous wastewater treated by on-site systems. (see instructions)

   TOTAL HAZARDOUS WASTEWATER 0 tons

SECTION III—TREATMENT, STORAGE AND DISPOSAL

Complete This Section ONLY If Your Facility is a RCRA Regulated TSD

1. Please check all process units.
   ☐ Hazardous Waste landfill ☐ Hazardous Waste Incinerator How Many? _____
   ☐ Hazardous Waste Surface Impoundment
2. Please summarize and convert the total to tons.

   TOTAL HAZARDOUS WASTE RECEIVED FROM OFF-SITE _____ tons

3. **For RCRA Regulated TSD process Units:** Summarize all totals and convert the totals to tons.

   TOTAL HAZARDOUS WASTE MANAGED THROUGH RCRA REGULATED TSD UNITS _____ tons

4. Amount of hazardous waste stored on-site on December 31, 19 ____ _____ tons
5. Is your facility under post closure care? ☐ Yes ☐ No

SECTION IV—CERTIFICATION

I certify that the information in this form accurately represents the hazardous waste activity at this site during the current year. This activity(ies) may be subject to regulatory fees.

NAME: JOSEPH REARDON, Ph.D.
TITLE: MANAGER, EH&S

SIGNATURE (Original Only—No Photocopies): [signature]
DATE: 2/26/02

CONTACT IF OTHER THAN ABOVE: PETER D. DIETRANTONIO
TELEPHONE NUMBER: (516) 338-2317

FOR OFFICIAL USE ONLY

THIS FORM MUST BE COMPLETED AND RETURNED TO NYSDEC

P2SUL001827

MAIL THE COMPLETED FORM TO: NYSDEC 625 Broadway Albany, NY 12233-7250	**NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION** 2001 - SITE ID FORM - 2001	

1.Site EPA ID Number (see instructions on page 7)	**EPA ID Number:**	N Y D 1 3 1 3 1 8 6 5 1	
2. Site Name. (see instructions on page 7)	**Name of Company:**	SULZER METCO (US), INC.	
3. Site Location (see instructions on page 7)	**Street Address:**	1101 PROSPECT AVENUE	
	City, Town or Village:	WESTBURY	**State:** NY
	County:	NASSAU	**Zip Code:** 11590
4. NAICS Code (see instructions on page 7)	333298	**North American Industry Classification (NAICS) Code for the Site**	
5. Site Mailing Address (see instructions on page 7)	**Street or P. O Box:**	SAME AS ABOVE	
	City, Town, or Village:		
	State:		
	County:		**Zip Code:**
6. Site Contact Person (see instructions on page 7)	**First Name:**	**MI:**	**Last Name:**
	Phone Number:		**Phone Number Extension:**

Type of Regulated Waste Activity (Mark an 'X' in the appropriate box. See instructions on page 8)

7. Hazardous Waste Activities

1. Generator of Hazardous Waste
(choose only one of the following two categories)

- [X] a. LQG: Greater than 1,000 kg/mo (2,200 lbs) of non-acute hazardous waste; or 1 kg/mo (2.2 lbs) of acute hazardous waste; or.
- [ ] b. SQG: 100 to 1000 kg/mo (220 - 2200 lbs) of non-acute hazardous waste; or less than 1 kg (2.2 lbs) of acute hazardous waste

- [ ] **2. Treater, Store, or Disposer of Hazardous Waste (at your site)**

8. Comments (see instructions on page 8)

9. 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 assure that qualified personnel properly gathered and evaluated the information submitted. Based on the person or persons who manage the system, or those persons directly responsible for gathering the information, the information is to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. **(see instructions page 8)**

Signature of owner, operator, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm-dd-yyyy)
[signature]	JOSEPH REARDON, PhD, VGR, EH&S	02-26-02

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: SULZER METCO(US), INC.

EPA ID NO: NYD 131 318 661

FORM GM

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

2001 Hazardous Waste Report

WASTE GENERATION AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 9 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. 1 A. Waste description (page 10) WASTE CERAMIC POWDER CONTAINING CHROMIUM FROM COATING OPERATIONS

B. EPA hazardous waste code (page 11): D007

C. State hazardous waste code (page 11):

D. Source code (page 11): G06

Management Method code for Source code G25: H

E. Form code (page 11): W319

F. RCRA radioactive mixed (page 11): ☐ Yes

G. Quantity generated in 2001 (page 12): 4592.0

H. UOM (page 12): 1

Density: ☐lbs/gal ☐sg

Sec. 2 Was any of this waste managed on site? (page 12)

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
☒ 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management Method code (page 13): H

Quantity treated, disposed, or recycled on site in 2001 (page 13):

ON-SITE PROCESS SYSTEM 2

On-site Management Method code (page 13): H

Quantity treated, disposed, or recycled on site in 2001 (page 13):

Sec. 3 A. Was any of this waste shipped off site in 2001 for treatment, disposal, or recycling? (pages 13)
☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

	B. EPA ID No. of facility to which waste was shipped (page 14)	C. Off-site Management Method code Shipped to (page 14)	D. Total quantity shipped in 2001 (page 14)
Site 1	OHD 000 816 629	H141	800.0
Site 2	CTD 000 604 488	H141	3792.0
Site 3		H	

Comments: Section 1, Box E: CERAMIC POWDER w/ METALS.

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: SULZER METCO (US), INC.

EPA ID NO: NYD 131 318 651

FORM GM

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

2001 Hazardous Waste Report

WASTE GENERATION AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 9 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. 1 A. Waste description (page 10) WASTE PAINT & ADHESIVES

B. EPA hazardous waste code (page 11): D001 D035 F003 F005

C. State hazardous waste code (page 11):

D. Source code (page 11): G11

Management Method code for Source code G25: H

E. Form code (page 11): W209

F. RCRA radioactive mixed (page 11): ☐ Yes

G. Quantity generated in 2001 (page 12): 502.0

H. UOM (page 12): 1

Density: ☐lbs/gal ☐sg

Sec. 2 Was any of this waste managed on site? (page 12)

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
☒ 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management Method code (page 13): H

Quantity treated, disposed, or recycled on site in 2001 (page 13):

ON-SITE PROCESS SYSTEM 2

On-site Management Method code (page 13): H

Quantity treated, disposed, or recycled on site in 2001 (page 13):

Sec. 3 A. Was any of this waste shipped off site in 2001 for treatment, disposal, or recycling? (pages 13)
☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

	B. EPA ID No. of facility to which waste was shipped (page 14)	C. Off-site Management Method code Shipped to (page 14)	D. Total quantity shipped in 2001 (page 14)
Site 1	MDD 980 555 189	H141	502.0
Site 2		H	
Site 3		H	

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: SULZER METCO (US), INC.

EPA ID NO: NYD 131 318 651

FORM GM

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

2001 Hazardous Waste Report

WASTE GENERATION AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 9 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. 1 A. Waste description (page 10) SPENT FILTERS WITH METALS

B. EPA hazardous waste code (page 11): D007

C. State hazardous waste code (page 11):

D. Source code (page 11): G21

Management Method code for Source code G25: H

E. Form code (page 11): W310

F. RCRA radioactive mixed (page 11): ☐ Yes

G. Quantity generated in 2001 (page 12): 469.0

H. UOM (page 12): 1

Density: ☐lbs/gal ☐sg

Sec. 2 Was any of this waste managed on site? (page 12)

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
☒ 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management Method code (page 13): H

Quantity treated, disposed, or recycled on site in 2001 (page 13):

ON-SITE PROCESS SYSTEM 2

On-site Management Method code (page 13): H

Quantity treated, disposed, or recycled on site in 2001 (page 13):

Sec. 3 A. Was any of this waste shipped off site in 2001 for treatment, disposal, or recycling? (pages 13)
☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

	B. EPA ID No. of facility to which waste was shipped (page 14)	C. Off-site Management Method code Shipped to (page 14)	D. Total quantity shipped in 2001 (page 14)
Site 1	OHD 000 816 629	H141	469.0
Site 2		H	
Site 3		H	

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: SULZER METCO (US), INC.

EPA ID NO: NYD 131318651

FORM GM

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

2001 Hazardous Waste Report

WASTE GENERATION AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 9 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. 1 A. Waste description (page 10) WASTE CHROMIC ACID SOLUTION FROM COPPER COMPONENT DEGREASING

B. EPA hazardous waste code (page 11): D002 D006 D007 D008

C. State hazardous waste code (page 11):

D. Source code (page 11): G02

Management Method code for Source code G25: H

E. Form code (page 11): W119

F. RCRA radioactive mixed (page 11): ☐ Yes

G. Quantity generated in 2001 (page 12): 10725.0

H. UOM (page 12): 1

Density: ☐lbs/gal ☐sg

Sec. 2 Was any of this waste managed on site? (page 12)

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
☒ 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management Method code (page 13): H

Quantity treated, disposed, or recycled on site in 2001 (page 13):

ON-SITE PROCESS SYSTEM 2

On-site Management Method code (page 13): H

Quantity treated, disposed, or recycled on site in 2001 (page 13):

Sec. 3 A. Was any of this waste shipped off site in 2001 for treatment, disposal, or recycling? (pages 13)
☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

	B. EPA ID No. of facility to which waste was shipped (page 14)	C. Off-site Management Method code Shipped to (page 14)	D. Total quantity shipped in 2001 (page 14)
Site 1	CTD 000 604 488	H141	8771.0
Site 2	MDD 980 554 663	H141	1954.0
Site 3		H	

Comments: Section 1, Box E: SPENT ACID WITH DISSOLVED METALS.

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: SULZER METCO (US), INC.

EPA ID NO: NYD 131 318 651

FORM GM

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

2001 Hazardous Waste Report

WASTE GENERATION AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 9 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. 1 A. Waste description (page 10) WASTE COMBUSTIBLE LIQUID CONTAINING PETROLEUM NAPHTHA, USED IN PRODUCTION DEGREASING

B. EPA hazardous waste code (page 11): D001 D018 D039 D040

C. State hazardous waste code (page 11):

D. Source code (page 11)	E. Form code (page 11)	F. RCRA radioactive mixed (page 11)	G. Quantity generated in 2001 (page 12)	H. UOM (page 12)
G01	W211	☐ Yes	8730.0	1
Management Method code for Source code G25: H				Density: ☐lbs/gal ☐sg

Sec. 2 Was any of this waste managed on site? (page 12)

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
☒ 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2	
On-site Management Method code (page 13)	Quantity treated, disposed, or recycled on site in 2001 (page 13)	On-site Management Method code (page 13)	Quantity treated, disposed, or recycled on site in 2001 (page 13)
H		H	

Sec. 3 A. Was any of this waste shipped off site in 2001 for treatment, disposal, or recycling? (pages 13)
☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

	B. EPA ID No. of facility to which waste was shipped (page 14)	C. Off-site Management Method code Shipped to (page 14)	D. Total quantity shipped in 2001 (page 14)
Site 1	NYD 000 708 198	H020	8730.0
Site 2		H	
Site 3		H	

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: SULZER METCO(US), INC.

EPA ID NO: NYD 131318651

FORM GM

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

2001 Hazardous Waste Report

WASTE GENERATION AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 9 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. 1 A. Waste description (page 10) AQUEOUS PARTS WASHER LIQUID

B. EPA hazardous waste code (page 11): D039

C. State hazardous waste code (page 11):

D. Source code (page 11): G01

Management Method code for Source code G25: H

E. Form code (page 11): W113

F. RCRA radioactive mixed (page 11): ☐ Yes

G. Quantity generated in 2001 (page 12): 1212.0

H. UOM (page 12): L

Density: ☐lbs/gal ☐sg

Sec. 2 Was any of this waste managed on site? (page 12)

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
☒ 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management Method code (page 13): H

Quantity treated, disposed, or recycled on site in 2001 (page 13):

ON-SITE PROCESS SYSTEM 2

On-site Management Method code (page 13): H

Quantity treated, disposed, or recycled on site in 2001 (page 13):

Sec. 3 A. Was any of this waste shipped off site in 2001 for treatment, disposal, or recycling? (pages 13)
☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

	B. EPA ID No. of facility to which waste was shipped (page 14)	C. Off-site Management Method code Shipped to (page 14)	D. Total quantity shipped in 2001 (page 14)
Site 1	NYD 000 708 198	H129	1212.0
Site 2		H	
Site 3		H	

Comments: Section 3, Site 1, Box C: WASTEWATER TREATMENT

Miller Place HazWaste Generation 2001, Consolidated Report

Profile #	Pounds	Waste Name	TSDF EPA ID#	EPA Waste Codes
CH13495	650 **650**	Super Agitene (Parts Cleaning)	MDD 980555189	D001
CH189108	11,000 40,000 486 2,096 **53,582**	RCRA Metals & Ceramic Powder (Powder Coating Operations)	CTD 000604488 CTD 000604488 CTD 000604488 CTD 000604488	D007
CH189112	533 **533**	Mixed Spent Acids (Cleaning of Metals)	CTD 000604488	D002, D007
CH189132	N/a	Paint Related Material (Waste Paint/Adhesives)		D001, D035, F003, F005
CH189135	2,693 **2,693**	Filters w/RCRA Metals (Changing of Filters)	OHD 000816629	D007
CH189142	N/a	Copper Cleaner/Chromic Acid		D002, D006, D007, D008
Total HW = **Tons =**	**57,458** **28.73**			

Chilworth
Technology

A Professional Process Safety Firm

Chilworth Technology, Inc.
11 Deer Park Drive
Monmouth Junction, NJ 08852
Tel: 732-274-0900
Fax: 732- 274-1371
http: www.chilworth.com
email: safety@chilworth.com

TELEFAX

DATE:	**February 12, 2003**
TO:	**Mr. Peter DiPietrantonio**
COMPANY:	**Sulzer Metco (U.S), Inc.**
FAX NO:	**516-338-2123**
FROM:	**James C. Mulligan**
COMPANY:	**Chilworth Technology, Inc.**
OUR FAX NO:	**732 274 1371**

ATTENTION:
This message is intended for the individual to whom it is addressed. It contains information that may be confidential under law. If you are not the intended recipient or the agent responsible for delivering this message, do not read, copy or distribute this information. If you have received this message in error, please notify us immediately by telephone and return the message to us by mail.

MESSAGE:

Please find a copy of the quotation "UN / DOT / IATA Classification of Dangerous Goods for Transport" for your review. If you have any questions, please contact me. We look forward to serving you.

THIS TELEFAX CONSISTS OF 5 PAGES, INCLUDING THIS COVER SHEET. IF YOU DO NOT RECEIVE ALL THE PAGES, PLEASE TELEPHONE US IMMEDIATELY ON 732 274 0900.

Chilworth Technology

A Professional Process Safety Firm

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11 Deer Park Drive
Monmouth Junction, NJ 08852
Tel: 732-274-0900
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http: www.chilworth.com
email: safety@chilworth.com

2/12/03
6283/0203/JM/A10/T

Mr. Peter DiPietrantonio
Sulzer Metco (U.S.) Inc.
1101 Prospect Avenue
Westbury, NY 11590

UN / DOT / IATA CLASSIFICATION OF DANGEROUS GOODS FOR TRANSPORT

Burning Rate Test - DOT/UN Division 4.1

Cost *$ 850.00*

The Burning Rate or Fire Train Test is used to classify materials as "flammable solids" in accordance with U.S. Department of Transportation (DOT) and United Nations (UN) requirements. Chilworth Technology, Inc., performs the Burning Rate Test in accordance with the method described in 49 CFR 173 Appendix E and UN Recommendations on the Transport of Dangerous Goods. The test involves igniting a 250 mm x 20 mm x 10 mm powder train using a suitable ignition source and measuring the burning rate (time).

Dangerous When Wet Test - DOT/UN Division 4.3

Cost *$ 1795.00*

The Dangerous When Wet Test is used to identify materials that -- upon contact with water or moisture -- are liable to become spontaneously flammable or evolve a flammable or toxic gas, as per U.S. Department of Transportation (DOT) and United Nations (UN) requirements. Chilworth Technology, Inc., performs the Dangerous When Wet Test in accordance with the method described in 49 CFR 173 Appendix E and UN Recommendations on the Transport of Dangerous Goods.

The Dangerous When Wet Test is comprised of four (4) parts, each of which involves exposing a small amount of solid sample to a limited amount of water. The samples are observed to determine whether gas is evolved and whether such gas is flammable. The volume of gas evolved is measured to determine the gas evolution rate.

Chilworth
Technology

A Professional Process Safety Firm

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11 Deer Park Drive
Monmouth Junction, NJ 08852
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Fax: 732- 274-1371
http: www.chilworth.com
email: safety@chilworth.com

February 12, 2003

Mr. Peter DiPietrantonio
Sulzer Metco (U.S.) Inc.
1101 Prospect Avenue
Westbury, NY 11590

Dear Mr. DiPietrantonio:

It was a pleasure speaking with you recently. In response to your request, enclosed please find the quotation that we discussed. I am also forwarding some information about our firm. Chilworth Technology is a comprehensive chemical process safety engineering and testing firm, possessing particular expertise in:

- **Fire and explosion hazard assessment;**
- **Fire and explosion incident investigation;**
- **Fire and explosion prevention and protection;**
- **Gas and vapor flammability hazards;**
- **Dust explosion hazards;**
- **Thermal stability hazards;**
- **Chemical reaction hazards;**
- **Process hazard assessment (HAZOP); and**
- **Classification of hazardous materials for transport.**

We also represent the greatest collective expertise in the field of **electrostatics** and the identification and control of electrostatic ignition sources among safety engineering firms worldwide. We pride ourselves on our **responsiveness** and the **quality** of our work.

Chilworth Technology serves clients in 14 countries and in a wide variety of industries, including:

- **All 15 of the FORTUNE 100 chemical and pharmaceutical companies;**
- **All 10 of the FORTUNE 500 pharmaceutical companies;**
- **Twelve (12) of the 14 FORTUNE 500 chemical companies; and**
- **Twenty-seven (27) of the 37 FORTUNE 1000 chemical companies.**

If you have any questions concerning our quotations or capabilities, or require further information, please call.

Best regards,

James C. Mulligan
Senior Process Safety Engineer

FOR AND ON BEHALF OF CHILWORTH TECHNOLOGY, INC.

Chilworth Technology

A Professional Process Safety Firm

11 Deer Park Drive
Monmouth Junction, NJ 08852
Tel: 732-274-0900
Fax: 732-274-1371
Web: www.chilworth.com
email: safety@chilworth.com

Date: 2/12/03
Quotation Number: 6283/0203/JM/A10/T

Mr. Peter DiPietrantonio
Sulzer Metco (U.S.) Inc.
1101 Prospect Avenue
Westbury, NY 11590

QUOTATION

UN / DOT / IATA CLASSIFICATION OF DANGEROUS GOODS FOR TRANSPORT

Burning Rate Test - DOT/UN Test N.1 (Division 4.1)	$850
Dangerous When Wet Test - DOT/UN Test N.5 (Division 4.3)	$1795

The above prices are per sample and include all the standard test setup charges, where applicable. Our standard test turnaround time for these tests is 15 working days. We also offer fast turnaround service, where we provide the test results within five (5) business days for an additional charge of 35% per sample per test. Upon completion of testing, a comprehensive report shall be prepared presenting a description of the test procedures, the test results, and an interpretation of the findings.

Notably, CTI typically offers a 20% discount off the total testing price for five (5) or more samples received at the same time for the same test. **In this instance, however, CTI agrees to match a competitor's price of $6,875 for five (5) samples received at the same time for the same test.**

NOTES

1. Quotation valid for 60 days.
2. Consumables are charged extra at cost.
3. Results available within 15 working days.
4. Client to be charged all shipping at cost.
5. Client to supply one (1) kilogram of each sample for testing.
6. Client to supply Materials Safety Data Sheets (MSDS).
7. Surplus material after testing will be disposed of in line with current environmental guidelines or returned to client. In either case, a fixed cost of $85.00/per sample will be charged.
8. Particularly Hazardous Substances - Additional charges may be applied for the testing of "particularly hazardous substances", including certain carcinogens, reproductive toxins, and substances with a high degree of acute toxicity (per 29 CFR 1910.1450
9. Additional copies of the final report can be provided at a cost of $50.00 per copy.

PLEASE REFER TO OUR QUOTATION NUMBER ON ALL PURCHASE ORDERS AND CORRESPONDENCE.

We accept the above quotation for carrying out the work in the proposal referred to upon the standard conditions of business printed overleaf.

Signed .....

Print Name .....

Title .....

Date .....

For Chilworth Technology Inc.

The above prices are per sample and include all the standard test setup charges, where applicable. Our standard test turnaround time for these tests is 15 working days. We also offer fast turnaround service, where we provide the test results within five (5) business days for an additional charge of 35% per sample per test. Upon completion of testing, a comprehensive report shall be prepared presenting a description of the test procedures, the test results, and an interpretation of the findings.

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9. Additional copies of the final report can be provided at a cost of $50.00 per copy.

PLEASE REFER TO OUR QUOTATION NUMBER ON ALL PURCHASE ORDERS AND CORRESPONDENCE.

35153

State of New Jersey
Department of Environmental Protection
Division of Hazardous Waste Management
Manifest Section
CN 028, Trenton, NJ 08625

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD057731663 Manifest Document No. 0001

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Metco, Inc.
325 Duffy Avenue, Hicksville, New York 11801

4. Generator's Phone (516) 334-1300

5. Transporter 1 Company Name: Baron-Blakeslee Inc.
6. US EPA ID Number: NJD982528168

7. Transporter 2 Company Name: Baron-Blakeslee Inc
8. US EPA ID Number: NJD982528168

9. Designated Facility Name and Site Address
Meriscol, Inc.
125 Factory Lane
Middlesex, N.J. 08846
10. US EPA ID Number: NJD002454544

A. State Manifest Document Number: NJA 0640503
B. State Generator's ID: Same
C. State Trans. ID: NJDEP 506329
D. Transporter's Phone: (201) 354-2244
E. State Transporter's ID: NJDEP 506329
F. Transporter's Phone: (201) 354-2244
G. State Facility's ID: NA/NA
H. Facility's Phone: (201) 469-5100

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

	HM	11. US DOT Description	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	RQ	Waste, 1-1-1 Trichloroethane Mixture, ORM-A, UN2831 (Contains 1,4-Diethylene Dioxide)	003	DM	00140	G	F001
b.		(TF) Hazardous Waste, Liquid N.O.S., ORM-E, NA9189	001	DM	00050	G	F001
c.							
d.							

J. Additional Descriptions for Materials Listed Above
a. T,L
b. 100% Trichlorotrifluoroethane T,L
c.
d.

K. Handling Codes for Wastes Listed Above
a. T04
b. T04
c.
d.

15. Special Handling Instructions and Additional Information
NYJA 195
NJ 22724 DCAL TEMP

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: X Bruce Nielsen
Signature: X
Month Day Year: 05 25 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: FRANK DiNARDO
Signature: Frank DiNardo
Month Day Year: 05 25 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: John Henderson
Signature: John Henderson
Month Day Year: 05 25 89

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Donna Hickey
Signature: Donna Hickey
Month Day Year: 5 25 89

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection

(Rev. 9/88) Previous editions are obsolete.

SIGNATURE AND INFORMATION MUST BE LEGIBLE ON ALL COPIES

3 — TSD MAIL TO GENERATOR

WORK COPY PA

SITE NAME: MGCO DIVISION PERKIN-ELMER
PROSPECT AVENUE FACILITY

EPA ID NO. NYD 131 318 651

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

1993 HAZARDOUS WASTE REPORT

FORM GM

WASTE GENERATION AND MANAGEMENT

INSTRUCTIONS: Read the detailed instructions beginning on page 13 of the Hazardous Waste Report booklet before completing this form.

Sec I

A. Waste description: - Instructions, Page 15
MIXED LAB PACK OF FLAMMABLE, CORROSIVE, REACTIVE AND TOXIC OUTDATED CHEMICALS FROM RESEARCH LABORATORY; LAB PACK OF MIXED CHEMICALS.

B. EPA hazardous waste code: Instructions, Page 16
LABP NA NA NA NA

C. New York State hazardous waste code: Instructions, Page 16

D. SIC code: Page 16 — 3542

E. Origin Code: Page 16 — 1
System type: M

F. Source code: Page 17 — A 58

G. Point of measurement: Page 17 — 1

H. Form code: Page 17 — B 001

I. RCRA Radioactive- mixed: Page 17 — 2

J. Reported TRI constituent: Page 18 — 2

K. CAS numbers: Page 18
1. ____ 2. ____ 3. ____ 4. ____ 5. ____

Sec II

A. Quantity of Hazardous Waste generated in 1992: Instructions, Page 18 — NA

B. Quantity of Hazardous Waste generated in 1993: - Instructions, Page 18 — 2024.0

C. UOM: Instr., Page 19 — 1 (1. lbs/gal. 2. sg)
Density:

D. Did this site treat on site, dispose of on site, recycle on site, or discharge to a sewer/POTW? Instr., Page 19
☐ 1. Yes (continue to system 1)
☒ 2. No (Skip to Sec. III)

ON-SITE SYSTEM 1
PS Page Number
On-site system type Instr., Page 19: M
Quantity treated, disposed of, or recycled on site in 1993:

ON-SITE SYSTEM 2
PS Page Number
On-site system type: Instr., Page 19: M
Quantity treated, disposed of, or recycled on site in 1993:

Sec III

A. Was any of this waste shipped off site in 1993? Instructions, Page 20
☒ 1. Yes (continue to Box "B")
☐ 2. No (Skip to Sec. IV)

	B. EPA ID Number of facility to which waste was shipped: Instr., Page 20	C. System type shipped to Instr., Page 20 (WOUD)	D. Off-site availability code: Instr., Page 21	E. Total quantity shipped to this facility in 1993: Instr., Page 21
Site 1	NJD 089 216 790	M 041	1	2564.0
Site 2	NJD 089 216 790	M 043	1	260.0

Sec IV

A. Did any new activities in 1993 result in reduction of this waste? Instructions, Page 22
☐ 1. Yes (continue to Box "B")
☒ 2. No (This form is now complete)

B. Activity: - Instr., Page 22 — W W W W

C. Other effects ? Instr., Page 22
☐ 1. Yes
☐ 2. No

D. Quantity recycled in 1993 due to new activities: Instr., Page 22

E. Activity/production index: Instr., Page 22

F. 1993 source reduction quantity: Instr., Page 24

Comments:

Page ____ of ____

48-14-1 (3-89)-71

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

Please print or type. DO NOT STAPLE.

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-94

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. [illegible] — Manifest Document No. [illegible]
2. Page 1 of [illegible] — Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
[illegible]
[illegible] Ave. [illegible], N.Y. [illegible]
4. Generator's Phone ([illegible]) [illegible]

A. State Manifest Document Number: NYC 281859-6
B. Generator's ID: [illegible]

5. Transporter 1 (Company Name): [illegible] CORP.
6. US EPA ID Number: [illegible]

C. State Transporter's ID: [illegible]
D. Transporter's Phone ( )

7. Transporter 2 (Company Name)
8. US EPA ID Number

E. State Transporter's ID
F. Transporter's Phone ( )

9. Designated Facility Name and Site Address
[illegible] CORP.
[illegible] AVE.
[illegible], N.Y. 11691
10. US EPA ID Number: [illegible]

G. State Facility's ID
H. Facility's Phone: ([illegible]) [illegible]

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. [illegible]	[illegible]	[illegible]	[illegible]		EPA / STATE [illegible]
b. [illegible]	[illegible]	[illegible]	[illegible]		EPA / STATE [illegible]
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
a (A) D018,D006,
(A) D008,F035,D040
b (B) D018,D006
(B) D008,D035,D040
c
d

K. Handling Codes for Wastes Listed Above
a [illegible] c [illegible]
b [illegible] d [illegible]

15. Special Handling Instructions and Additional Information
[illegible]

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR**, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: [illegible] — Signature: [illegible] — Mo. Day Year [illegible]

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: [illegible] — Signature: [illegible] — Mo. Day Year [illegible]

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name — Signature — Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: [illegible] — Signature: [illegible] — Mo. Day Year [illegible]

NYC 281859-6

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 5-Generator-Mailed by TSD facility

P2SUL005832

48-14-1 (3-89)-7f

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

Please print or type. DO NOT STAPLE.

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. [illegible] — Manifest Document No. [illegible]
2. Page 1 of — Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
[illegible]
[illegible] Ave., [illegible], N.Y. [illegible]

4. Generator's Phone ([illegible])

A. State Manifest Document Number NY C 281859-6

B. Generator's ID [illegible]

5. Transporter 1 (Company Name) [illegible]
6. US EPA ID Number [illegible]

C. State Transporter's ID [illegible]

D. Transporter's Phone ( )

7. Transporter 2 (Company Name)
8. US EPA ID Number

E. State Transporter's ID [illegible]

F. Transporter's Phone ( )

9. Designated Facility Name and Site Address
CAYUGA [illegible] CORP.
[illegible] AVE.
[illegible], N.Y. 11801
10. US EPA ID Number [illegible]

G. State Facility's ID

H. Facility's Phone ([illegible])

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. [illegible] (D018,D006,D035,D039,D040) (RMCRA)	[illegible]	[illegible]	[illegible]	[illegible]	EPA STATE [illegible]
b. [illegible] (D018,D006,D035,D039,D040)	[illegible]	[illegible]	[illegible]	[illegible]	EPA STATE [illegible]
c.					EPA STATE
d.					EPA STATE

J. Additional Descriptions for Materials Listed Above
1 (A) D018,D006,
a (A) D006,D035,D040
1 (B) D018,D006
b (B) D006,D035,D040
c
d

K. Handling Codes for Wastes Listed Above
a
b
c
d

15. Special Handling Instructions and Additional Information
[illegible]
EMERGENCY RESPONSE 1-703-[illegible]
[illegible]

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Printed/Typed Name [illegible] — Signature [illegible] — Mo. Day Year

TRANSPORTER

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Printed/Typed Name [illegible] — Signature [illegible] — Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name — Signature — Mo. Day Year

FACILITY

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Printed/Typed Name — Signature — Mo. Day Year

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

NY C 281859-6

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 8-Generator-retained by generator

P2SUL005833

2-118-08

safety-kleen

LAND DISPOSAL RESTRICTION AND WASTE ANALYSIS CRITERIA FORM

TO: SAFETY-KLEEN CORP. (DESIGNATED FACILITY) EPA ID NO. NYD000708128 (DESIGNATED FACILITY)

ADDRESS: 80 SEABRO NO AMITYVILLE, NY 11701

Under manifest / sales service number NYC 331844-S, the generator noted below is shipping to you a waste determined to be restricted under 40 CFR Part 268. In accordance with 40 CFR Part 268.7, the generator hereby provides notice that the waste is restricted from land disposal. A copy of this form must be kept by the generator and facility for five (5) years from the date of waste shipment. * SEE BELOW

PLEASE ✓ THE APPROPRIATE BOXES

WASTE NAME (FOR NON-WASTE WATER)	WASTE CODE	THE WASTE MAY CONTAIN THE FOLLOWING RESTRICTED CONSTITUENTS	TREATMENT STANDARD (mg/l) OR METHOD
☑ Waste Petroleum Naphtha 105	D001,	Ignitable Liquid (High TOC Subcategory)	Incineration (INCIN), fuel substitution (FSUBS) or recovery (RORGS) (40 CFR 268.42) (non-waste water)
		Halogenated Organic Compounds (HOC's) ≥ 1000 mg/l	INCIN (40 CFR 268.42)(non-waste water)
	D006,	Cadmium	1.0 (non-waste water)
	D008,	Lead	5.0 (non-waste Water
	D018,	Benzene	Not Established
	D035,	Methyl Ethyl Ketone	Not Established
	D039,	Tetrachloroethylene	Not Established
	D040,	Trichloroethylene	Not Established
☐ Waste Petroleum Naphtha 140	D001,	Ignitable Liquid (High TOC Subcategory)	INCIN, FSUBS, or RORGS (40 CFR 268.42)(non-waste water)
	D006,	Cadmium	1.0 (non-waste water)
	D008,	Lead	5.0 (non-waste Water
	D018,	Benzene	Not Established
	D039,	Tetrachloroethylene	Not Established
☐ Cyclonic, 150 Premium Solvent OR Actrel Solvent (If customer specific TCLP is not available)	D006,	Cadmium	1.0 (non-waste water)
	D008,	Lead	5.0 (non-waste Water
	D018,	Benzene	Not Established
	D039,	Tetrachloroethylene	Not Established
	D040,	Trichloroethylene	Not Established
☐ Waste Petroleum Naphtha (sludges from Safety-Kleen Service Center Operations	D001,	Ignitable Liquid (High TOC Subcategory)	INCIN, FSUBS, or RORGS (40 CFR 268.42)(non-waste water)
	D006,	Cadmium	1.0 (non-waste water)
	D008,	Lead	5.0 (non-waste Water)
	D018,	Benzene	Not Established
	D039,	Tetrachloroethylene	Not Established
☐ Waste Compound Cleaning Liquid/ Immersion cleaner 699		HOC's ≥ 1000 mg/l	INCIN (40 CFR 268.42)(non-waste water)
	D006,	Cadmium	1.0 (non-waste water)
	D008,	Lead	5.0 (non-waste Water
	D018,	Benzene	Not Established
	D021,	Chlorobenzene	Not Established
	D027,	1, 4-Dichlorobenzene	Not Established
	D035,	Methyl Ethyl Ketone	Not Established
	D039,	Tetrachloroethylene	Not Established
	D040,	Trichloroethylene	Not Established

OPTIONAL STATE INFO.

MACHINE NUMBER	SPECIFIC GRAVITY	EXCESS FLUID IN DRUM? (MS>2/3)(IC>1/3)(Y/N)	OFF - COLOR? (Y/N)	MORE THAN 30% SOLIDS?(Y/N)	UNUSUAL ODOR? (Y/N)	UNUSUAL MATERIALS INCLUDED/ADDED? (Y/N)
172-35811						
172-37237						
172-37240						
173-02444						
173-02468						
173-02475						
173-02493						
173-02695						
173-09781						
173-10374						
173-41669						
SPECIFIC GRAVITY ACCEPTANCE GUIDELINES						

2-118-08-1500 01 058763 9444

The constituent composition is based on knowledge of the waste (via Material Safety Data Sheets for the chemical(s) used, and the process which created the waste).
*These treatment standards do not preclude reclamation prior to final disposition.

Generator Company: METCO EPA ID NO.: NYD057731663

* ALSO IN ACCORDANCE WITH 6NYCRR 376.4(C)

Safety-Kleen Corp. manages the above waste through its recycling and/or fuels programs in accordance with applicable

GENERATOR

FORM 1339

Is your RETURN ADDRESS completed on the reverse side?

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

NYS DEC DIVISION OF HAZARDOUS
SUBSTANCES REGULATION
PO BOX 12820
ALBANY NY 12212

4a. Article Number
Z 024 624 069

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

PS Form 3811, December 1991 ☆U.S. GPO: 1993—352-714 **DOMESTIC RETURN RECEIPT**

Z 024 624 069

Receipt for Certified Mail
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

UNITED STATES POSTAL SERVICE

Sent to	NYS DEC DIVISION OF HAZARDOUS SUBSTANCES REG.
Street and No.	PO BOX 12820
P.O., State and ZIP Code	ALBANY NY 12212
Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form 3800, March 1993

Fold at line over top of envelope to the right of the return address

CERTIFIED MAIL

Z 024 624 069

safety-kleen

11/29/94

Metco
325 Duffy Ave
Hicksville NY 11801

Ref: NYC 2818596 Dated: 11/03/94

Dear Sir:

Enclosed is our recent correspondence with New York State concerning the above Manifest. Please keep all of the enclosed so that your records are complete.

If you have any questions, please call (516) 842-6311.

Sincerely,

Joyce Zimmerman
Branch Office Supervisor

Enc.

1000 NORTH RANDALL ROAD ELGIN, ILLINOIS 60123-7857 PHONE 708/697-8460 FAX 708/468-8500

PRINTED ON RECYCLED PAPER

48-14-1 (3-89)

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

Form Approved OMB No. 2050-0039, Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD 057731663
Manifest Document No.: 58764
2. Page 1 of 1

Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
METCO
325 Duffy Ave. Hicksville, N.Y. 11801-3671

4. Generator's Phone (516)938-1661

A. State Manifest Document Number: NYC 281859-6
B. Generator's ID: SAME

5. Transporter 1 (Company Name): SAFETY-KLEEN CORP.
6. US EPA ID Number: ILD 984908202
C. State Transporter's ID: NS 265
D. Transporter's Phone: (516) 842-6311

7. Transporter 2 (Company Name)
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone ( )

9. Designated Facility Name and Site Address
SAFETY KLEEN CORP.
80 SEABRO AVE.
NO. AMITYVILLE, N.Y. 11701
10. US EPA ID Number: NYD 000708198
G. State Facility's ID
H. Facility's Phone: (516) 842-6311

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA 1993 PGIII (D001) (D006)D008,D008,D035,D039,D040) (ERG#27)	01	DM	0014	G	EPA D001 STATE D039
b. WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII (ERG#27) (D006,D008,D018,D039,D040)	01	DM	0008	G	EPA D001 STATE D039
c.					EPA STATE
d.					EPA STATE

J. Additional Descriptions for Materials Listed Above
a I (A) D018,D006, (A) D008,D035,D040
b I (B) D018,D006 (B) D008, D039,D040
c
d

K. Handling Codes for Wastes Listed Above
a R
b R
c
d

15. Special Handling Instructions and Additional Information
2-118-08-1500
EMERGENCY RESPONSE# 1-708- 888-4660 24HR
SKDOT# A: 501 B: 653

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Bill Boustard | Signature: B. Boustard | Mo. Day Year: 11 03 94

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: Tom Kortz | Signature: Tom Kortz | Mo. Day Year: 11 03 94

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space
Line 10 = NYD 000708198

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: Joyce Zimmerman | Signature | Mo. Day Year: 11 03 94

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

NYC 281859-6

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 2-Generator State-mailed by TSD facility

P2SUL005838

safety-kleen.

11/29/94

New York State DEC
Manifest Section
P.O. Box 12820
Albany, NY 12212

Ref: Manifest - NYC 2818596 Dated: 11/03/94

Dear Sir:

Enclosed is a copy of the above manifest. Error on Line 10 Facility EPA ID# has been corrected on the enclosed photocopy.

If you have any questions, please call me at 516-842-6311.

Sincerely,

Joyce Zimmerman
Office Supervisor
Safety Kleen Corp
60 Seabro Ave
N Amityville NY 11701

cc: Metco

1000 NORTH RANDALL ROAD ELGIN, ILLINOIS 60123-7857 PHONE 708/697-8460 FAX 708/468-8500

PRINTED ON RECYCLED PAPER

PERKIN ELMER

The Perkin-Elmer Corporation
Metco Division
1101 Prospect Avenue
Westbury, New York 11590
Phone (516) 334-1300
Fax (516) 334-6692
Telex 967759

September 8, 1989

Fire Chief
Hicksville Fire Department
E. Marie Street
Hicksville, NY 11800

RE: Hazardous Material Report

Dear Sir/Madam:

Enclosed please find the Hazardous Material Report in accordance with the provisions of section 209-u of the General Municipal Law.

If you have any questions please feel free to contact me at the above number.

Very truly yours,

Patrick A. Tighe
Superintendent
Facilities Coordination

PAT:eb
Enclosure
cc: F. McKendry

NEW YORK STATE DEPARTMENT OF STATE
OFFICE OF FIRE PREVENTION AND CONTROL

HAZARDOUS MATERIALS REPORT FORM
(General Municipal Law, § 209-u)

The information entered herein is essential to your local fire chief for the protection of your employees, the firefighters and citizens in the immediate area, and to reduce damage to your property in the event of a fire or an emergency.

Every fire insurance policyholder, engaged in commerce in this state, is required by law to report the presence of hazardous materials at their business address.

Failure to file in accordance with the provisions of section 209-u of the General Municipal Law could result in a fine.

A separate report is required annually for each business address.

WHEN COMPLETED, THIS FORM MUST BE SENT TO YOUR LOCAL FIRE DEPARTMENT.

		Hazardous Materials Location*	
Firm Name	METCO, A Div. of Perkin-Elmer	Street Add. Only	325 Duffy Avenue
Bus. Add.	1101 Prospect Avenue	Bldg. Name or No.	Duffy Avenue Building
City, State, Zip	Westbury, NY 11590	City, State, Zip	Hicksville, NY 11801
Tel. No.	516-334-1300	Policy Anniv. Date	
Name of Emergency Contact	Jim Zanetti	Bus. Tel. 516-938-1661	Home Tel. 516-666-7441

Patrick A. Tighe
Superintendent, Facilities Coordination

(Signature and Title of Person Completing Form)

Frank Mc Kendry
Controller

*It is suggested that a separate form be filled out for each building that contains hazardous materials.

EXEMPTIONS

Requests for exemptions from this law must be made in writing, attached to this form, and filed annually with your local fire department not later than the anniversary date of your policy.

All exemptions approved shall expire on the next policy anniversary date.

Exemptions denied shall require that the insured file a completed hazardous materials report form within 15 days of denial.

FOR FIRE DEPARTMENT USE ONLY

Exemptions: Approved _____ Denied _____ Additional Information Needed _____

(Date) _____ (Signature of Fire Chief) _____

(Fire Department Name and Address) _____ (Print Name of Fire Chief) _____

Hazardous Material Listing (attach additional sheets if necessary)
Note: Definitions of symbols are on the second page of the instruction sheet.

Identifying Symbol	Material Description & Proper Shipping Name	Total Amount	Identifying Symbol	Material Description & Proper Shipping Name	Total Amount
	None			Nitrogen	30CYL
				Argon	15CYL
				Helium	15CYL
POISON GAS	None		OXIDIZER	Oxygen	40CYL
POISON / IRRITANT	None		ORGANIC PEROXIDE	None	
	Paint, Water Reducible Acrylic	300GAL	RADIOACTIVE	None	
	None		CORROSIVE	Coppa Dip	75GAL
FLAMMABLE SOLID	Aluminum Sludge	500LBS	DANGEROUS WHEN WET	Aluminum Sludge	500LBS
	Proplene	30CYL	ETIOLOGIC AGENTS BIOMEDICAL MATERIAL IN CASE OF DAMAGE OR LEAKAGE NOTIFY DIRECTOR CDC ATLANTA, GEORGIA 404/633-5313	None	
	Acytylene	11CYL			
	Hydrogen	11CYL			
	Mapp	1CYL			
	LPG	3CYL			

VI Special Considerations/Remarks: This building uses natural gas for building heat.

(IMPORTANT: Type or print; read instructions before completing form)

Form Approved OMB Number: 2070-0093
Approval Expires: 11/92

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United States Environmental Protection Agency

FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER: 11590PRKNL1101P

Toxic Chemical, Category, or Generic Name: Copper Powder

WHERE TO SEND COMPLETED FORMS:
1. EPCRA Reporting Center, P.O. Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

For EPA use only

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 94

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?
[ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [X] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official: Joseph D. Reardon, Global Quality

Signature: Joseph D Reardon

Date Signed: July 20, 1995

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: Sulzer Metco (US) Inc.

TRI Facility ID Number: 11590PRKNL1101P

Street Address: 1101 Prospect Avenue

City: Westbury

County: Nassau

State: New York

Zip Code: 11590

Mailing Address (if different from street address):

City:

State:

Zip Code:

PUT LABEL HERE

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EPA FORM R

PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Copper Powder

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check a or b; check c if applicable)	a. ☐ An entire facility	b. ☒ Part of a facility	c. ☐ A Federal facility			
4.3	Technical Contact	Name: Joseph D. Reardon			Telephone Number (include area code): (516) 334-1300		
4.4	Public Contact	Name: Joseph D. Reardon			Telephone Number (include area code): (516) 334-1300		
4.5	SIC Code (4-digit)	a. 3542	b.	c.	d.	e.	f.
4.6	Latitude and Longitude	Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		075	09	50	027	53	16
4.7	Dun & Bradstreet Number(s) (9 digits)	a. 15-208-4398					
		b.					
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. NYD131318651					
		b.					
4.9	Facility NPDES Permit Number(s) (9 characters)	a. N/A					
		b.					
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. N/A					
		b.					

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	☐ NA Sulzer Inc.
5.2	Parent Company's Dun & Bradstreet Number	☐ NA (9 digits) 00-182-6957

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER
15590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Copper Powder

SECTION 1. TOXIC CHEMICAL IDENTITY

(Important: DO NOT complete this section if you complete Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	7440-50-8
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	Copper
1.3	Generic Chemical Name (Important: Complete **only** if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)
	N/A

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
	N/A

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1	**Manufacture the toxic chemical:**	a. ☐ Produce b. ☐ Import	If produce or import: c. ☐ For on-site use/processing d. ☐ For sale/distribution e. ☐ As a byproduct f. ☐ As an impurity
3.2	**Process the toxic chemical:**	a. ☐ As a reactant b. ☐ As a formulation component	c. ☐ As an article component d. ☐ Repackaging
3.3	**Otherwise use the toxic chemical:**	a. ☐ As a chemical processing aid b. ☐ As a manufacturing aid	c. ☒ Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	03 (Enter two-digit code from instruction package.)	

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Copper Powder

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X] NA			
5.2	Stack or point air emissions	[ ] NA	A	C	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name				
	N/A				
5.3.2	Stream or Water Body Name				
	N/A				
5.3.3	Stream or Water Body Name				
	N/A				
5.4	Underground injections on-site	[X] NA			
5.5	Releases to land on-site				
5.5.1	Landfill	[X] NA			
5.5.2	Land treatment/ application farming	[X] NA			
5.5.3	Surface impoundment	[X] NA			
5.5.4	Other disposal	[X] NA			

[ ] Check here only if additional Section 5.3 information is provided on page 5 of this form.

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Copper Powder

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3 Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__ Stream or Water Body Name: N/A			
5.3.__ Stream or Water Body Name: N/A			
5.3.__ Stream or Water Body Name: N/A			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)
N/A	

6.1.B POTW Name and Location Information

6.1.B.__ POTW Name		6.1.B.__ POTW Name	
N/A			
Street Address		Street Address	
City	County	City	County
State	Zip Code	State	Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ]
(example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

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United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 11590PRKNL1101P

Toxic Chemical, Category, or Generic Name: Copper Powder

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. Off-site EPA Identification Number (RCRA ID No.): NJD089216790

Off-Site Location Name: Chemical Waste Management of New Jersey, Inc.

Street Address: 100 Lister Avenue

City: Newark

County:

State: New Jersey

Zip Code: 07105

Is location under control of reporting facility or parent company? [X] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. C	1. M	1. M 72
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2. Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: N/A

Street Address:

City:

County:

State:

Zip Code:

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Section 6.2 page this is, here. [ ] (example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Copper Powder

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] **Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.**

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b 1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6 [ ] 7 [ ] 8 [ ]	7A.1c	7A.1d %	7A.1e Yes [ ] No [ ]
7A.2a	7A.2b 1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6 [ ] 7 [ ] 8 [ ]	7A.2c	7A.2d %	7A.2e Yes [ ] No [ ]
7A.3a	7A.3b 1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6 [ ] 7 [ ] 8 [ ]	7A.3c	7A.3d %	7A.3e Yes [ ] No [ ]
7A.4a	7A.4b 1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6 [ ] 7 [ ] 8 [ ]	7A.4c	7A.4d %	7A.4e Yes [ ] No [ ]
7A.5a	7A.5b 1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6 [ ] 7 [ ] 8 [ ]	7A.5c	7A.5d %	7A.5e Yes [ ] No [ ]

If additional copies of page 7 are attached, indicate the total number of pages in this box [ ] and indicate which page 7 this is, here. [ ] (example: 1, 2, 3, etc.)

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Copper Powder

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Chemical, Category, or Generic Name
Copper Powder

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

All quantity estimates can be reported using up to two significant figures.		Column A Prior Year (pounds/year)	Column B Current Reporting Year (pounds/year)	Column C Following Year (pounds/year)	Column D Second Following Year (pounds/year)
8.1	Quantity released *	2	2	2	2
8.2	Quantity used for energy recovery on-site	0	0	0	0
8.3	Quantity used for energy recovery off-site	0	0	0	0
8.4	Quantity recycled on-site	0	0	0	0
8.5	Quantity recycled off-site	1000	920	920	920
8.6	Quantity treated on-site	0	0	0	0
8.7	Quantity treated off-site	0	0	0	0
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	N/A			
8.9	Production ratio or activity index	.90			

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	N/A	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

		YES	NO
8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)		X

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

SULZER

Sulzer Metco

Waste Disposal Form

Department: Materials Operations Date: 4/28/05

Name of Submitter: Mike Mueller

920
316
676
575

Waste Description:

Quantity of waste: 4 drums LB

List all constituents known to be present and the approximate percent of each. If the waste is a mixture of Sulzer Metco products, list the approximate percent of each:

1.	Dry Ceramic	90 %	6.		%
2.	Sweeping Compound	8 %	7.		%
3.	Organics	1 %	8.		%
4.	Other	1 %	9.		%
5.		%	10.		%

Properties:

Circle those that apply:

Powder	Liquid	Flammable	Combustible
Oxidizer	Corrosive	Highly Acidic	Highly Alkaline

Please submit this form to the Facilities Department. Do not take the material to anyone. Someone will be assigned to remove the material for storage prior to disposal.

Facilities Use Only:

Waste Profile Code: CH189107 Internal Tracking Number: N/a

Labels Required: N/a

WasteDisposalForm0303

4/28/05

4/28/04

WESTBURY

TIER ONE Emergency & Hazardous Chemical Inventory

Aggregate Information By Hazard Type

For Official Use Only ID #: _____

Date Received: _____

Reporting Period From January 1, to December 31, 1987

Facility Identification:

Name: METCO DIVISION PERKIN-ELMER, WESTBURY
Address: WESTBURY POWDER WAREHOUSE
1101 PROSPECT AVENUE
City: WESTBURY, NY 11590

SIC Code: 3399 Dun & Bradstreet #:

Owner/Operator Information:

Name: MR. ABE TEICHER, SAFETY OFFICER
Address: METCO, PERKIN ELMER, WESTBURY
1101 PROSPECT STREET
City: WESTBURY, NY 11590
Phone: (516)334-1300

Emergency Contacts:

Name: MR. BURTON KUSHNER
Title: MANAGER, MATERIALS ENGINEERING
Phone: (516)334-1300
24 Hr Phone: ( ) -

Name: MR. ABE TEICHER
Title: SAFETY OFFICER
Phone: (516)334-1300
24 Hr Phone: ( ) -

Physical Hazards

Hazard Type	Max Amount*	Average Daily Amount*	Number Of Days On-Site	General Location
Fire	03	03	365	METCO, WESTBURY HEADQUARTERS PLANT FINISHED POWDER WAREHOUSE 1101 PROSPECT AVENUE WESTBURY, N.Y. 11590
Sudden Release of Pressure	00	00	000	METCO, WESTBURY HEADQUARTERS PLANT FINISHED POWDER WAREHOUSE 1101 PROSPECT AVENUE WESTBURY, N.Y. 11590
Reactivity	00	00	000	METCO, WESTBURY HEADQUARTERS PLANT FINISHED POWDER WAREHOUSE 1101 PROSPECT AVENUE WESTBURY, N.Y. 11590

Health Hazards

Immediate (Acute)	03	03	365	METCO, WESTBURY HEADQUARTERS PLANT FINISHED POWDER WAREHOUSE 1101 PROSPECT AVENUE WESTBURY, N.Y. 11590
Delayed (Chronic)	03	03	365	METCO, WESTBURY HEADQUARTERS PLANT FINISHED POWDER WAREHOUSE 1101 PROSPECT AVENUE WESTBURY, N.Y. 11590

Certification (Read and Sign After Completing All Sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and attached documents, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate and complete.

_____

Name and Official Title of Owner/Operator OR Owner/Operator's authorized Representative

_____ _____

Signature Date Signed

* Reporting Ranges	Range Value	Weight Range in Pounds From...	To...
	00	0	99
	01	100	999
	02	1,000	9,999
	03	10,000	99,999
	04	100,000	999,999
	05	1,000,000	9,999,999
	06	10,000,000	49,999,999
	07	50,000,000	99,999,999
	08	100,000,000	499,999,999
	09	500,000,000	999,999,999
	10	1 Billion	Over 1 Billion

CLOSURE PLAN

SULZER METCO
325 DUFFY AVENUE
HICKSVILLE, NEW YORK

PREPARED FOR:

SULZER METCO (US) INC.

1101 PROSPECT AVENUE

WESTBURY, NY 11590

PREPARED BY:

HOLZMACHER, McLENDON & MURRELL, P.C

575 BROAD HOLLOW ROAD

MELVILLE, NEW YORK

DECEMBER 1998

CLOSURE PLAN
SULZER METCO (US) INC.
HICKSVILLE, NEW YORK

DECEMBER 1998

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CLOSURE PLAN

DUFFY AVENUE FACILITY

SULZER METCO (US) INC.

HICKSVILLE, NEW YORK

DECEMBER 1998

1.0 GENERAL INFORMATION

Facility Name:	Sulzer Metco Duffy Avenue Facility
Address:	325 Duffy Avenue Hicksville, New York 11801
Facility Contact:	Michael S. Lydon Environment, Health & Safety Specialist
Telephone No.:	(516) 338-2337
Owner:	First Industrial, L.P.
Operator:	Sulzer Metco (US) Inc. 1101 Prospect Avenue Westbury, NY 11590
RCRA Status:	Small Quantity Generator

1.1 Scope

This closure plan addresses hazardous as well as non-hazardous wastes which are generated and removed from the Hicksville Sulzer Metco facility on a regular basis. In addition, the scope of this closure plan will include the decommissioning and decontamination of the radioactive thoriated tungsten machining area in the Turret Lathe Department. The Sulzer Metco

facility is operating as a small quantity generator of hazardous waste and therefore, a closure plan is not specifically required by New York State Hazardous Waste regulations.

However, this Closure Plan has been prepared at the request of Sulzer Metco and is intended to eliminate post-closure maintenance of hazardous waste generation sources at the facility and to ensure there is no post-closure release of hazardous waste to the environment. This closure plan has been prepared by Holzmacher, McLendon, & Murrell, P.C. (H2M) using the requirements outlined in 6 NYCRR Part 373-3.7, Closure and Post-Closure as a guideline.

The location of the facility to undergo closure is shown in Figure 1 – Location Map. Areas of the facility addressed by this Plan are indicated by Figure 2 – Closure Floor Plan.

1.2 Location and Facility Description

Sulzer Metco is located at 325 Duffy Avenue in Hicksville, New York in an area comprised primarily of industrial and commercial properties. The closest residential area is located approximately 1/2 mile to the south. Sulzer Metco is engaged in the manufacture of parts and equipment for the thermal spray coatings industry. Manufacturing operations which generate wastes requiring off-site disposal include machining, degreasing, tumbling, and component testing. The non-hazardous wastes generated during these processes include both water soluble and burnable cutting oils, Speedi-dry contaminated with waste cutting oils, tumbler waste sludge, plastic turnings, aluminum oxide powder, and wet collector sludge. Hazardous waste generated at this facility includes waste paint related material, copper cleaner and chromic acid, developer fixer, naphtha based solvent, and an aliphatic and aromatic hydrocarbon based petroleum distillate. The petroleum naphtha operations are owned and maintained by Safety-Kleen, a private contractor. The facilities will be removed by the contractor upon the authorization of Sulzer Metco.

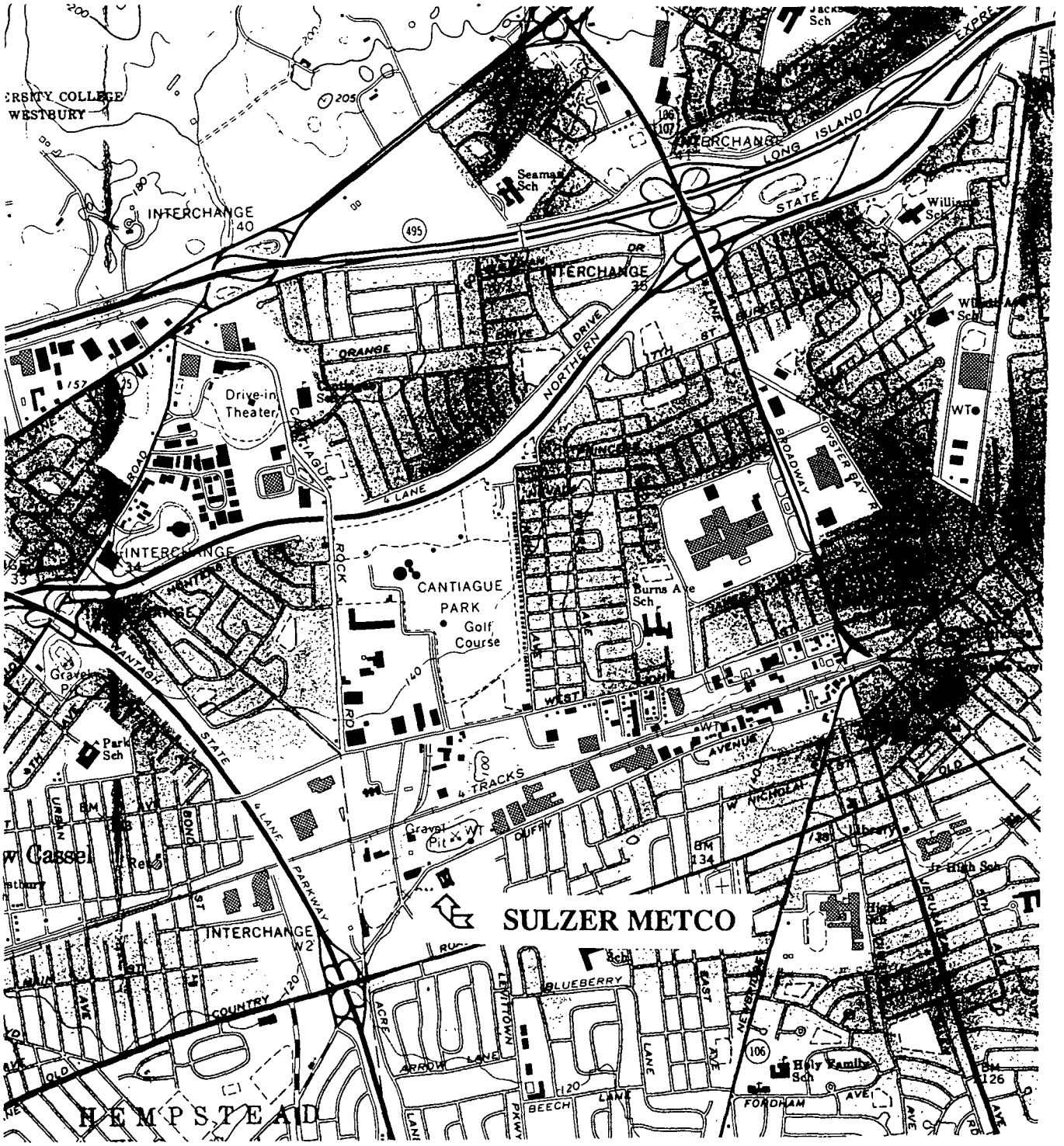

FIGURE 1

LOCATION MAP

SCALE: 1" = 2000'

SULZER METCO (US) INC.

H2MGROUP ENGINEERS · ARCHITECTS · PLANNERS · SCIENTISTS · SURVEYORS

MELVILLE, N.Y. TOTOWA, N.J.

1.3 Process Operations

In manufacturing metal components for the thermal spray coatings industry, Sulzer Metco performs extensive machining and milling of metal and plastic parts throughout the facility. The majority of machining equipment used at this facility include self-contained cutting oil sumps and pumps which provide lubrication during the machining process. For the purpose of this plan, it is assumed that all equipment has been drained of its characteristic lubricant, and similar lubricants have been combined in suitable drums for off site disposal. Miscellaneous cutting oils (in small quantities) are spilled from time to time, and are absorbed using Speedi-dry which is swept up and labeled for off-site disposal as non-hazardous waste. Milling processes produce various metal and plastic shavings contaminated with cutting oils which are swept up and collected in 55 gallon drums for off site disposal. The tumbling process produces a waste sludge which is hauled similarly. Several wet collectors are used to capture overspray from the spray coating processes, and the solution is routinely refreshed and the waste is stored until disposed off site. An aluminum oxide powder is produced as overspray from the spray area as well. This solid is stored in suitable containers prior to off-site disposal.

In addition to the non-hazardous waste products produced during manufacturing processes at the Duffy Avenue facility, several EPA regulated hazardous wastes are produced and stored prior to off-site disposal/treatment. Waste paint related material consisting of paints and solvents are collected in the painting/polishing area of the facility. A copper cleaner/chromic acid solution is produced as a result of the finishing operations in the finishing section of the facility. Due to the nature of operations at this facility, it is frequently necessary to use solvents to clean parts. For this purpose, self-contained part cleaning stations are located throughout the facility. Stations consist of a sink which discharges into a drum where solvent is recirculated. The stations are maintained regularly by Safety-Kleen, whom removes this waste off-site for disposal. In addition, several dip cleaning stations equipped with covers are present throughout

the facility. These stations are also maintained by Safety Kleen on a regular basis. The cleaning solvent used is an aliphatic hydrocarbon solution marketed under the name of Actrel.

One model of spray nozzle manufactured at the facility includes a small amount of radioactive material, thorium oxide. Manufacturing processes performed on this part consist of machining and buffing. Shavings and small particles of this material are drawn from the air through a duct system which leads to a baghouse nearby. A 55 gallon drum is used to collect particles, and is regularly emptied into 5-gallon pails for off-site disposal. Larger particles are swept up regularly and disposed of in similar pails.

Testing of various spray equipment is performed in either of two types of spray booths at the facility. Spray booths 1-3 are equipped with outdoor HEPA baghouses, and are used for spraying surface coatings including aluminum and nickel. Spray booths 4-9 are equipped with wet collectors and are used for spraying ceramic coatings only. All spray booths are equipped with floor drains which are routed through three concrete underground sumps beneath the shop floor and into the municipal sewer system.

2.0 CLOSURE

In general, the closure of Sulzer Metco's waste management facilities will include the removal of all hazardous wastes associated with the closure area, decontamination of the waste generation and storage facilities and removal of all wastes generated during decontamination.

2.1 General Description

The first step towards closure is the discontinuation of all process operations that generate wastes in the closure area. Sulzer Metco will complete chemical inventory disposal or relocation in accordance with all applicable federal, state, and local regulations.

Following waste inventory disposal/relocation, parts cleaning stations and solutions will be removed from the site by Safety-Kleen, who maintains the solutions and stations under contract. Areas where cleaning/degreasing operations took place will be visually inspected for indications of leaks and spills. All machining equipment which include an oil storage sump will be drained of all oils and wiped down as to remove remaining traces of cutting oils and lubricants. Machining equipment will be relocated to an alternate Sulzer Metco facility and floor areas beneath and around each piece of equipment will be closely inspected for indications of leaks or cracks in the floor surface.

Wastewaters generated during cleaning operations will be stored in containers suitable to the wastewaters generated and according to hazardous material storage guidelines prior to off-site treatment/disposal. The wastewaters will be transported and disposed of off-site in accordance with federal, state and local regulations. It should be noted that no wastewaters will be discharged to the municipal sewer throughout the duration of closure.

Upon completion of decontamination, all equipment and dip tanks will be either disposed of off-site or reused by Sultzer Metco at a new facility, depending on their condition. Confirmatory sampling will be performed to assure the efficiency of closure.

2.2 Closure Performance Standard

This closure plan is designed to ensure that Sulzer Metco's waste generation and storage facilities will require no further maintenance or controls following closure of its hazardous and non-hazardous waste activities. The plan is intended to eliminate threats to human health and the environment. To ensure adequate closure, all wastes, process equipment, and structures will be decontaminated and disposed of off-site or retained for use at an alternate facility. Following decontamination, confirmatory rinse samples will be collected and analyzed to ensure that no

significant concentrations (i.e., those exceeding the closure performance standards) of hazardous contaminants remain. If necessary, decontamination procedures will be repeated until contaminant levels are reduced within acceptable guidelines. If contamination exceeding performance standards is found to exist, appropriate remedial actions will be taken.

When available and applicable, federal, state, and local environmental quality standards are to be used to determine the adequacy of closure. Where formal standards do not exist, informal closure performance guidelines are to be used. The determination of informal closure performance guidelines was made by H2M after assessment of the following:

1. Review of available federal, state, and local guidelines and remedial action levels.
2. Review of similar projects and past NYSDEC and NCDOH guidance.
3. Nature and concentrations of contaminants.
4. Migration potential for contaminants.
5. Toxicological data for contaminants (i.e., methods of exposure, NIOSH standards, etc.).
6. Anticipated future use of subject property.

For the purposes of this closure, confirmatory rinse sample results shall be compared to the NYSDEC Class GA Groundwater Effluent Standards. If any parameters in the confirmatory rinse sample exceed ten times (10X) the groundwater effluent standard, the entire structure shall be decontaminated again and a second confirmatory rinse sample collected. This procedure shall be repeated until all parameters are within the closure performance standards.

The use of 10X the groundwater effluent standard instead of 1X the groundwater effluent standard is justified because all operations take place above a concrete floor slab which will essentially prevent leaching to soils underlying the manufacturing floor. In addition, this closure performance should be sufficiently protective of human health in an industrial environment where ingestion of materials (i.e., tanks, piping, concrete, etc.) is unlikely or negligible.

Analytical results for soil samples, if required, will be compared to the New York State Department of Environmental Conservation Technical and Administrative Guidance Memorandum 4046: Determination of Soil Cleanup Objectives and Cleanup Levels.

For the detection of petroleum naphtha and aromatic and aliphatic hydrocarbons in the areas of satellite cleaning stations, a photoionization detector (PID) equipped with an 10.2 eV lamp will be used to identify residual contamination following steam cleaning. If failures or cracks in the floor surface in the areas of any satellite cleaning stations are evident, soil samples will be collected from beneath the floor surface and analyzed for VOCs, SVOCs, and TPH using EPA methods 8260, 8270, and 8015, respectively.

For closure performance standards of the thoriated tungsten machining equipment, radiation levels will be recorded prior to and immediately following decontamination. Closure performance guidelines will correspond to 10 CFR 835.202, Occupational Exposure Limits for General Employees. Due to fact that Thorium 232 emits alpha, beta, and gamma radiation, it is categorized as having an absorbed dose equivalency of 1.0 in accordance with 10 CFR 20.1004 (b) 1. Decommissioning criteria will therefore be determined from the maximum surface radiation exposure from subject equipment and the surrounding floor area. The effective dose equivalent criteria for decontamination will be 5 rems/year or 0.57 millirems/hr as detected by a portable radiation monitor.

2.3 Maximum Waste Inventory

For the purpose of this closure plan, the entire chemical inventory is considered as waste to be hauled off-site upon closure. In addition, implementation of this closure plan will create wastes requiring off-site disposal such as decontamination rinsewaters, tanks, piping, and contaminated structures, if any. The maximum waste inventory for a RCRA regulated facility

must identify the maximum inventory of hazardous waste stored on-site at a facility over the active life of the facility. Therefore, the inventory excludes wastes generated as a result of facility closure. Based upon the fact that Safety Kleen maintains the parts cleaning stations on a monthly basis, and Chemical Pollution Control hauls wastepaint related material and copper/chromic acid cleaner on a bi-monthly basis, the maximum waste inventory can be defined in the following table:

Table 1: Maximum Waste Inventory

On-Site Hazardous Wastes

Process Generating Waste	Name of Waste	Maximum Quantity On-Site
Paint Finishing	Waste Paint Related Material (Profile 3376-F)	55 Gallons
Finishing Operation	Copper Cleaner and Chromic Acid (Profile 3376-G)	60 Gallons
Spray Painting Booth	Waste Paint Related Material (Profile 3376-I)	115 Gallons
Paint Finishing	Waste Paint Related Material (Profile 3376-L)	55 Gallons
Parts Cleaning Stations	Petroleum Naphtha, (Mineral Spirits)	150 Gallons
Satellite Dip Stations	Actrel 3349 Cleaner, Petroleum Distillates	155 Gallons

2.4 Closure of Satellite Parts Cleaning Stations

At the Duffy Avenue facility, there are eleven nine-gallon solvent stations and three seventeen-gallon stations which are all filled with mineral spirits. The stations are located throughout the facility and owned and maintained by Safety-Kleen Corp. The stations are maintained on a regular basis, approximately every four weeks. Decontamination and removal of the Satellite parts cleaning stations will be performed Safety-Kleen Corp. Safety-Kleen will be

notified by Sulzer Metco when the facility ceases production activities. Stations and spent solvents will be collected and hauled off-site by Safety-Kleen personnel in accordance with applicable hazardous material handling regulations. After all stations have been removed, the following closure activity will be performed:

1. Floor surfaces around each station will be inspected by qualified Sulzer Metco employees or an outside contractor. Any cracks or failures in the floor surface will be noted for sub-surface soil sampling and analysis.

2. The floor surface adjacent to each cleaning station will be decontaminated by steam cleaning. A minimum of two (2) complete rinses will be performed during decontamination.

3. All wastewaters generated during the decontamination of the subject floor areas will be disposed of off-site.

4. To assess whether decontamination is complete, floor surfaces will be screened by a photoionization detector equipped with an 10.2 eV lamp. If PID screening indicates the presence of VOCs, a rinse sample will be taken and analyzed according to section 2.2. Decontamination will be repeated until all parameters meet subject closure performance guidelines.

5. If any failures or cracks in the concrete floor surface are detected, a soil sample will be taken at a location just beneath the floor surface. The material will be analyzed according to closure performance standards as detailed in Section 2.2.

6. Any impacted soils will be remediated by excavation and disposal off-site.

2.5 Dip Cleaner Tank Closure

Decontamination of the Actrel dip cleaner tanks will be performed by qualified Sulzer Metco employees or an outside contractor. Three dip tanks are located throughout the facility and are maintained by Safety-Kleen on a regular basis. At the time of facility closure, Sulzer Metco will be responsible for decommissioning all dip tanks. Personnel will be equipped with chemical resistant coveralls, head protection, gloves, boots and face respirators. The dip tanks

will be collected into a central washdown area designed to contain and drain liquids into a sealed containment sump and decontaminated as follows:

1. All solvent solutions will be removed and placed in suitable tanks and/or containers prior to off-site disposal by Safety-Kleen Corp.

2. All dip tanks will be decontaminated by steam cleaning. A minimum of two (2) complete tank rinses will be performed during decontamination. To assess whether decontamination is complete, confirmatory samples of the final rinse water will be collected and analyzed for volatile organic compounds. Decontamination will be repeated until all parameters meet the closure performance guidelines of Section 2.2.

3. All rinsewaters generated during the decontamination of the solvent dip tanks will be stored in acceptable containers until disposed of off-site.

4. Decontaminated dip tanks shall be re-used, disposed off-site, or sold as scrap, depending upon the condition.

5. After all process equipment has been removed, the floor area surrounding the dip tanks will be decontaminated by steam cleaning. A minimum of two (2) complete floor rinses will be performed during decontamination. Wash water will be collected and disposed of off-site. Confirmatory sampling and analyses for VOCs shall be conducted to assess whether decontamination is complete. Decontamination will be repeated until all parameters meet the closure performance guidelines of Section 2.2.

2.6 Spray Booth Closure (Booths 1-9)

Decontamination of each of the nine spray booths will be performed by qualified Sulzer Metco employees or an outside contractor. Personnel will be equipped with chemical resistant coveralls, head protection, gloves, boots and face respirators. The floor drain in each booth will be obstructed as to prevent liquid from discharging into the drainage structure during decontamination procedures. Each booth will be decontaminated identically as follows:

1. All waste spray material and wet collector sludge will be removed and placed in suitable containers prior to off-site disposal.

2. All spraying equipment and each wet scrubber will be decontaminated by cleaning with water and a mild detergent to remove any spray residues.

3. Following cleaning, equipment will be rinsed with water.

4. The floor areas of each spray booth shall be decontaminated by steam cleaning. A minimum of two complete floor rinses will be performed during contamination.

5. To assess the adequacy of decontamination, samples of the final wash water rinse will be analyzed for Aluminum, Copper, Iron, Tin, Tungsten, and Zinc. Decontamination will be repeated until all parameters meet the closure performance guidelines of Section 2.2.

6. The collection chambers for the HEPA baghouses for spray booths 1-3 will be manually emptied of collected particulates. All openings of each baghouse shall be secured as to prevent the escape of entrained contaminants during transportation to an alternate Sultzer Metco facility.

2.7 Paint Room Closure

Decontamination of the paint room will be performed by qualified Sulzer Metco employees or an outside contractor. Personnel will be equipped with chemical resistant coveralls, head protection, gloves, boots, and face respirators. The paint room will be decontaminated as follows:

1. All waste paints will be removed and placed in suitable containers prior to off-site disposal.

2. All painting equipment will be decontaminated by cleaning with water and a mild detergent to remove any paint residues.

3. Following cleaning, painting equipment will be rinsed with water.

4. To assess the adequacy of decontamination, samples of the final wash water rinse will be analyzed for volatile organic compounds (VOCs). Decontamination will be repeated until all parameters meet the closure performance guidelines of Section 2.2.

2.8 Thoriated Tungsten Area Closure

Sulzer Metco is not required to be licensed by the Nuclear Regulatory Commission and therefore is not required to submit a closure plan for approval by the Commission. The decommissioning plan for the radioactively contaminated equipment has been designed in accordance with 10 CFR 835.202. Decontamination of the thoriated tungsten machining area will be performed by a qualified outside contractor. Personnel will be equipped with chemical resistant coveralls, head protection, gloves, boots and respiratory protective devices. All machining and polishing/buffing equipment and the contaminated filter baghouse will be decontaminated as follows:

1. All thorium oxide residue will be swept up and placed in suitable containers labeled 'Caution - Radioactive Waste' according to regulatory guidelines, prior to off-site disposal.
2. All process equipment and ductwork will be flushed with a compressed air stream while baghouse is in operation.
3. The contaminated baghouse will be shut down and carefully emptied. All entrained material must be collected in suitable containers labeled 'Caution - Radioactive Waste' prior to off-site disposal.
4. All contaminated equipment will be carefully removed to a containment area as to provide collection of rinsewaters during decontamination.
5. The floor area around the subject equipment is to be steam cleaned and clean rinsed. Washwaters are to be collected and stored in suitable containers prior to off-site disposal.
6. Two lathes and two buffers will be washed down with a mild soap solution, steam cleaned, and clean rinsed.
7. All ductwork will be washed with a mild soap solution, followed by steam cleaning, and clean rinsing.
8. Filter material will be disposed of in accordance with applicable regulatory codes.
9. Baghouse will be decontaminated by steam cleaning and followed by a clean rinse.

10. Surface radiation levels will be recorded using a portable radiation monitor at five (5) locations on the subject equipment and five (5) locations throughout the facility, including the floor surface in the immediate area of the subject equipment. All radiation monitoring will be performed according to manufacturer guidelines. Decontamination will be repeated until all parameters meet the closure performance guidelines of Section 2.2.

2.9 Underground Sump Closure

All drainage structures within the building are routed through three in-line underground sumps located beneath the maintenance department floor. Due to the nature of these sumps and the fact that contaminants accumulate at the bottom, the closure of the sumps is addressed in this report. Closure of the sumps will be defined by removal of bottom sediments and underlying contaminated soils from all three sumps, followed by construction of solid, non-permeable bottoms on all three chambers.

An environmental investigation of two of the sumps was conducted by Arcadis Geraghty & Miller in February of 1998 and was summarized in an April 14, 1998 letter to Michael Lydon of Sulzer Metco (copy included as Appendix A). As indicated by the letter, the investigation included subsurface soil sampling around the perimeter of each of two sumps. Laboratory analysis indicated that volatile organic compounds were non-detect in all samples, and heavy metals were present in all samples at depths of up to 6 feet below the bottom of the sumps. An integrity test was performed on one sump, which was determined to be leaking at 0.32 gallons per hour, indicating failure of the containment integrity of the sump. Recommendations were made by Arcadis Geraghty & Miller to replace each sump and remediate the underlying soils. After additional investigation, a third sump was identified in line with the two sumps which were addressed in the Arcadis Geraghty & Miller letter.

Decontamination of the three underground sumps and facility discharge piping will be performed by a qualified outside contractor. At a minimum, personnel will be equipped with head protection, gloves, and boots. If the area of remediation meets the definition of a confined

space or the suspected contaminants will affect the breathing environment in the area, additional respiratory protection and/or monitoring may be required. Once the facility has ceased production activities and all discharges to the drainage system have ceased, the sump system shall be decontaminated as follows;

1. Sample liquids and bottom sediments for waste disposal characterization.
2. Pump out liquid contents of both sumps for off-site disposal.
3. Block off sewer access at the second (downstream) sump as to prevent rinsewaters from entering the sewer system.
4. Steam clean process discharge lines from floor drains in the spray booths.
5. Steam clean process discharge piping from chromic acid/copper dip slop sinks, including both neutralization tanks.
6. Unblock sewer connection, maintaining contaminated rinsewaters in the sump system.
7. Steam clean discharge piping from sewer manhole access in rear of facility to the sump system.
8. Pump out rinsewaters from sumps and dispose of off-site in accordance with applicable treatment/discharge regulations.
9. Excavate impacted soils immediately surrounding and beneath each sump as detailed in the Arcadis Geraghty & Miller report dated April 14, 1998. The third sump should be treated in the same manner as the sumps addressed by Arcadis Geraghty & Miller.
10. Perform endpoint sampling to confirm removal of contaminated soils.
11. Continue to excavate impacted soils as necessary to achieve endpoint samples meeting the closure performance standards of section 2.2.
12. Following compliance with the closure performance standard, backfill with clean soils and install a solid, non-permeable bottom structure as needed to prevent liquids from infiltrating to the soil below the containment structures.
13. Restore surface conditions to match surrounding area.

2.10 Hazardous Material Storage Areas Closure (Satellite Accumulation Areas)

At the Sulzer Metco facility, three areas are used for the storage of hazardous materials; two areas are designated as satellite waste accumulation areas and one storage room in the southwestern corner of the facility is used for the storage of hazardous materials. Decontamination of the three hazardous material storage areas will be performed by qualified Sulzer Metco employees or an outside contractor. Personnel will be equipped with chemical resistant coveralls, head protection, gloves, and boots. Each storage area will be decontaminated identically as follows:

1. Containment structures and floor surfaces underlying each storage area will be decontaminated by steam cleaning followed by two (2) clean rinses.
2. To assess the adequacy of decontamination, samples of the final wash water rinse will be analyzed for TCLP Toxicity metals and volatile organic compounds (VOCs). Decontamination will be repeated until all parameters meet the closure performance guidelines of Section 2.2.

3.0 FACILITY CLOSURE

This plan has been prepared with the understanding that Sulzer Metco intends to entirely vacate the Duffy avenue facility and move all process operations into an alternate facility. All equipment, considering it is in usable condition, will be transported to the new facility for future use. All components to be transported will be cleaned as dictated herein as to prevent contamination of the environment during transport operations.

3.1 Closure Schedule

Closure of the Duffy avenue facility is expected to require approximately two to three weeks, with confirmatory sample analysis requiring an additional four weeks. If the confirmatory

sampling results indicate that additional closure activities are required (i.e., additional decontamination, remediation, etc.), the closure schedule will be updated.

ARCADIS GERAGHTY&MILLER

ARCADIS Geraghty & Miller, In
88 Duryea Road
Melville
New York 11747
Tel 516 249-7600
Fax 516 249-7610

Michael S. Lydon
Sulzer Metco (US) Inc.
1101 Prospect Avenue
Westbury, New York 11590-0201

ENVIRONMENTAL

Subject:
Summary Report for the Drywell Remediation and Sumps Investigation at the 325 Duffy Avenue Facility, Hicksville, New York

14 April 1998

Contact:
Tom C. Eng

Extension:
(516) 391-5269

Dear Mr. Rudolf:

On February 4th and February 13th, 1998 Arcadis Geraghty and Miller conducted the drywell remediation and sumps investigation at the 325 Duffy Avenue Sulzer Metco Facility, located in Hicksville, New York. The drywell remediation and the first task of the sumps investigation (soil sampling) was performed on February 4th, 1998. The second task of the sumps investigation (integrity test on Sump S2) was performed on February 13th, 1998. This report summarizes the work performed, the results of the investigation, and the recommended remedial option.

Summary Of Work Performed

Drywell Remediation

The remaining debris containing metals impacted sediment was removed from the two outdoor catch basins located on the east wall of the facility. Following the removal of the debris, each catch basin interior was pressure washed. The removed debris and wash water was containerized in a fifty-five (55) gallon drum. The drum was sealed and placed in a designated indoor location for disposal by Sulzer Metco.

Sumps Investigation

The first task involved the advancement of borings to collect soil samples around the outside perimeter of each sump in the maintenance department. Three soil borings were advanced around the sump at the northern end of the maintenance department (designated as Sump S1) and three borings were advanced around the sump at the southern end of the maintenance department (designated as Sump S2). Soil samples were collected at two-foot intervals from each boring. The soil samples were screened for volatile organic compounds (VOCs) using a photoionization detector with the highest result from each boring sent to the laboratory for analysis by USEPA Method 8260. Soil samples were also collected for laboratory analysis of priority pollutant metals by United States Environmental Protection Agency

Our ref.:
G:\APROJECT\SULZMET\DUFFY\SUMREP2.DOC

(USEPA) Method 6010A. A total of 15 soil samples were collected for laboratory analysis.

For Sump S1, where the bottom was measured to be approximately 4 feet 8 inches from floor surface, soil samples for VOCs were collected from the 0-2 foot interval in all three borings for laboratory analysis based on the PID screening results. Soil samples for priority pollutant metals were collected from the 0-2 foot and 4-6 foot intervals for laboratory analysis.

For Sump S2, where the bottom was measured to be approximately 2 feet 2 inches from floor surface, soil samples for VOCs and priority pollutant metals were collected from 2-4 foot interval.

The integrity of Sump S2 was determined by performing a constant head test. All four influent and effluent lines were plugged and tested to ensure that the lines were properly sealed to prevent leakage. Two constant head tests were performed at different water levels. The first test was performed with the water level held constant at one inch below the bottom of a steel collar and the second test was performed with the water level held constant at several inches above the collar. During both tests, the initial water level was marked and the addition of make up water required to maintain the constant level was measured (in gallons) and recorded. Each of the two tests were planned to be performed for a two hour period, however due to the high leakage rates and excessive water additions, the tests were shortened.

Results of Investigation Work

The results of the investigative work performed at each sump are provided below.

The analytical results of the samples collected for VOCs indicates non-detectable concentrations were reported for all samples. The analytical results of the samples collected for priority pollutant metals indicates that metals (antimony, beryllium, chromium, copper, lead, mercury, nickel, selenium and zinc) were detected around the outside perimeter of each sump. The sampling results were compared to the New York State Recommended Soil Cleanup Objectives and the United States Geological Survey (USGS) Site Background data for Eastern US. Tables 1 and 2 summarizes the metals analytical results for each sump. Bold numbers in the tables represent a concentration exceeding either of these standards. The laboratory data is provided in Appendix A.

The results of the integrity tests performed on Sump S2 indicated that the sump is leaking. A leakage rate of 0.32 gallons per minute (gpm) was measured when the test was performed with the initial water level set below the bottom of the collar. A

leakage rate of 3.43 gpm was measured when the test was performed when the initial water level was set above the collar. Table 3 summarizes the results of the tests performed.

Remedial Recommendation

Arcadis Geraghty and Miller has developed the following the remedial recommendation for your consideration:

1) Remove and Replace Existing Sumps S1 and S2

The removal and replacement of existing Sumps S1 and S2 would eliminate the current leakage concerns. The replacement sumps can be constructed of pre-cast concrete structures with coated (e.g. epoxy) or lined (e.g. plastic) interior surfaces to minimize leakage. The collar connection to the sump would be sealed (water-tight gaskets) to minimize leakage. The metals impacted soils (exceeding standards) immediately surrounding the sumps would be excavated and end point samples will be collected to ensure proper removal. Our budgetary estimate (labor and materials) for saw cutting the concrete floor, removing the existing sumps, excavating the soils, endpoint sampling, installation of the replacement sumps, clean backfill, concrete replacement, and soil disposal (based on a 5 cubic yard estimate) is $15,000.

If you have any questions, please call Tom Eng at (516) 391-5285.

Sincerely,

ARCADIS Geraghty & Miller, Inc.

Tom C. Eng, CIH
Principal Engineer

Thomas Lobasso
Vice President

Copies:

Table 1: Summary of Metals Results for Maintenance Room Sump S1, Sulzer Metco, Duffy Avenue, Hicksville, New York.

Analytical Parameters	New York State Recommended Soil Cleanup Objectives[1] (mg/kg)	USGS Site Background for Eastern U.S. Estimated Arithmetic Mean (mg/kg)	Depth to Bottom = 4' - 8" Sample ID: Sample Interval*:	S1B1P 0-2' (mg/kg)	S1B2P 0-2' (mg/kg)	S1B3P 0-2' (mg/kg)	S1B1P 4-6' (mg/kg)	S1B2P 4-6' (mg/kg)	S1B3P 4-6' (mg/kg)
Priority Pollutant Metals									
Antimony	SB	0.76		**13.4**	**13.1**	**13**	**12.5**	**12.4**	**12.8**
Arsenic	7.5	7.4		2.2	2.2	2.2	2.1	2.1	2.1
Beryllium	0.16	0.85		**1.1**	**1.1**	**1.1**	**1**	**1**	**1.1**
Cadmium	10	--		1.6	1.1	1.1	1	1	1.1
Chromium	50	52		31.9	10.2	11.6	3.7	4	4.4
Copper	25	22		**403**	**31.1**	**75.7**	21.4	**22.8**	**29.4**
Lead	--	17		**36.2**	9.5	10.4	5.1	5.8	3.1
Mercury	SB	0.12		**0.56**	**0.15**	0.1	0.094	0.098	0.11
Nickel	13	18		**59.9**	**21.5**	**38.2**	8.3	**16.4**	9.2
Selenium	2	0.45		**1.1**	**1.1**	**1.1**	**1**	**1**	**1.1**
Silver	SB	--		2.2	2.2	2.2	2.1	2.1	2.1
Thallium	SB	--		2.2	2.2	2.2	2.1	2.1	2.1
Zinc	20	52		**159**	19	**36.5**	14.4	11.5	**20.6**

NOTES:
* Sampling Intervals represent the depth below the top of concrete slab.
Analysis Performed by: American Environmental Network, Monroe, CT
Bold entries represent concentrations above either standard.

mg/kg	Milligrams per kilogram.
'	Feet
"	Inches
NYSDEC	New York State Department of Environmental Conservation.
USGS	United States Geological Survey
SB	Site Background
--	Criteria not available.
1	NYSDEC's Technical and Administrative Guidance Memorandum #4046

Table 2: Summary of Metals Results for Maintenance Room Sump S2, Sulzer Metco, Duffy Avenue, Hicksville, New York.

Analytical Parameters	New York State Recommended Soil Cleanup Objectives[1] (mg/kg)	USGS Site Background for Eastern U.S. Estimated Arithmetic Mean (mg/kg)	Depth to Bottom = 2' - 2" Sample ID: Sample Interval*:	S2B1P 2-4' (mg/kg)	S2B2P 2-4' (mg/kg)	S2B3P 2-4' (mg/kg)
Priority Pollutant Metals						
Antimony	SB	0.76		**13**	**13.2**	**13**
Arsenic	7.5	7.4		2.2	2.2	2.2
Beryllium	0.16	0.85		**1.1**	**1.1**	**1.1**
Cadmium	10	--		1.1	1.1	1.1
Chromium	50	52		**194**	**122**	**223**
Copper	25	22		**606**	**584**	**242**
Lead	--	17		**58.7**	**81.2**	**53.5**
Mercury	SB	0.12		0.094	0.096	0.094
Nickel	13	18		**202**	**232**	**294**
Selenium	2	0.45		**1.1**	**1.1**	**1.1**
Silver	SB	--		2.2	2.2	2.2
Thallium	SB	--		2.2	2.2	2.2
Zinc	20	52		**27.5**	**58.2**	**25.6**

NOTES:
* Sampling Intervals represent the depth below the top of concrete slab.
Analysis Performed by: American Environmental Network, Monroe, CT
Bold entries represent concentrations above either standard.

mg/kg	Milligrams per kilogram.
'	Feet
"	Inches
NYSDEC	New York State Department of Environmental Conservation.
USGS	United States Geological Survey
SB	Site Background
--	Criteria not available.
1	NYSDEC's Technical and Administrative Guidance Memorandum #4046

Table 3: Summary of Maintenance Room Sump S2 Integrity Test, Sulzer Metco Duffy Avenue, Hicksville, New York.

Invert of Sump 2 = 2 ft. 2 in.

TEST 1: Water Level Set 1 Inch Below Bottom of Collar

Reading Number	Time	Water Level (from bottom of sump)	Amount of Water Added (gallons)
0	0	8 in.	--
1	5 min.	8 in.	1.5
2	7 min.	8 in.	1
3	11 min.	8 in.	1
Total Time of Test	11 min.	Total Leakage:	3.5

LEAKAGE RATE = 0.32 GAL/MIN

TEST 2: Water Level Set Above the Collar

Reading Number	Time	Water Level (from bottom of sump)	Amount of Water Added (gallons)
0	0	1 ft. 3 in.	--
1	1 min. - 40 sec.	1 ft. 3 in.	4
2	3 min. - 15 sec.	1 ft. 3 in.	4
3	4 min. - 40 sec.	1 ft. 3 in.	4
Total Time of Test	4 min. - 40 sec.	Total Leakage:	16

LEAKAGE RATE = 3.43 GAL/MIN

APPENDIX A

LABORATORY DATA

American Environmental Network
200 Monroe Turnpike • Monroe, CT 06468 • (203) 261-4458 • Fax (203) 268-5346

February 20, 1998

Mr. Mark Soliman
GERAGHTY & MILLER
88 Duryea Road
Melville, NY 11747

Dear Mr. Soliman :

Please find enclosed the analytical results of 15 sample(s) received at our laboratory on February 5, 1998. This report contains sections addressing the following information at a minimum:

- sample summary
- analytical methodology
- state certifications
- definition of data qualifiers and terminology
- analytical results
- chain-of-custody

IEA Report #7098-0268A	Purchase Order #NY001110.0004
Project ID: SULZER-METCO	

Copies of this analytical report and supporting data are maintained in our files for a minimum of five years unless special arrangements have been made. Unless specifically indicated, all analytical testing was performed at this laboratory location and no portion of the testing was subcontracted.

We appreciate your selection of our services and welcome any questions or suggestions you may have relative to this report. Please contact your customer service representative at (203) 261-4458 for any additional information. Thank you for utilizing our services; we hope you will consider us for your future analytical needs.

I have reviewed and approved the enclosed data for final release.

Very truly yours,

Cheryl A. Cascella for
Jeffrey C. Curran
Laboratory Manager

JCC

7098-0268A
GERAGHTY & MILLER

Case Narrative

Metals - ICAP metals were determined using a JA61E trace ICAP; mercury was determined by the cold vapor technique utilizing the Thermo Jarrell Ash Model QS-1 E mercury analyzer using guidance provided in SW846 according to the following Methods: ICAP-3050/6010; mercury-7471.

No problems occurred during analysis. All appropriate protocols were employed. All data appears to be consistent.

IEC's are electronically employed by the JA61E trace ICAP. However, the ICSA is utilized as a monitoring device to detect any additional adjustments that may be required. These modifications are calculated and applied manually. They are so noted in the raw data.

Volatile Organics - Volatile organics were determined by purge and trap GC/MS using guidance provided in Method 8260A. The instrumentation used was a Tekmar Dynamic Headspace Concentrator interfaced with a Hewlett-Packard Model 5995 GC/MS/DS.

The "L" flag on the form 6A's designate that linear regression was used for quantitation for that compound, due to the %RSD being 15% or greater. The form 1A's reflect the true concentration calculated with linear regression. The quant reports may not agree with form 1A's, due to software limitations. All results for compounds with "L" flags should be taken from either tabulated results or form 1A's.

No problems were encountered.

TABLE VO-1.0
7098-0268A
GERAGHTY & MILLER
TCL VOLATILE ORGANICS

So

All values are ug/Kg dry weight basis.

Client Sample I.D.	Method Blank	S1B1V0-2'	S1B2V0-2'	Quant. Limits with no Dilutic
Lab Sample I.D.	VBLKBJ	980268A-01	980268A-04	
Method Blank I.D.	VBLKBJ	VBLKBJ	VBLKBJ	
Quant. Factor	1.00	1.08	1.08	
Chloromethane	U	U	U	10
Bromomethane	U	U	U	10
Vinyl Chloride	U	U	U	10
Chloroethane	U	U	U	10
Methylene Chloride	U	U	U	5.0
Acetone	U	U	U	10
Carbon Disulfide	U	U	U	5.0
Vinyl Acetate	U	U	U	10
1,1-Dichloroethene	U	U	U	5.0
1,1-Dichloroethane	U	U	U	5.0
1,2-Dichloroethene (total)	U	U	U	5.0
Chloroform	U	U	U	5.0
1,2-Dichloroethane	U	U	U	5.0
2-Butanone	U	U	U	10
1,1,1-Trichloroethane	U	U	U	5.0
Carbon Tetrachloride	U	U	U	5.0
Bromodichloromethane	U	U	U	5.0
1,2-Dichloropropane	U	U	U	5.0
cis-1,3-Dichloropropene	U	U	U	5.0
Trichloroethene	U	U	U	5.0
Dibromochloromethane	U	U	U	5.0
1,1,2-Trichloroethane	U	U	U	5.0
Benzene	U	U	U	5.0
trans-1,3-Dichloropropene	U	U	U	5.0
Bromoform	U	U	U	5.0
4-Methyl-2-Pentanone	U	U	U	10
2-Hexanone	U	U	U	10
Tetrachloroethene	U	2J	4J	5.0
Toluene	U	U	U	5.0
1,1,2,2-Tetrachloroethane	U	U	U	5.0
Chlorobenzene	U	U	U	5.0
Ethylbenzene	U	U	U	5.0
Styrene	U	U	U	5.0
Xylene (total)	U	U	U	5.0
Date Received		02/05/98	02/05/98	
Date Extracted	N/A	N/A	N/A	
Date Analyzed	02/05/98	02/05/98	02/05/98	

See Appendix for qualifier definitions
Note: Compound detection limit = quantitation limit x quantitation factor
Quant. Factor = a numerical value which takes into account any variation in sample weight/volume, % moisture and sample dilution.

TABLE VO-1.1
7098-0268A
GERAGHTY & MILLER
TCL VOLATILE ORGANICS

All values are ug/Kg dry weight basis.

Client Sample I.D.	S1B3V0-2'	S2B1V2-4'	S2B2V2-4'	Quant. Limits with no Dilution
Lab Sample I.D.	980268A-07	980268A-10	980268A-12	
Method Blank I.D.	VBLKBJ	VBLKBJ	VBLKBJ	
Quant. Factor	1.09	1.05	1.10	
Chloromethane	U	U	U	10
Bromomethane	U	U	U	10
Vinyl Chloride	U	U	U	10
Chloroethane	U	U	U	10
Methylene Chloride	U	U	U	5.0
Acetone	U	U	U	10
Carbon Disulfide	U	U	U	5.0
Vinyl Acetate	U	U	U	10
1,1-Dichloroethene	U	U	U	5.0
1,1-Dichloroethane	U	U	U	5.0
1,2-Dichloroethene (total)	U	U	U	5.0
Chloroform	U	U	U	5.0
1,2-Dichloroethane	U	U	U	5.0
2-Butanone	U	U	U	10
1,1,1-Trichloroethane	U	U	U	5.0
Carbon Tetrachloride	U	U	U	5.0
Bromodichloromethane	U	U	U	5.0
1,2-Dichloropropane	U	U	U	5.0
cis-1,3-Dichloropropene	U	U	U	5.0
Trichloroethene	U	U	U	5.0
Dibromochloromethane	U	U	U	5.0
1,1,2-Trichloroethane	U	U	U	5.0
Benzene	U	U	U	5.0
trans-1,3-Dichloropropene	U	U	U	5.0
Bromoform	U	U	U	5.0
4-Methyl-2-Pentanone	U	U	U	10
2-Hexanone	U	U	U	10
Tetrachloroethene	U	U	U	5.0
Toluene	U	U	U	5.0
1,1,2,2-Tetrachloroethane	U	U	U	5.0
Chlorobenzene	U	U	U	5.0
Ethylbenzene	U	U	U	5.0
Styrene	U	U	U	5.0
Xylene (total)	U	U	U	5.0
Date Received	02/05/98	02/05/98	02/05/98	
Date Extracted	N/A	N/A	N/A	
Date Analyzed	02/05/98	02/05/98	02/05/98	

See Appendix for qualifier definitions
Note: Compound detection limit = quantitation limit x quantitation factor
Quant. Factor = a numerical value which takes into account any variation in sample weight/volume, % moisture and sample dilution.

TABLE VO-1.2
7098-0268A
GERAGHTY & MILLER
TCL VOLATILE ORGANICS

All values are ug/Kg dry weight basis.

Client Sample I.D. Lab Sample I.D. Method Blank I.D. Quant. Factor	S2B3V2-4' 980268A-14 VBLKBJ 1.06			Quant. Limits with no Dilution
Chloromethane	U			10
Bromomethane	U			10
Vinyl Chloride	U			10
Chloroethane	U			10
Methylene Chloride	U			5.0
Acetone	U			10
Carbon Disulfide	U			5.0
Vinyl Acetate	U			10
1,1-Dichloroethene	U			5.0
1,1-Dichloroethane	U			5.0
1,2-Dichloroethene (total)	U			5.0
Chloroform	U			5.0
1,2-Dichloroethane	U			5.0
2-Butanone	U			10
1,1,1-Trichloroethane	U			5.0
Carbon Tetrachloride	U			5.0
Bromodichloromethane	U			5.0
1,2-Dichloropropane	U			5.0
cis-1,3-Dichloropropene	U			5.0
Trichloroethene	U			5.0
Dibromochloromethane	U			5.0
1,1,2-Trichloroethane	U			5.0
Benzene	U			5.0
trans-1,3-Dichloropropene	U			5.0
Bromoform	U			5.0
4-Methyl-2-Pentanone	U			10
2-Hexanone	U			10
Tetrachloroethene	U			5.0
Toluene	U			5.0
1,1,2,2-Tetrachloroethane	U			5.0
Chlorobenzene	U			5.0
Ethylbenzene	U			5.0
Styrene	U			5.0
Xylene (total)	U			5.0
Date Received Date Extracted Date Analyzed	02/05/98 N/A 02/05/98			

See Appendix for qualifier definitions
Note: Compound detection limit = quantitation limit x quantitation factor
Quant. Factor = a numerical value which takes into account any variation in sample weight/volume, % moisture and sample dilution.

7098-0268A
GERAGHTY & MILLER
SAMPLE SUMMARY

IENT ID	LAB ID	MATRIX	DATE COLLECTED	DATE RECEIVED
S1B1V0-2'	980268A-01	SOIL	02/04/98	02/05/98
S 31P0-2'	980268A-02	SOIL	02/04/98	02/05/98
S1B1P4-6'	980268A-03	SOIL	02/04/98	02/05/98
S 32V0-2'	980268A-04	SOIL	02/04/98	02/05/98
S1B2P0-2'	980268A-05	SOIL	02/04/98	02/05/98
S 32P4-6'	980268A-06	SOIL	02/04/98	02/05/98
S1B3V0-2'	980268A-07	SOIL	02/04/98	02/05/98
S 33P0-2'	980268A-08	SOIL	02/04/98	02/05/98
S1B3P4-6'	980268A-09	SOIL	02/04/98	02/05/98
S 31V2-4'	980268A-10	SOIL	02/04/98	02/05/98
S 31P2-4'	980268A-11	SOIL	02/04/98	02/05/98
S2B2V2-4'	980268A-12	SOIL	02/04/98	02/05/98
S 32P2-4'	980268A-13	SOIL	02/04/98	02/05/98
S2B3V2-4'	980268A-14	SOIL	02/04/98	02/05/98
S 33P2-4'	980268A-15	SOIL	02/04/98	02/05/98

IEA-CT ANALYTICAL SUMMARY

Client ID: S1B1P0-2', S1B1P4-6', S1B1V0-2', S1B2P0-2', S1B2P4-6', S1B2V0-2', S1B3P0-2', S1B3P4-6', S1B3V0-2', S2B1P2-4', S2B1V2-4', S2B2P2-4', S2B2V2-4', S2B3P2-4', S2B3V2-4'

Job Number: 7098-0268A

Date: 2/20/98

Qty	Matrix	Analysis	Description
1	None	DISK	Diskette Prep.
9	SOIL	MET-SW846-PP	Pri Pol Metals
6	SOIL	VOA-8260A-TCL	TCL Volatile Organic

a halliburton company

Project Number NY001110.0004

Project Location SULZER METCO HICKSVILLE-DUFFY AVE.

Laboratory A.E.N. MARBLE, CT

Sampler(s)/Affiliation ANDREW GILMORE, MARK SOLIMAN

SAMPLE IDENTITY	Code	Date/Time Sampled	Lab ID	2 oz. glass (UNP) VOC 8260	8 oz. glass (UNP) R.P. METALS 6010A								TOTAL
S1B1V0-2'	S	2/4/98		1	—							01	1
S1B1P0-2'	S	2/4/98		—	1							02	1
S1B1P4-6'	S	2/4/98		—	1							03	1
S1B2V0-2'	↓	↓		1	—							04	1
S1B2P0-2'				—	1							05	1
S1B2P4-6'				—	1							06	1
S1B3V0-2'				1	—							07	1
S1B3P0-2'				—	1							08	1
S1B3P4-6'				—	1							09	1
S2B1V2-4'				1	—							10	1
S2B1P2-4'				—	1							11	1
S2B2V2-4				1	—							12	1
S2B2P2-4'				—	1							13	1
S2B3V2-4'				1	—							14	1
S2B3P2-4				—	1							15	1

Passed Rad Screen SINP 2/5/98 5°C

Sample Code: L = Liquid; S = Solid; A = Air

Total No. of Bottles/Containers: 15

Relinquished by: [signature]	Organization: ARCADIS G&M	Date 2/4/98	Time 6:20	Seal Intact? Yes No N/A
Received by: Stephanie Plumbtree	Organization: AEN	Date 2/5/98	Time 10:35	
Relinquished by:	Organization:	Date / /	Time	Seal Intact? Yes No N/A
Received by:	Organization:	Date / /	Time	

Special Instructions/Remarks:

ANY QUESTIONS PLEASE CALL MARK P. SOLIMAN @ (516) 391-5269

Delivery Method: ☐ In Person ☒ Common Carrier FED EX ☐ Lab Courier ☐ Other

FedEx. *USA Airbill* FedEx Tracking Number 803107093841

Form I.D. No. 0200 SNA11 **Recipient's Copy**

1 From

Date 2.4.98

Sender's Name A. Gilmore Phone (516 249-7600

Company ARCADIS GERAGHTY AND MILLER

Address 88 DURYEA RD 1ST FLR Dept./Floor/Suite/Room

City MELVILLE State NY ZIP 11747

2 Your Internal Billing Reference Information NY00111000004

3 To

Recipient's Name Ian Cunningham Phone (203) 261-4950

Company AEN

Address 200 Monroe Tpk (To "HOLD" at FedEx location, print FedEx address here) Dept./Floor/Suite/Room

☐ Check here if residence (Extra charge applies for FedEx Express Saver)

City Monroe State CT ZIP 06468

For HOLD at FedEx Location check here
☐ Hold Weekday (Not available with FedEx First Overnight)
☐ Hold Saturday (Not available at all locations) (Available for FedEx Priority Overnight and FedEx 2Day only)

For Saturday Delivery check here
☐ (Extra Charge. Not available to all locations) (Available for FedEx Priority Overnight and FedEx 2Day only)

8 0 3 1 0 7 0 9 3 8 4 1

4a Express Package Service *Packages under 150 lbs.* Delivery commitment may be later in some areas.
☒ FedEx Priority Overnight (Next business morning)
☐ FedEx Standard Overnight (Next business afternoon)
☐ FedEx First Overnight (Earliest next business morning delivery to select locations) [illegible]
☐ FedEx 2Day (Second business day)
☐ FedEx Express Saver (Third business day)
FedEx Letter Rate not available. Minimum charge: One pound rate.

4b Express Freight Service *Packages over 150 lbs.* Delivery commitment may be later in some areas
☐ FedEx Overnight Freight (Next business day)
☐ FedEx 2Day Freight (Second business day)
☐ FedEx Express Saver Freight (Up to 3 business days)
(Call for delivery schedule. See back for detailed descriptions of freight services.)

5 Packaging
☐ FedEx Letter ☐ FedEx Pak (Declared value limit $500) ☐ FedEx Box ☐ FedEx Tube ☒ Other Pkg.

6 Special Handling (One box must be checked)
Does this shipment contain dangerous goods?* ☐ No ☐ Yes (As per attached Shipper's Declaration) ☐ Yes (Shipper's Declaration not required)
☐ Dry Ice Dry Ice, 9, UN 1845 ____ x ____ kg
CA ☐ Cargo Aircraft Only
*Dangerous Goods cannot be shipped in FedEx packaging.

7 Payment
Bill to: ☒ Sender (Account no. in section 1 will be billed) ☐ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check
(Enter FedEx account no. or Credit Card no. below) ☐ Obtain Recipient FedEx Account No.

Total Packages 1 Total Weight 40 Total Declared Value* $ 10,000 .00 Total Charges $

* When declaring a value higher than $100 per shipment, you pay an additional charge. See SERVICE CONDITIONS, DECLARED VALUE, AND LIMIT OF LIABILITY section for further information.

Credit Card Auth.

8 Release Signature

Your signature authorizes Federal Express to deliver this shipment without obtaining a signature and agrees to indemnify and hold harmless Federal Express from any resulting claims.

288

Questions?
Call 1·800·Go·FedEx (800)463-3339

WCSL 1197
Rev. Date 8/97
Part#151567
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004046935 9

INORGANICS APPENDIX

C - Concentration qualifiers

U - Indicates analyte was not detected at method reporting limit.

B - Indicates analyte result between IDL and contract required detection limit (CRDL)

Q - QC qualifiers

E - Reported value is estimated because of the presence of interference

M - Duplicate injection precision not met

N - Spiked sample recovery not within control limits

S - The reported value was determined by the method of standard additions (MSA)

W - Post-digest spike recovery furnace analysis was out of 85-115 percent control limit, while sample absorbance was less than 50 percent of spike absorbance

* - Duplicate analysis not within control limit

+ - Correlation coefficient for MSA is less than 0.995

M - Method codes

P - ICP

A - Flame AA

F - Furnace AA

CV - Cold vapor AA (manual)

C - Cyanide

NR - Not Required

NC - Not Calculated as per protocols

STATE CERTIFICATIONS

In some instances it may be necessary for environmental data to be reported to a regulatory authority with reference to a certified laboratory. For your convenience, the laboratory identification numbers for the AEN-Connecticut laboratory are provided in the following table. Many states certify laboratories for specific parameters or tests within a category (i.e. method 325.2 for wastewater). The information in the following table indicates the lab is certified in a general category of testing such as drinking water or wastewater analysis. The laboratory should be contacted directly if parameter-specific certification information is required.

AEN-Connecticut
Certification Summary (as of September 1997)

State	Responsible Agency	Certification	Lab Number
Connecticut	Department of Health Services	Drinking Water, Wastewater	PH-0497
Maine	Department of Human Services	Wastewater	CT023
Massachusetts	Department of Environmental Protection	Potable/Non-Potable Water	CT023
New Hampshire	Department of Environmental Services	Drinking Water, Wastewater	2528
New Jersey	Department of Environmental Protection	Drinking Water, Wastewater	46410
New York	Department of Health	CLP, Drinking Water, Wastewater, Solid/ Hazardous Waste	10602
North Carolina	Division of Environmental Management	Wastewater Hazardous Waste	388
North Dakota	Department of Health and Consolidated Laboratories	Non-Potable/Potable Hazardous Waste	R-138
Oklahoma	Department of Environmental Quality	General Water Quality/ Sludge Testing	9614
Rhode Island	Department of Health	Chemistry...Non-Potable Water and Wastewater	A43
Washington	Department of Ecology	Wastewater/ Hazardous Waste	C231
West Virginia	Division of Environmental Protection	Wastewater/ Hazardous Waste	263
Wisconsin	Department of Natural Resources	Wastewater/ Hazarous Waste	998355710

U.S. EPA - CLP

6
DUPLICATES

EPA SAMPLE NO.

SBA-PER-32-3D

ab Name: IEA Contract: _____

Lab Code: IEA Case No.: 0268 SAS No.: _____ SDG No.: A0268

atrix: SOIL Level (low/med): LOW

% Solids for Sample: 81.38 % Solids for Duplicate: 81.38

Concentration Units (ug/L or mg/kg dry weight): MG/KG

Analyte	Control Limit	Sample (S)	C	Duplicate (D)	C	RPD	Q	M
Aluminum								NR
Antimony		1.4690	B	1.5359	B	4.4		P
Arsenic		47.0789		50.1474		6.3		P
Barium								NR
Beryllium		0.6565	B	0.6828	B	3.9		P
Cadmium		0.2458	U	0.2458	U			P
Calcium								NR
Chromium		25.3559		27.0471		6.4		P
Cobalt								NR
Copper		1142.2458		1204.0052		5.3		P
Iron								NR
Lead		179.3532		188.0614		4.7		P
Magnesium								NR
Manganese								NR
Mercury		0.1229	U	0.1117	U			CV
Nickel		3797.9332		4009.5404		5.4		P
Potassium								NR
Selenium	1.2	1.7242		1.8323		6.1		P
Silver		0.5307	B	0.5691	B	7.0		P
Sodium								NR
Thallium		0.4915	U	0.4915	U			P
Vanadium								NR
Zinc		404.5109		423.1688		4.5		P
Cyanide								NR

U.S. EPA - CLP

7

LABORATORY CONTROL SAMPLE

Lab Name: IEA Contract: _____

Lab Code: IEA Case No.: _____ SAS No.: _____ SDG No.: A0268

Solid LCS Source: INORG. VENT.

Aqueous LCS Source: _____

Analyte	Aqueous (ug/L) True	Found	%R	Solid (mg/kg) True	Found	C	Limits		%R
Antimony				93.1	151.4		9.5	177.0	162.6
Arsenic				60.6	60.9		43.0	78.2	100.6
Beryllium				157.0	159.4		107.0	207.0	101.5
Cadmium				78.0	77.7		55.7	100.0	99.6
Chromium				183.0	169.7		134.0	232.0	92.8
Copper				110.0	112.7		85.4	135.0	102.5
Lead				85.9	83.8		64.1	108.0	97.6
Mercury				1.3	1.3		.9	1.8	99.4
Nickel				108.0	108.3		84.9	132.0	100.3
Selenium				75.4	76.4		49.8	101.0	101.4
Silver				152.0	157.7		113.0	191.0	103.8
Thallium				160.0	166.2		91.4	228.0	103.9
Zinc				721.0	667.9		507.0	936.0	92.6

2B
SOIL VOLATILE SYSTEM MONITORING COMPOUND RECOVERY

Lab Name: IEA/CT Contract: _____

Lab Code: IEACT Case No.: 0268A SAS No.: _____ SDG No.: A0268

Level: (low/med) LOW

	EPA SAMPLE NO.	SMC1 (TOL) #	SMC2 (BFB) #	SMC3 (DCE) #	OTHER	TOT OUT
01	VBLKBJ	107	105	86		0
02	S1B1V0-2'	108	108	91		0
03	S1B2V0-2'	99	106	86		0
04	S1B3V0-2'	98	102	84		0
05	S2B1V2-4'	95	95	83		0
06	S2B2V2-4'	99	93	86		0
07	S2B3V2-4'	99	96	85		0
08						
09						
10						
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30						

QC LIMITS

SMC1 (TOL) = Toluene-d8 (81-117)
SMC2 (BFB) = Bromofluorobenzene (74-121)
SMC3 (DCE) = 1,2-Dichloroethane-d4 (70-121)

Column to be used to flag recovery values

* Values outside of contract required QC limits

3B

SOIL VOLATILE MATRIX SPIKE/MATRIX SPIKE DUPLICATE RECOVERY

Lab Name: IEA/CT Contract: _____

Lab Code: IEACT Case No.: ~~0167B~~ 02688A SAS No.: _____ SDG No.: ~~B0167~~ A0268

Matrix Spike - NYSDEC Sample No.: B/MW-6A(6-8) Level: (low/med) LOW

02/20/98

COMPOUND	SPIKE ADDED (ug/Kg)	SAMPLE CONCENTRATION (ug/Kg)	MS CONCENTRATION (ug/Kg)	MS % REC #	QC. LIMITS REC.
1,1-Dichloroethene	63	0	47	75	59-172
Trichloroethene	63	0	48	76	62-137
Benzene	63	0	57	90	66-142
Toluene	63	0	50	79	59-139
Chlorobenzene	63	0	54	86	60-133

COMPOUND	SPIKE ADDED (ug/Kg)	MSD CONCENTRATION (ug/Kg)	MSD % REC #	% RPD #	QC LIMITS RPD	QC LIMITS REC.
1,1-Dichloroethene	63	56	89	17	22	59-172
Trichloroethene	63	50	79	4	24	62-137
Benzene	63	59	94	4	21	66-142
Toluene	63	54	86	8	21	59-139
Chlorobenzene	63	58	92	7	21	60-133

Column to be used to flag recovery and RPD values with an asterisk

* Values outside of QC limits.

RPD: 0 out of 5 outside limits
Spike Recovery: 0 out of 10 outside limits

COMMENTS: _____

IEA / CT
LABORATORY CHRONICLE

SAMPLE PREPARATION AND ANALYSIS SUMMARY
INORGANIC ANALYSIS

ICAP

JOB #: 7098-0268A

SAMPLE ID	MATRIX	LIST REQUESTED	DATE RECEIVED	DATE DIGESTED	DATE ANALYZED
S1B1P0-2'	SOIL	MET-SW846-PP	02/05/98	2/13/98	2/18/98
S1B1P4-6'	SOIL	MET-SW846-PP	02/05/98		
S1B2P0-2'	SOIL	MET-SW846-PP	02/05/98		
S1B2P4-6'	SOIL	MET-SW846-PP	02/05/98		
S1B3P0-2'	SOIL	MET-SW846-PP	02/05/98		
S1B3P4-6'	SOIL	MET-SW846-PP	02/05/98		
S2B1P2-4'	SOIL	MET-SW846-PP	02/05/98		
S2B2P2-4'	SOIL	MET-SW846-PP	02/05/98		
S2B3P2-4'	SOIL	MET-SW846-PP	02/05/98		

ction Supervisor (signature) Diane Furro

Review & Approval (printed name) Diane Furro

(Date) 2/19/98

QC Supervisor (signature) _____

Review & Approval (printed name) _____

(Date) __/__/__

IEA / CT
LABORATORY CHRONICLE

SAMPLE PREPARATION AND ANALYSIS SUMMARY
INORGANIC ANALYSIS

merc

JOB #: 7098-0268A

SAMPLE ID	MATRIX	LIST REQUESTED	DATE RECEIVED	DATE DIGESTED	DATE ANALYZED
S1B1P0-2'	SOIL	MET-SW846-PP	02/05/98	2/12/98	2/13/98
S1B1P4-6'	SOIL	MET-SW846-PP	02/05/98		
S1B2P0-2'	SOIL	MET-SW846-PP	02/05/98		
S1B2P4-6'	SOIL	MET-SW846-PP	02/05/98		
S1B3P0-2'	SOIL	MET-SW846-PP	02/05/98		
S1B3P4-6'	SOIL	MET-SW846-PP	02/05/98		
S2B1P2-4'	SOIL	MET-SW846-PP	02/05/98		
S2B2P2-4'	SOIL	MET-SW846-PP	02/05/98		
S2B3P2-4'	SOIL	MET-SW846-PP	02/05/98		

ction Supervisor (signature) Diane Turro

Review & Approval (printed name) Diane Turro

(Date) 2/19/98

QC Supervisor (signature) _____

Review & Approval (printed name) _____

(Date) __/__/__

TABLE AS-1.0
7098-0268A
GERAGHTY & MILLER
PRIORITY POLLUTANT METALS

All values are mg/Kg dry weight basis.

Client Sample I.D.	S1B1P0-2'	S1B1P4-6'	S1B2P0-2'	S1B2P4-6'
Lab Sample I.D.	980268A-02	980268A-03	980268A-05	980268A-06
Antimony	13.4U	12.5U	13.1U	12.4U
Arsenic	2.2U	2.1U	2.2U	2.1U
Beryllium	1.1U	1.0U	1.1U	1.0U
Cadmium	1.6	1.0U	1.1U	1.0U
Chromium	31.9	3.7	10.2	4.0
Copper	403.	21.4	31.1	22.8
Lead	36.2	5.1	9.5	5.8
Mercury	0.56	0.094U	0.15	0.098U
Nickel	59.9	8.3U	21.5	16.4
Selenium	1.1U	1.0U	1.1U	1.0U
Silver	2.2U	2.1U	2.2U	2.1U
Thallium	2.2U	2.1U	2.2U	2.1U
Zinc	159.	14.4	19.0	11.5

See Appendix for qualifier definitions

TABLE AS-1.1
7098-0268A
GERAGHTY & MILLER
PRIORITY POLLUTANT METALS

All values are mg/Kg dry weight basis.

Client Sample I.D.	S1B3P0-2'	S1B3P4-6'	S2B1P2-4'	S2B2P2-4'
Lab Sample I.D.	980268A-08	980268A-09	980268A-11	980268A-13
Antimony	13.0U	12.8U	13.0U	13.2U
Arsenic	2.2U	2.1U	2.2U	2.2U
Beryllium	1.1U	1.1U	1.1U	1.1U
Cadmium	1.1U	1.1U	1.1U	1.1U
Chromium	11.6	4.4	194.	122.
Copper	75.7	29.4	606.	584.
Lead	10.4	3.1	58.7	81.2
Mercury	0.10	0.11U	0.094U	0.096U
Nickel	38.2	9.2	202.	232.
Selenium	1.1U	1.1U	1.1U	1.1U
Silver	2.2U	2.1U	2.2U	2.2U
Thallium	2.2U	2.1U	2.2U	2.2U
Zinc	36.5	20.6	27.5	58.2

See Appendix for qualifier definitions

AEN Connecticut
Internal Chain-of-Custody

Client: G+M / Dultzy Metzy

AEN Job #: 2098-0268A

Custody Seal: present / absent (taped)
intact / not intact

Airbill #: FE

Sample #s: 01 \ 15

Field C-O-C: ~~present~~ / absent

Locations: A34, B3

Laboratory Sample #	Relinquished by	Accepted by	Date	Time	Reason	Relinquished by	Accepted by	Date	Time
1,4,7,10,12,14	[illegible]	[illegible]	2/5/98	15:40	VOA / TS	Mike Grove	[illegible]	2/5/98	2315
1,4,7,10,12,14	[illegible]	[illegible]	2/6/98	13:50	TS	[illegible]	[illegible]	2/06/98	14:00
2,3,5,6,8,9,11,13,15	[illegible]	[illegible]	02/06/98	17:30	Hg	[illegible]	[illegible]	02/06/98	1430
02,03,05,06,08,09,11,13,15	[illegible]	C. Cul	02/11/98	9:00	ICAP	C. Cul	[illegible]	02/11	9:00

AEN Form# SMF00501.CT

AS:022189:0

an environmental testing company
200 Monroe Turnpike
Monroe, Connecticut 06468
(203) 261-4458
FAX (203) 268-5346

CHAIN OF CUSTODY
ATOMIC SPECTROSCOPY DEPARTMENT

Job Number 248A Sample Numbers 02, 03, 05, 06, 08, 09, 11, 13, 15

WATER - SOIL - SLUDGE - EPTOX/TCLP

I confirm that I have performed the preparation below following SOP guidelines and authorize the release of this preparation:

Sample Prep

C. Cole	02/13/98	ICP/FLME
		FURN
[illegible]	02/13/98	MERCURY
Chemist	Date(s)	

I confirm that I have performed the analysis below following SOP guidelines and authorize the release of all associated data:

Analysis

Diane Sumo	2/18/98	ICP
		FLAME
		FURN
[illegible]	02/17/98	MERCURY
Chemist	Date(s)	

I have reviewed and authorize the release of this job:

Complete

DMSumo	2/19/98
Supervisor	Date

Batch Assignment

Soil

TABLE AS-1.2
7098-0268A
GERAGHTY & MILLER
PRIORITY POLLUTANT METALS

All values are mg/Kg dry weight basis.

Client Sample I.D.	S2B3P2-4'			
Lab Sample I.D.	980268A-15			
Antimony	13.0U			
Arsenic	2.2U			
Beryllium	1.1U			
Cadmium	1.1U			
Chromium	223.			
Copper	242.			
Lead	53.5			
Mercury	0.094U			
Nickel	294.			
Selenium	1.1U			
Silver	2.2U			
Thallium	2.2U			
Zinc	25.6			

See Appendix for qualifier definitions

ORGANICS APPENDIX

U - Indicates that the compound was analyzed for but not detected.

J - Indicates that the compound was analyzed for and determined to be present in the sample. The mass spectrum of the compound meets the identification criteria of the method. The concentration listed is an estimated value, which is less than the specified minimum detection limit but is greater than zero.

B - This flag is used when the analyte is found in the blanks as well as the sample. It indicates possible sample contamination and warns the data user to use caution when applying the results of this analyte.

N - Indicates that the compound was analyzed for but not requested as an analyte. Value will not be listed on tabular result sheet.

S - Estimated due to surrogate outliers.

X - Matrix spike compound.

(1) - Cannot be separated.

(2) - Decomposes to azobenzene. Measured and calibrated as azobenzene.

A - This flag indicates that a TIC is a suspected aldol condensation product.

E - Indicates that it exceeds calibration curve range.

D - This flag identifies all compounds identified in an analysis at a secondary dilution factor.

C - Confirmed by GC/MS.

T - Compound present in TCLP blank.

P - This flag is used for a pesticide/aroclor target analyte when there is a greater than 25 percent difference for detected concentrations between the two GC columns (see Form X).

U.S. EPA - CLP

3
BLANKS

Lab Name: IEA Contract: _____

Lab Code: IEA Case No.: _____ SAS No.: _____ SDG No.: A0268

Preparation Blank Matrix (soil/water): SOIL

Preparation Blank Concentration Units (ug/L or mg/kg): MG/KG

Analyte	Initial Calibration Blank (ug/L)	C	Continuing Calibration Blank (ug/L) 1	C	2	C	3	C	Preparation Blank	C	M
Antimony									12.000	U	P
Arsenic									2.000	U	P
Beryllium									1.000	U	P
Cadmium									1.000	U	P
Chromium									2.000	U	P
Copper									5.000	U	P
Lead									0.600	U	P
Mercury									0.100	U	CV
Nickel									8.000	U	P
Selenium									1.000	U	P
Silver									2.000	U	P
Thallium									2.000	U	P
Zinc									4.000	U	P

U.S. EPA - CLP

5A
SPIKE SAMPLE RECOVERY

EPA SAMPLE NO.

SBA-PER-32-3S

Lab Name: IEA Contract: _____

Lab Code: IEA Case No.: 0268 SAS No.: _____ SDG No.: A0268

Matrix: SOIL Level (low/med): LOW

% Solids for Sample: 81.38

Concentration Units (ug/L or mg/kg dry weight): MG/KG

Analyte	Limit %R	Spiked Sample Result (SSR)	C	Sample Result (SR)	C	Spike Added (SA)	%R	Q	M
Aluminum									NR
Antimony	75-125	101.1781		1.4690	B	122.88	81.1		P
Arsenic		54.3783		47.0789		9.83	74.2		P
Barium									NR
Beryllium	75-125	12.9449		0.6565	B	12.29	100.0		P
Cadmium	75-125	0.2458	U	0.2458	U	1.23	20.0		P
Calcium									NR
Chromium	75-125	77.8089		25.3559		49.15	106.7		P
Cobalt									NR
Copper		1267.2497		1142.2458		61.44	203.4		P
Iron									NR
Lead		402.6844		179.3532		4.92	4543.7		P
Magnesium									NR
Manganese									NR
Mercury	75-125	0.6702		0.1229	U	0.56	120.0		CV
Nickel		4419.9336		3797.9332		122.88	506.2		P
Potassium									NR
Selenium	75-125	4.9671		1.7242		2.46	132.0		P
Silver	75-125	4.2162		0.5307	B	12.29	30.0		P
Sodium									NR
Thallium	75-125	11.6903		0.4915	U	12.29	95.1		P
Vanadium									NR
Zinc	75-125	599.5903		404.5109		122.88	158.8		P
Cyanide									NR

Comments:

NYG 3918501

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple

0391218

PPS# 11[illegible] (Hazardous Waste Manifest 1/23/03)

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD131318651
Manifest Doc. No.: 18501
2. Page 1 of 1

Information within heavy bold line is not required by Federal Law.

3. Generator's Name and Mailing Address
Sulzer Metco US Inc
1101 Prospect Avenue
Westbury NY 11590

4. Generator's Telephone Number (516) 338-2337

A. NYG 3918501

B. Generator's ID: SAME

5. Transporter 1 (Company Name): Clean Harbors Env Services Inc
6. US EPA ID Number: MAD033322258

C. State Transporter's ID: NJ NA 0006

D. Transporter's Telephone (781) 849-1800

7. Transporter 2 (Company Name):
8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Telephone ( ) -

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4679 Spring Grove Avenue
Cincinnati OH 45232

10. US EPA ID Number: OHD000810029

G. State Facility ID:

H. Facility Telephone (513) 681-6718

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CHROMIC ACID SOLUTION, 8, UN1755, PG II	003	DF	014417	P	EPA D002 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
EROSION (PHE E)
a. c.
b. d.

K. Handling Codes for Wastes Listed Above
a. c.
b. d.

15. Special Handling Instructions and Additional Information
EMERGENCY PHONE # (800) 424-8802
11a CH180142 D0D0007 D006
3x55 [illegible] DEPOSAL [illegible]

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: [illegible] Signature: [illegible] Mo. 02 Day 04 Year 05

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: FRANK RICCIARDELLI Signature: [illegible] Mo. 02 Day 04 Year 05

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] Signature: [illegible] Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name: [illegible] Signature: Mo. Day Year

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

COPY 5—Generator—Mailed by TSD Facility

NYG 3918501

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

Please type or print. Do not staple

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

[Hazardous Waste Manifest 1/23/03]

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.
Manifest Doc. No.
2. Page 1 of
Information within heavy bold line is not required by Federal Law.

3. Generator's Name and Mailing Address

4. Generator's Telephone Number ( )

A. NYG 3918501

B. Generator's ID

5. Transporter 1 (Company Name)
6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name)
8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
10. US EPA ID Number

G. State Facility ID

H. Facility Telephone ( )

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above

a. c.

b. d.

K. Handling Codes for Wastes Listed Above

a. c.

b. d.

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
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Printed/Typed Name DAVID WALZAK
Signature
Mo. Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name
Signature
Mo. Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name
Signature
Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name
Signature
Mo. Day Year

COPY 8 - Generator Retained Copy

SULZER

Sulzer Metco

Waste Disposal Form

Department: From Materials Production Date: 2/4/05

Name of Submitter: David Walzak

Waste Description: 5 Totes TOTAL WT 3636 LBS

Quantity of waste: 7 - 55 gal Drums TOTAL WT 4218 LBS

List all constituents known to be present and the approximate percent of each. If the waste is a mixture of Sulzer Metco products, list the approximate percent of each:

1. 488 Drums ~~1365~~ LBS ~~2 Drums~~	%	6. Totes 1461	%
2. 920 LBS	%	7. 186	%
3. ~~350~~ LBS	%	8. 504	%
4. ~~630~~ LBS ~~2 Drums~~	%	9. 1342	%
5. 508 LBS	%	10. 137	%

6 - 753 LBS
7 - 609 LBS

Properties:

Circle those that apply:

Powder	Liquid	Flammable	Combustible
Oxidizer	Corrosive	Highly Acidic	Highly Alkaline

Please submit this form to the Facilities Department. Do not take the material to anyone. Someone will be assigned to remove the material for storage prior to disposal.

Facilities Use Only:

Waste Profile Code: Drums CH189107 / Totes CH183772 Internal Tracking Number: _____

Labels Required: Non Haz

WasteDisposalForm0303

2/04/05

CleanHarbors®
ENVIRONMENTAL SERVICES, INC.

Land Disposal Restriction Notification Form

Date: 02 / 03 / 2005

MANIFEST INFORMATION

Generator: Sulzer Metco US Inc
Address: 1101 Prospect Avenue
Westbury, NY 11590
EPA ID#: N Y D 1 3 1 3 1 8 6 5 1

Manifest No
NYG3918501
Sales Order No: D3912218
Manifest Document No:

LINE ITEM INFORMATION

Line Item:	Page No:	Profile No:	Treatability Group:	LDR Disposal Category:
11a	1	CH189142	NON- WASTEWATER	2 : This is subject to LDR.

EPA Waste Codes	EPA Waste Subcategory
D002	Corrosive Characteristic
D006	Toxicity characteristic for Cadmium
D007	Toxicity Characteristic for Chromium
D008	Toxicity Characteristic for Lead

Certification	Applies to Manifest Line Items
Pursuant to 40 CFR 268.7(a), I hereby notify that this shipment contains waste restricted under 40 CFR Part 268.	11a

CleanHarbors®
ENVIRONMENTAL SERVICES, INC.

Land Disposal Restriction Notification Form

Date: 02 / 03 / 2005

MANIFEST INFORMATION

Generator: Sulzer Metco US Inc
Address: 1101 Prospect Avenue
Westbury, NY 11590
EPA ID#: N Y D 1 3 1 3 1 8 6 5 1

Manifest No
NYG3918501
Sales Order No: D3912218
Manifest Document No:

Waste analysis data, where available, is attached

Signature: David Walzl
Print Name: DAVID WALZAK
Title: Ehs Spec III
Date: 2/4/05

NYC 6359602

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

(Hazardous Waste Manifest 11/00)

Please print or type. DO NOT STAPLE.

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No.
Manifest Document No.

2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Telephone ( )

5. Transporter 1 (Company Name)
6. US EPA ID Number

7. Transporter 2 (Company Name)
8. US EPA ID Number

9. Designated Facility Name and Site Address
10. US EPA ID Number

A. State Manifest Document Number
NYC 6359602

B. Generator's ID

C. State Transporter's ID

D. Transporter's Telephone ( )

E. State Transporter's ID

F. Transporter's Telephone ( )

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
a. c.
b. d.

K. Handling Codes for Wastes Listed Above
a. c.
b. d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
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Printed/Typed Name | Signature | Mo. Day Year

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name: M. Webb | Signature | Mo. Day Year: 10 21 16 01

COPY 5-Generator-Mailed by TSD facility

NYC 6359602

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 11/00)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Document No.

2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Telephone ( )

A. State Manifest Document Number NYC 6359602

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. | c.

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Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

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Printed/Typed Name | Signature | Mo. Day Year

COPY 8-Generator-retained by generator

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362.

K54474-R5732 SAFETY-KLEEN 02/03/01 PAGE: 1
LOCATION: 211808 LDR NOTIFICATION FORM 10:41:18

GENERATOR NAME: SULZER METCO INC MANIFEST NO.: NC6315960C
OR SALES SERVICE NO.: 5764899

CUST#: 0000-0838-26

PURSUANT TO 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

LDR FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01A SK PROFILE NO.: 0000
SKDOT#: 0000704

EPA WASTE CODES & LDR SUBCATEGORIES (IF ANY):
D001 LQ LIQUID >= 10% TOC
D018
D039
D040

TREATABILITY GROUP: NONWASTEWATERS

WASTE CONSITITUENT NOTIFICATION:
100 O-CRESOL
229 TETRACHLOROETHYLENE
237 TRICHLOROETHYLENE
247 ARSENIC
250 CADMIUM
255 LEAD
257 MERCURY - ALL OTHERS
260 SILVER
67 BENZENE

N O T E S

EXP NOTICE: THIS LDR EXPIRES ON 12/31/2001.

Harry Marc-Charles — HARRY MARC-CHARLES — 02 / 26 / 01
GENERATOR'S AUTHORIZED SIGNATURE — NAME & TITLE (PRINTED OR TYPED) — DATE

TERR: 21 REF#: 5764899 SW: 010

SEQ#: 3208 LOC: 211808

TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFE

NYC 529758-0

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

(Hazardous Waste Manifest 4/97)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. | Manifest Document No.

2. Page 1 of

Information within heavy bold line is not required by Federal law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

A. State Manifest Document Number: NYC 529758-0

B. Generator's ID

5. Transporter 1 (Company Name) | 6. US EPA ID Number

C. State Transporter's ID

D. Transporter's Telephone ( )

7. Transporter 2 (Company Name) | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address | 10. US EPA ID Number

G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a.	3		51		EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above

a. | c.

b. | d.

K. Handling Codes for Wastes Listed Above

a. | c.

b. | d.

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Printed/Typed Name | Signature | Mo. Day Year

18. Transporter 2 (Acknowledgement of Receipt of Materials)

Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

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Printed/Typed Name | Signature | Mo. Day Year

COPY 5-Generator-Mailed by TSD facility

P2SUL005479

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation

NYC 529758-0

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

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(Hazardous Waste Manifest 4/97)

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UNIFORM HAZARDOUS WASTE MANIFEST

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2. Page 1 of

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4. Generator's Phone ( )

A. State Manifest Document Number NYC 529758-0

B. Generator's ID

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C. State Transporter's ID

D. Transporter's Telephone ( )

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E. State Transporter's ID

F. Transporter's Telephone ( )

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G. State Facility ID

H. Facility's Telephone ( )

GENERATOR

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b.					EPA / STATE
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Printed/Typed Name | Signature | Mo. Day Year

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Printed/Typed Name | Signature | Mo. Day Year

FACILITY

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Printed/Typed Name | Signature | Mo. Day Year

COPY 8-Generator-retained by generator

TO: SAFETY-KLEEN CORP.
80 SEABRO
NO AMITYVILLE, NY 11701

EPA ID NO. NYD000708198
(DESIGNATED FACILITY)

UNDER MANIFEST/SALES SERVICE NUMBER (NYC529758-0) THE GENERATOR NOTED BELOW IS SHIPPING YOU A WASTE DETERMINED TO BE RESTRICTED UNDER 40 CFR PART 268. IN ACCORDANCE WITH 40 CFR 268.7 AND 6NYCRR 376.4(C), THE GENERATOR HEREBY PROVIDES NOTICE THAT THE WASTE IS RESTRICTED FROM LAND DISPOSAL. A COPY OF THIS FORM MUST BE KEPT BY THE GENERATOR FOR FIVE(5) YEARS FROM THE DATE OF SHIPMENT.

WASTE NAME: 662 SOLVENT 105 D001 SKDOT#: 0010083
WASTE CODE(S): D001 D006 D008 D018 D027 D039 D040
TREATABILITY GROUP: NONWASTEWATERS

EPA WASTE CODE	WASTE DESCRIPTION AND TREATMENT/REGULATORY SUBCATEGORY OR REGULATED HAZARDOUS CONSTITUENT	TREATMENT STANDARD (*) CONCENTRATION OR TECHNOLOGY CODE	
D001	HIGH TOC IGNITABLE CHARACTERISTIC WASTE.	RORGS; OR CMBST **	
D006	CADMIUM (CD)	1.0	MG/L TCLP
D008	LEAD (PB)	5.0	MG/L EP OR TCLP
D018	BENZENE	10	MG/KG ****
D027	P-DICHLOROBENZENE (1,4-DICHLOROBENZENE)	6.0	MG/KG ****
D039	TETRACHLOROETHYLENE	6.0	MG/KG ****
D040	TRICHLOROETHYLENE	6.0	MG/KG ****

N O T E S

THE CONSTITUENT COMPOSITION IS BASED ON KNOWLEDGE OF THE WASTE (VIA MATERIAL SAFETY DATA SHEETS FOR THE CHEMICAL(S) USED, AND THE PROCESS WHICH CREATED THE WASTE).

NOTES: * THESE TREATMENT STANDARDS DO NOT PRECLUDE RECLAMATION PRIOR TO FINAL DISPOSITION.
** NEW TREATMENT STANDARDS UNDER FEDERAL RULES EFFECTIVE 12-19-94.
*** TREATMENT STANDARDS APPLICABLE IN CERTAIN HSWA-AUTHORIZED STATES AND MEET UNIVERSAL TREATMENT STANDARDS.
**** NEW TREATMENT STANDARDS UNDER FEDERAL RULES EFFECTIVE 7-8-96.

UHC NOTICE: GENERATOR IS NOT REQUIRED TO LIST UNDERLYING CONSTITUENTS BECAUSE TREATER WILL MONITOR FOR ALL REGULATED CONSTITUENTS PRIOR TO DISPOSAL.

GENERATOR NAME: SULZER METCO (US), INC EPA ID: NYD057731663

SEQ#: 2808 LOC: 211808 CUST: 2-118-08-1500 TERR: 01 REF#: 821631 SW: 9827

TOP COPY: GENERATOR MIDDLE COPY: FACILITY BOTTOM COPY: TRANSFER

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

Is your RETURN ADDRESS completed on the reverse side?

3. Article Addressed to:
STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL
CONSERVATION
DIV SOLID & HAZARDOUS MATERIALS
MANIFEST SECTION
PO BOX 12820
ALBANY NY 12212

4a. Article Number
P 341 833 585

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: *(Print Name)*

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature: *(Addressee or Agent)*
X

PS Form **3811**, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

P 341 833 585

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail *(See reverse)*

Sent to STATE OF NEW YORK
DEC DIV SOLID & HAZ MATERIALS
Street & Number
PO BOX 12820
Post Office, State, & ZIP Code
ALBANY NY 12212

Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

Fold at line over top of envelope to the right of the return address

CERTIFIED

P 341 833 585

MAIL

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

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STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL
CONSERVATION
DIV SOLID & HAZARDOUS MATERIALS
MANIFEST SECTION
PO BOX 12820
ALBANY NY 12212

4a. Article Number
P 341 833 585

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: *(Print Name)* CHARLES GALVIN

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature: *(Addressee or Agent)*
X

PS Form **3811**, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

AETC®
ADVANCED ENVIRONMENTAL
TECHNOLOGY CORPORATION
456 W. JOHN STREET, HICKSVILLE, NY 11801 516-433-9101

June 20, 1991

Ms. C. Conroy
Metco/Perkin Elmer
1101 Prospect Street
Westbury, NY 11590

Dear Constance:

Regarding the analytical data which was prepared for disposal of the waste waters and rinseate generated by the decontamination of Oyster Bay's dump truck I would like to clarify the mistakes we made on our invoice:

1) Shipping Date to H2M Laboratories was 22 August 1990 NOT 6 July 1990.

2) Samples were shipped via AETC's technical coordinator vehicle - License NYDK9471 NOT via Nappi Trucking.

3) Eleven (11) samples were provided to H2M representing area samples from the various rooms, aisleways and Town of Oyster Bay Dump Truck.

4) Analytical was performed for disposal purposes only to rule out EP toxic metals, to verify ph of rinseate and waste waters and included digestion, ph, TCL metal screen.

5) Results of analytical took 2 weeks with H2M invoice date to us of 4 September 1990.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: NYD131318651
2. Page 1 of: 2
3. Emergency Response Phone: (908) 354-0210
4. Manifest Tracking Number: 003535815 JJK

5. Generator's Name and Mailing Address: SULZER METCO US INC
1101 PROSPECT AVE
WESTBURY, NY 11590
Generator's Phone: (516) 338-2417

Generator's Site Address (if different than mailing address): SAME

6. Transporter 1 Company Name: CLEAN VENTURE INC.
U.S. EPA ID Number: NJ0000027193

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Cycle Chem Inc.
217 South First Street
Elizabeth, NJ 07206
Facility's Phone: (908) 355-5800
U.S. EPA ID Number: NJD002200046

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	1. Chemical Process Solid Non-RCRA Non-DOT	XX2	C W	X511	P	ID27
X	2. Hazardous waste, liquid, n.o.s. 9 NA3082 PG III (D006 D007 D008 T) ERGW 171	XX1	D M	X55	G	D006 D007 D008 T
	3. Chemical Process Solid Non-RCRA Non-DOT	XX1	D M	X114	~~G~~ P	ID27
	4. NON REGULATED MATERIAL (ALKALINE BATTERIES) Non-RCRA Non-DOT	XX2	D F	106	~~G~~ P	ID27

14. Special Handling Instructions and Additional Information: 945948/-1/91026/230037 (1)FC06-1 FILTERS, PPE,METAL & CERAMIC POWDER (2)STCR3-50 COPPER CLEANER PH 5 (3)FC01-3 OIL SPILL CLEAN UP FILTERS (4)MB-19 ALKALINE BATTERIES

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: X Jim Kourkoumelis
Signature: X
Month 10 Day 06 Year 08

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: F.S. White
Signature: F.S. White
Month 10 Day 06 Year 08
Transporter 2 Printed/Typed Name:
Signature:
Month Day Year

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator)

SULZER METCO (US) INC
OCT 20 2008
EHS DEPARTMENT

Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
	H141		

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: Mylene Gonzalez
Signature: Mylene Gonzalez
Month 10 Day 06 Year 08

GENERATOR | INT'L | TRANSPORTER | DESIGNATED FACILITY

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete. DESIGNATED FACILITY TO GENERATOR

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21. Generator ID Number: NYD131318651

22. Page: 2 of 2

23. Manifest Tracking Number: 003535875 JJK

24. Generator's Name: SULZER METCO US INC
1101 PROSPECT AVE
WESTBURY, NY 11590

25. Transporter _____ Company Name — U.S. EPA ID Number

26. Transporter _____ Company Name — U.S. EPA ID Number

27a. HM	27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	28. Containers No.	28. Containers Type	29. Total Quantity	30. Unit Wt./Vol.	31. Waste Codes
	(1) UNIVERSAL WASTE COMPUTERS Non-RCRA Non-DOT	XX1	C W	Y87	P	
	(2) NON REGULATED MATERIAL (WATER, OIL) Non-RCRA Non-DOT	XX1	D M	X55	G	ID72
	(3) NON REGULATED MATERIAL (OIL, SPEEDY DRY) Non-RCRA Non-DOT	XX1	D M	X256	P	ID27
	(4) NON REGULATED MATERIAL (OILY SOAP) Non-RCRA Non-DOT	XX1	D M	X55	G	ID72
	(5) Chemical Process Solid Non-RCRA Non-DOT	X15	D M	6,568	P	ID27

SULZER METCO (US) INC.
OCT 20 2008
EHS DEPARTMENT

32. Special Handling Instructions and Additional Information: MENT (2)REM002-43 WATER/ OIL (3)PC01-44 OIL, & SPEEDY DRY (4)PC04-46 WATER, OIL, & SOAP (5)PC06-48 DUST COLLECTOR WASTE

GENERATOR

TRANSPORTER

33. Transporter _____ Acknowledgment of Receipt of Materials
Printed/Typed Name: F.S. White — Signature: F.S. White — Month 10 Day 20 Year 08

34. Transporter _____ Acknowledgment of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

35. Discrepancy

36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

EPA Form 8700-22A (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO GENERATOR

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: NYD131318051
2. Page 1 of: 2
3. Emergency Response Phone: (908) 354-0210
4. Manifest Tracking Number: 003535815 JJK

5. Generator's Name and Mailing Address: SULZER METCO US INC
1101 PROSPECT AVE
WESTBURY, NY 11590
Generator's Phone: (516) 338-2417

Generator's Site Address (if different than mailing address): SAME

6. Transporter 1 Company Name: CLEAN VENTURE INC.
U.S. EPA ID Number: NJD000027193

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Cycle Chem Inc.
217 South First Street
Elizabeth, NJ 07206
Facility's Phone: (908) 355-4000
U.S. EPA ID Number: NJD002200042

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	1. Chemical Process Solid Non-RCRA Non-DOT	XX2	C W	X511	P	D027
X	2. Hazardous waste, liquid, n.o.s. 9 NA3082 PG III (D004 D007 D008 D009 D010)	XX1	D M	X55	G	D006 D007 D008 D009
	3. Chemical Process Solid Non-RCRA Non-DOT	XX1	D M	X114	P	D027
	4. NON REGULATED MATERIAL (ALKALINE BATTERIES) Non-RCRA Non-DOT	XX2	D M	106	P	D027

14. Special Handling Instructions and Additional Information: 9459487-1/91026/257057 (1)D006-1 FILTER, METAL & CERAMIC PARTS (2)STUFFED OUTER CLEANER PM 3 (3)D001-3 OIL STICK CLEAN UP FILTERS (4)NR-12 ALKALINE BATTERIES

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: X Jim Kowalkowski
Signature: X
Month 10 Day 06 Year 08

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: F.S. White
Signature: F.S. White
Month 10 Day 06 Year 08

Transporter 2 Printed/Typed Name:
Signature:
Month Day Year

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
	H141		

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name
Signature
Month Day Year

GENERATOR | INT'L | TRANSPORTER | DESIGNATED FACILITY

U.S. EPA Form 8700-22

Read all instructions before completing this form.

1. This form has been designed for use on a 12-pitch (elite) typewriter which is also compatible with standard computer printers; a firm point pen may also be used—press down hard.
2. Federal regulations require generators and transporters of hazardous waste and owners or operators of hazardous waste treatment, storage, and disposal facilities to complete this form (EPA Form 8700–22) and, if necessary, the continuation sheet (EPA Form 8700–22A) for both inter- and intrastate transportation of hazardous waste.

Public reporting burden for this collection of information is estimated to average: 30 minutes for generators, 10 minutes for transporters, and 25 minutes for owners or operators of treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, completing, reviewing and transmitting the form. Any correspondence regarding the PRA burden statement for the manifest must be sent to the Director of the Collection Strategies Division in EPA's Office of Information Collection at the following address: U.S. Environmental Protection Agency (2822T), 1200 Pennsylvania Ave., NW., Washington, DC 20460. Do not send the completed form to this address.

I. Instructions for Generators

Item 1. Generator's U.S. EPA Identification Number

Enter the generator's U.S. EPA twelve digit identification number, or the State generator identification number if the generator site does not have an EPA identification number.

Item 2. Page 1 of ___

Enter the total number of pages used to complete this Manifest (*i.e.*, the first page (EPA Form 8700-22) plus the number of Continuation Sheets (EPA Form 8700-22A), if any).

Item 3. Emergency Response Phone Number

Enter a phone number for which emergency response information can be obtained in the event of an incident during transportation. The emergency response phone number must:

1. Be the number of the generator or the number of an agency or organization who is capable of and accepts responsibility for providing detailed information about the shipment;
2. Reach a phone that is monitored 24 hours a day at all times the waste is in transportation (including transportation related storage); and
3. Reach someone who is either knowledgeable of the hazardous waste being shipped and has comprehensive emergency response and spill cleanup/incident mitigation information for the material being shipped or has immediate access to a person who has that knowledge and information about the shipment.

Note: Emergency Response phone number information should only be entered in Item 3 when there is one phone number that applies to all the waste materials described in Item 9b. If a situation (*e.g.*, consolidated shipments) arises where more than one Emergency Response phone number applies to the various wastes listed on the manifest, the phone numbers associated with each specific material should be entered after its description in Item 9b.

Item 4. Manifest Tracking Number

This unique tracking number must be pre-printed on the manifest by the forms printer.

Item 5. Generator's Mailing Address, Phone Number and Site Address

Enter the name of the generator, the mailing address to which the completed manifest signed by the designated facility should be mailed, and the generator's telephone number. Note, the telephone number (including area code) should be the normal business number for the generator, or the number where the generator or his authorized agent may be reached to provide instructions in the event the designated and/or alternate (if any) facility rejects some or all of the shipment. Also enter the physical site address from which the shipment originates only if this address is different than the mailing address.

Item 6. Transporter 1 Company Name, and U.S. EPA ID Number

Enter the company name and U.S. EPA ID number of the first transporter who will transport the waste. Vehicle or driver information may not be entered here.

Item 7. Transporter 2 Company Name and U.S. EPA ID Number

If applicable, enter the company name and U.S. EPA ID number of the second transporter who will transport the waste. Vehicle or driver information may not be entered here.

If more than two transporters are needed, use a Continuation Sheet(s) (EPA Form 8700-22A).

Item 8. Designated Facility Name, Site Address, and U.S. EPA ID Number

Enter the company name and site address of the facility designated to receive the waste listed on this manifest. Also enter the facility's phone number and the U.S. EPA twelve digit identification number of the facility.

Item 9. U.S. DOT Description (Including Proper Shipping Name, Hazard Class or Division, Identification Number, and Packing Group)

Item 9a. If the wastes identified in Item 9b consist of both hazardous and nonhazardous materials, then identify the hazardous materials by entering an "X" in this Item next to the corresponding hazardous material identified in Item 9b.

Item 9b. Enter the U.S. DOT Proper Shipping Name, Hazard Class or Division, Identification Number (UN/NA) and Packing Group for each waste as identified in 49 CFR 172. Include technical name(s) and reportable quantity references, if applicable.

Note: If additional space is needed for waste descriptions, enter these additional descriptions in Item 27 on the Continuation Sheet (EPA Form 8700-22A). Also, if more than one Emergency Response phone number applies to the various wastes described in either Item 9b or Item 27, enter applicable Emergency Response phone numbers immediately following the shipping descriptions for those Items.

Item 10. Containers (Number and Type)

Enter the number of containers for each waste and the appropriate abbreviation from Table I (below) for the type of container.

TABLE I.--TYPES OF CONTAINERS

BA = Burlap, cloth, paper, or plastic bags.	DT = Dump truck.
CF = Fiber or plastic boxes, cartons, cases.	DW = Wooden drums, barrels, kegs.
CM = Metal boxes, cartons, cases (including roll-offs).	HG = Hopper or gondola cars.
CW = Wooden boxes, cartons, cases.	TC = Tank cars.
CY = Cylinders.	TP = Portable tanks.
DF = Fiberboard or plastic drums, barrels, kegs.	TT = Cargo tanks (tank trucks).
DM = Metal drums, barrels, kegs.	

Item 11. Total Quantity

Enter, in designated boxes, the total quantity of waste. Round partial units to the nearest whole unit, and *do not* enter decimals or fractions. To the extent practical, report quantities using appropriate units of measure that will allow you to report quantities with precision. Waste quantities entered should be based on actual measurements or reasonably accurate estimates of actual quantities shipped. Container capacities are not acceptable as estimates.

Item 12. Units of Measure (Weight/Volume)

Enter, in designated boxes, the appropriate abbreviation from Table II (below) for the unit of measure.

TABLE II.--UNITS OF MEASURE

G = Gallons (liquids only).	N = Cubic Meters.
K = Kilograms.	P = Pounds.
L = Liters (liquids only).	T = Tons (2000 Pounds).
M = Metric Tons (1000 kilograms).	Y = Cubic Yards.

Note: Tons, Metric Tons, Cubic Meters, and Cubic Yards should only be reported in connection with very large bulk shipments, such as rail cars, tank trucks, or barges.

Item 13. Waste Codes

Enter up to six federal and state waste codes to describe each waste stream identified in Item 9b. State waste codes that are not redundant with federal codes must be entered here, in addition to the federal waste codes which are most representative of the properties of the waste.

Item 14. Special Handling Instructions and Additional Information

1. Generators may enter any special handling or shipment-specific information necessary for the proper management or tracking of the materials under the generator's or other handler's business processes, such as waste profile numbers, container codes, bar codes, or response guide numbers. Generators also may use this space to enter additional descriptive information about their shipped materials, such as chemical names, constituent percentages, physical state, or specific gravity of wastes identified with volume units in Item 12.
2. This space may be used to record limited types of federally required information for which there is no specific space provided on the manifest, including any alternate facility designations; the manifest tracking number of the original manifest for rejected wastes and residues that are re-shipped under a second manifest; and the specification of PCB waste descriptions and PCB out-of-service dates required under 40 CFR 761.207. Generators, however, cannot be required to enter information in this space to meet state regulatory requirements.

Item 15. Generator's/Offeror's Certifications

1. The generator must read, sign, and date the waste minimization certification statement. In signing the waste minimization certification statement, those generators who have not been exempted by statute or regulation from the duty to make a waste minimization certification under section 3002(b) of RCRA are also certifying that they have complied with the waste minimization requirements. The Generator's Certification also contains the required attestation that the shipment has been properly prepared and is in proper condition for transportation (the shipper's certification). The content of the shipper's certification statement is as follows: "I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent." When a party other than the generator prepares the shipment for transportation, this party may also sign the shipper's certification statement as the offeror of the shipment.
2. Generator or Offeror personnel may preprint the words, "On behalf of" in the signature block or may hand write this statement in the signature block prior to signing the generator/offeror certification, to indicate that the individual signs as the employee or agent of the named principal.

Note: All of the above information except the handwritten signature required in Item 15 may be pre-printed.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21. Generator ID Number: NYD131318651

22. Page: 2 of 2

23. Manifest Tracking Number: 003535875 JJK

24. Generator's Name: SULZER METCO US INC
1101 PROSPECT AVE
WESTBURY, NY 11590

25. Transporter _____ Company Name — U.S. EPA ID Number

26. Transporter _____ Company Name — U.S. EPA ID Number

27a. HM	27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	28. Containers No.	28. Containers Type	29. Total Quantity	30. Unit Wt./Vol.	31. Waste Codes
	(1) UNIVERSAL WASTE COMPUTERS Non-RCRA Non-DOT	XX1	C 16	Y87	P	
	(2) NON REGULATED MATERIAL (WATER, OIL) Non-RCRA Non-DOT	XX1	D M	X55	G	ID72
	(3) NON REGULATED MATERIAL (OIL, SPEEDY DRY) Non-RCRA Non-DOT	XX1	D M	X256	~~G~~ P	ID27
	(4) NON REGULATED MATERIAL (OILY SOAP) Non-RCRA Non-DOT	XX1	D M	X55	G	ID72
	(5) Chemical Process Solid Non-RCRA Non-DOT	X15	D M	6,568	~~G~~ P	ID27

32. Special Handling Instructions and Additional Information-MENT (2)RE002-45 WATER, OIL (3)FC01-44 OIL, & SPEEDY DRY
(4)FC04-46 WATER, OIL, & SOAP (5)FC06-46 DUST COLLECTOR WASTE

TRANSPORTER

33. Transporter _____ Acknowledgment of Receipt of Materials
Printed/Typed Name: F.S. White — Signature: F.S. White — Month 10 Day 06 Year 05

34. Transporter _____ Acknowledgment of Receipt of Materials
Printed/Typed Name — Signature — Month — Day — Year

DESIGNATED FACILITY

35. Discrepancy

36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

GENERATOR

EPA Form 8700-22A (Rev. 3-05) Previous editions are obsolete. **GENERATOR'S INITIAL COPY**

Instructions—Continuation Sheet
U.S. EPA Form 8700-22A

Read all instructions before completing this form. This form has been designed for use on a 12-pitch (elite) typewriter; a firm point pen may also be used—press down hard.

This form must be used as a continuation sheet to U.S. EPA Form 8700-22 if:

- More than two transporters are to be used to transport the waste; or
- More space is required for the U.S. DOT descriptions and related information in Item 9 of U.S. EPA Form 8700-22.

Federal regulations require generators and transporters of hazardous waste and owners or operators of hazardous waste treatment, storage, or disposal facilities to use the uniform hazardous waste manifest (EPA Form 8700-22) and, if necessary, this continuation sheet (EPA Form 8700-22A) for both interstate and intrastate transportation.

I. Instructions for Generators

Item 21. Generator's ID Number

Enter the generator's U.S. EPA twelve digit identification number or, the State generator identification number if the generator site does not have an EPA identification number.

Item 22. Page ___

Enter the page number of this Continuation Sheet.

Item 23. Manifest Tracking Number

Enter the Manifest Tracking number from Item 4 of the Manifest form to which this continuation sheet is attached.

Item 24. Generator's Name—

Enter the generator's name as it appears in Item 5 on the first page of the Manifest.

Item 25. Transporter—Company Name

If additional transporters are used to transport the waste described on this Manifest, enter the company name of each additional transporter in the order in which they will transport the waste. Enter after the word "Transporter" the order of the transporter. For example, Transporter 3 Company Name. Also enter the U.S. EPA twelve digit identification number of the transporter described in Item 25.

Item 26. Transporter—Company Name

If additional transporters are used to transport the waste described on this Manifest, enter the company name of each additional transporter in the order in which they will transport the waste. Enter after the word "Transporter" the order of the transporter. For example, Transporter 4 Company Name. Each Continuation Sheet can record the names of two additional transporters. Also enter the U.S. EPA twelve digit identification number of the transporter named in Item 26.

Item 27. U.S. D.O.T. Description Including Proper Shipping Name, Hazardous Class, and ID Number (UN/NA)

For each row enter a sequential number under Item 27b that corresponds to the order of waste codes from one continuation sheet to the next, to reflect the total number of wastes being shipped. Refer to instructions for Item 9 of the manifest for the information to be entered.

Item 28. Containers (No. And Type)

Refer to the instructions for Item 10 of the manifest for information to be entered.

Item 29. Total Quantity

Refer to the instructions for Item 11 of the manifest form.

Item 30. Units of Measure (Weight/Volume)

Refer to the instructions for Item 12 of the manifest form.

Item 31. Waste Codes

Refer to the instructions for Item 13 of the manifest form.

Item 32. Special Handling Instructions and Additional Information

Refer to the instructions for Item 14 of the manifest form.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: NYD131318651
2. Page 1 of 2
3. Emergency Response Phone: (908) 354-0210
4. Manifest Tracking Number: 003535815 JJK

5. Generator's Name and Mailing Address: SULZER METCO US INC
1101 PROSPECT AVE
WESTBURY, NY 11590
Generator's Phone: (516) 338-2417

Generator's Site Address (if different than mailing address): SAME

6. Transporter 1 Company Name: CLEAN VENTURE INC.
U.S. EPA ID Number: NJ0000027193

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Cycle Chem Inc.
217 South First Street
Elizabeth, NJ 07206
Facility's Phone: (908) 355-5800
U.S. EPA ID Number: NJD002200046

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
	1. Chemical Process Solid Non-RCRA Non-DOT	XX2	C W	X511	P	ID27		
X	2. Hazardous waste, liquid, n.o.s. 9 NA3082 PG III (D006 D007 D008 T) ERG# 171	XX1	D M	X55	G	D006	D007	D008
	3. Chemical Process Solid Non-RCRA Non-DOT	XX1	D M	X114	~~G~~ P	ID27		
	4. NON REGULATED MATERIAL (ALKALINE BATTERIES) Non-RCRA Non-DOT	XX2	D F	106	~~G~~ P	ID27		

14. Special Handling Instructions and Additional Information: 945948/-1/91026/237037 (1)PC06-1 FILTERS, PPE,METAL & CERAMIC POWDER (2)STCR3-50 COPPER CLEANER PH 5 (3)PC01-3 OIL SPILL CLEAN UP FILTERS (4)MB-19 ALKALINE BATTERIES

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: X Jim Kourkoumelis
Signature: X
Month 10 Day 06 Year 08

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S.
Port of entry/exit:
Transporter signature (for exports only):
Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: F.S. Whites
Signature: F.S. White
Month 10 Day 06 Year 08
Transporter 2 Printed/Typed Name:
Signature:
Month Day Year

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator)
Month Day Year

SULZER METCO (US) INC.
OCT 22 2008
EHS DEPARTMENT

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
	H141		

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: Mylene Gonzalez
Signature: Mylene Gonzalez
Month 10 Day 06 Year 08

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21. Generator ID Number: NYD131318651

22. Page: 2 of 2

23. Manifest Tracking Number: 003535815JJK

24. Generator's Name: SULZER METCO US INC
1101 PROSPECT AVE
WESTBURY, NY 11590

25. Transporter _____ Company Name — U.S. EPA ID Number

26. Transporter _____ Company Name — U.S. EPA ID Number

27a. HM	27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	28. Containers No.	28. Containers Type	29. Total Quantity	30. Unit Wt./Vol.	31. Waste Codes
	(1) UNIVERSAL WASTE COMPUTERS Non-RCRA Non-DOT	XX1	C W	X87	P	
	(2) NON REGULATED MATERIAL (WATER, OIL) Non-RCRA Non-DOT	XX1	D M	X55	G	ID72
	(3) NON REGULATED MATERIAL (OIL, SPEEDY DRY) Non-RCRA Non-DOT	XX1	D M	X256	~~G~~ P	ID27
	(4) NON REGULATED MATERIAL (OILY SOAP) Non-RCRA Non-DOT	XX1	D M	X55	G	ID72
	(5) Chemical Process Solid Non-RCRA Non-DOT	X15	D M	6,568	~~G~~ P	ID27

32. Special Handling Instructions and Additional Information
(1)SR1-28 COMPUTER EQUIPMENT (2)REM002-43 WATER/ OIL (3)PC01-44 OIL, & SPEEDY DRY
(4)PC04-46 WATER, OIL, & SOAP (5)PC06-48 DUST COLLECTOR WASTE

TRANSPORTER

33. Transporter _____ Acknowledgment of Receipt of Materials
Printed/Typed Name: F.S. Whitt — Signature: F.S. Whitt — Month 10 Day 06 Year 08

34. Transporter _____ Acknowledgment of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

35. Discrepancy

36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

Cycle Chem, Inc

201 South First Street Elizabeth, NJ 07206 PHONE: 908-355-5800, FAX: 908-355-0562

Land Disposal Restriction Notification and Certification Form

Generator: SULZER METCO US INC
EPAID: NYD131318651

Manifest Number: 237037
Manifest Tracking Number: 0035358 15 JK

The EPA hazardous wastes identified below must be treated to the applicable treatment standards Set forth In 40 CFR 268.40.

EPA Waste Code Information

Manifest Line	Waste-water?	EPACodes
Page 1 Line 1	No	RCRA non-hazardous
Page 1 Line 2	No	D006 (Cadmium non-battery subcategory), D007, D008 (Lead non-battery subcategory)
Page 1 Line 3	No	RCRA non-hazardous
Page 1 Line 4	No	RCRA non-hazardous
Page 2 Line 1	No	RCRA non-hazardous
Page 2 Line 2	No	RCRA non-hazardous
Page 2 Line 3	No	RCRA non-hazardous
Page 2 Line 4	No	RCRA non-hazardous
Page 2 Line 5	No	RCRA non-hazardous

Underlying Hazardous Constituents

(None present unless identified below.)

Manifest Line	Constituents

I certify that all information submitted On this Land Disposal Restriction and Certification Form is accurate and complete, to the best of my knowledge and information.

Signature: _____ Name: Jim Kourkounelis

Title: Hazardous Waste Coordinator Date: 10/6/08

WASTE DRUM INVENTORY

WASTE COMPANY:_____ DATE:_____

DRUM #	PROFILE #	DESCRIPTION	WEIGHT	COMMENTS
1	PC06-48	Dust Collector Tower 1	321	404, 405, 406
2	"	Bowl scrap 136F	155	" " "
3	"	320	406	" " "
4	"	320	342	" " "
5	"	136F	155	" " "
6	"	Floor Sweeping	496	" " "
7	"	Bag House 2	594	" " "
8	"	" " 2	666	" " "
9	"	Tower 1	385	" " "
10	Remo02-43	water/oil	510	329
11	PC04-46	water/oil/soap	512	329
12	PC06-41	Filters	138	404 or 405
13	PC06-41	Filters	373	404 or 405
14	SR1-28	Computer Equipment	89	391
15	MB-19	Batteries	62	391
16	MB-19	Batteries	44	391
17	PC01-3	oil Clean up/Filters	114	329
18	PC01-44	Oil & Speedy Dry	256	329
19	PC06-48	Dust Collector	424	404, 405, 406
20	STR3-50	Copper Cleaner PH-5	497	329
21	PC06-48	Dust Collector	1362	404, 405, 406
22	PC06-48	" "	410	" " "
23	PC06-48	" "	261	" " "
24	PC06-48	" "	516	" " "
25	PC06-48	" "	75	" " "

Form: Waste Drum Inventory.xls

Site Address:
SAME

25

PPW 11/19/2004

WORK ORDER NO. D3912218

DOCUMENT NO. 58455

STRAIGHT BILL OF LADING

TRANSPORTER 1 Clean Harbors Env Services Inc VEHICLE ID # 5162

EPA ID # MAD039322250 TRANS. 1 PHONE (781) 649-1800

TRANSPORTER 2 VEHICLE ID #

EPA ID # TRANS. 2 PHONE

DESIGNATED FACILITY			SHIPPER		
Spring Grove Resource Recovery			Sulzer Metco US Inc		
FACILITY EPA ID # OHD000816629			SHIPPER EPA ID # NYD131318651		
ADDRESS 4879 Spring Grove Avenue			ADDRESS 1101 Prospect Avenue		
CITY Cincinnati	STATE OH	ZIP 45232	CITY Westbury	STATE NY	ZIP 11590

CONTAINERS NO. & SIZE	TYPE	HM	DESCRIPTION OF MATERIALS	TOTAL QUANTITY	UNIT WT/VOL
7X55	DM		A. NON DOT REGULATED MATERIAL, (MAGNESIUM OXIDE, TITANIUM OXIDE), NON DOT HAZARDOUS, NONE	4,218	P
5XTP	DF		B. NON DOT REGULATED MATERIAL, (METAL OXIDES), NON DOT HAZARDOUS, N/A	3636	P
			C.		
			D.		
			E.		
			F.		
			G.		
			H.		

SPECIAL HANDLING INSTRUCTIONS
A. CH189107 B. CH83772
(5 X TOTES)

EMERGENCY PHONE #: (800) 483-3716
DEPE 07259 NJ DOEAL# 097613

SHIPPERS CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

	PRINT	SIGN	DATE
SHIPPER	DAVID WALZAK	David Walzak	2/4/05
TRANSPORTER 1	FRANK RICCIARDELLI	Frank Ricciardelli	2/4/05
TRANSPORTER 2			
RECEIVED BY			

4

CHI 107

CHEMICAL WASTE MANAGEMENT, INC.
NORTHEAST SERVICE CENTER
100 LISTER AVENUE
NEWARK, NEW JERSEY 07105

DATE: 6/29/95 TIME:

TO: Constance Conway, Kathryn Miles PHONE:

FAX: 516-338-2336

FROM: Louisa Markiewicz PHONE: (201) 465-4154

FAX: (201) 817-5313

MESSAGE:

NUMBER OF PAGES TO FOLLOW: 5

ACCEPTANCE LETTER

June 9, 1995

Ms. Constance Conroy
SULZER (US) METCO INC.
1101 Prospect Avenue
Westbury, NY 11590-0201

Re: **CWM Proposal No. NWK.0695.09.02**
Scope of Work: Drum Handling Services

Dear Ms. Conroy:

The Technical Services Division of Chemical Waste Management, Inc. (CWM) is pleased to present the following proposal for the turn-key management of the drums currently located at your facility.

As the project stands, CWM will provide a technically trained field team consisting of two men to inspect and profile the drums for appropriate disposal. The disposal site to which the waste is shipped will be a CWM/USEPA approved facility.

If this service described is satisfactory, please sign one copy of this Acceptance Letter, and return it in the enclosed envelope. Upon receipt, CWM will promptly schedule this project. All work will be performed under the terms/conditions of Svc. Agreement # NWK.0791.28.

Thank you for your continued interest in Chemical Waste Management, Inc.'s Technical Services Division for your disposal needs. As the nation's leader in chemical waste disposal, we can offer your company the assurance that your waste will be properly and safely managed for your protection against future liabilities. Please do not hesitate to contact me at 1-800-253-3090 with an questions you may have.

Sincerely,
CHEMICAL WASTE MANAGEMENT, INC.
Technical Services Division

Lorissa Dashkiewicz
Operations Manager

ACCEPTED BY: SULZER (US) METCO INC.

Name: _____

Title: _____

Date: _____

1.0 SCOPE OF WORK

CWM understands the Scope of Work (SOW) for this project to be the following:

- Phase I: Labor · Profiling of drums for disposal at a CWM/USEPA approved disposal facility according to DOT and USEPA regulations.

- Phase II: Loading, Transportation, and Disposal of Profiled waste, and streams.

2.0 TECHNICAL APPROACH

Personnel	Equipment
1-Field Chemist	Level "C & D" P.P.E.
1-Field Analyst	(1) Midline Supply Truck
	Safety Gear/Equipment

CWM-Technical Services will mobilize a crew consisting of a Field Chemist and Field Analyst to perform the lab packaging, profiling, and site evaluation. The crew will be mobilized from the Technical Services' operations headquarters in Newark, New Jersey.

Lab Packaging

All waste will be classified to insure proper packaging based on procedures found in the CWM Corporate Lab Pack Manual. Chemicals will be segregated based on their DOT class compatibility, and then placed into separate groups. Once segregation is complete, there will be various hazard class groups. This procedure is utilized to enable DOT groups to be packed one at a time, allowing for an economical pack. Chemicals will be packed into 5, 16, 30, & 55-gallon DOT-approved open head drums. If chemicals are corrosive, the drum will be lined with a polyethylene insert and lid, 10mm in thickness. The appropriate absorbent material will be placed in the drum before any chemicals are placed inside. The chemicals will be subsequently manifested, loaded, and transported depending on their applicable disposal/treatment methods. The field team will supply all necessary documents for this process. Possible disposal outlets that may be utilized listed in the Unit Pricing Summary.

4.0 HEALTH AND SAFETY

No chemicals will be handled by CWM Technical Services personnel unless they are wearing, at a minimum, steel-toe boots with shanks, safety goggles, a particle/light splash holdout tyvek suit and latex gloves taped to the tyvek at the wrist. Should the risk of harm increase, our personnel have the equipment and understanding required to upgrade to the proper level of protection. Prior to the start of on-site work, the field team will write a site contingency plan outlining procedures to follow in the case of an accident.

5.0 PROJECT SCHEDULE

CWM-Technical Services anticipates this project will be completed in one days. All drums will be removed after approval from the appropriate disposal facility is secured..

PROJECT ESTIMATION

PROJECT LABOR:	Unit Cost	Quantity	Sub-Total
-Daily labor rate to include on site labor, sampling, profiling, PPE (Level C and/or D), and truck rental for a two man team; provision and completion of certain necessary paperwork:	$1,350.00	2 day	= $2700.00

DRUM HANDLING SERVICES

Profile #	Waste Description			
TBD-Stab/LF	Ceramic and Tungs. Sludge (AB2876)	$225.00	52 dr	= $11700.00
TBD-Incin	Graphite and Aluminum Scrap (AB2877)	$750.00	14 dr	= $10500.00
TBD-Incin	Max Vac Waste (AC9217)	$750.00	28 dr	= $21000.00
TBD-LF	Oven baghouse Waste (AC1219)	$150.00	2 dr	= $300.00
BE0503 - LF	Chromium Oxide	$150.00	88 dr	= $13200.00
BE0508 - RR	Window Cleaner	$125.00	2 dr	= $250.00
BE0509 - RR	Super Agiten	$185.00	12 dr	= $2220.00
BE0510 - RR	Thinner	$125.00	3 dr	= $375.00
BE0511 - RR	Oil	$155.00	14 dr	= $2170.00

WASTE APPROVAL FEES:

To be determined upon final approval by disposal sites and invoiced off the attached rate sheets.

TRANSPORTATION SERVICES:

-Transshipment/Storage (Flanders, NJ):	$35.00 x 127 drums	= WAIVED–NO CHARGE
-LTL Rate (Drums-Non Lab Pack):	$157.00 x 127 drums	= $19939.00
-Pick-Up Fee	$450.00/Pickup	= $450.00**
-Full Truckload transportation to Model City, NY:		
$4.25/per loaded mile x 432 miles = $1836.00/per load x 2 loads		= $3672.00

PROJECT TOTAL: $88476.00

* Note: Additional Time or materials required for the completion of this project will be addressed with a Change Order and billed off the attached Unit Pricing Summary and/or Schedule A Standard Rates. Pricing does not include the approval fees for newly generated profiles. Existing profiles which have expired will be recerted at NO CHARGE.

ASSUMPTIONS AND CONDITIONS

1.) The customer shall be responsible for all state, local, and federal taxes and fees, which are not included herein, for transportation, storage, treatment, and disposal of all waste materials covered in this agreement.

2.) CWM-Technical Services reserves the right to exclude from service, at a minimum: radioactives, explosives, and certain pressurized cylinders.

3.) Services rendered resulting from an increase in the scope of this project, and not covered in the project pricing summary, will be billed on a time and materials basis according to the latest version of the Schedule A price list and Unit Pricing Summary.

4.) This proposal and all attachments and exhibits are considered confidential and proprietary, and shall not be loaned, copied, distributed, or published, in whole or in part, or used for any purpose other for which they were intended, without prior written consent of CWM-Technical Services Division.

5.) Prices quoted above are effective for thirty (30) days from the date of this proposal.

6.) CWM-Technical Services will not be responsible for project delays beyond its control.

7.) Any permits which are required for on-site services are the responsibility of the client.

8.) Invoices submitted by CWM-Technical Services Division are payable within thirty (30) days from the date of invoice unless otherwise stated. Invoices not settled within 30 days are subject to a 1.5% per month service charge on the outstanding balance.

9.) Any waste which the disposal facility cannot receive, treat, store, process, handle or dispose of for any reason whatsoever is outside the scope of the contract, and CWM-Technical Services will have no obligation to handle such waste.

10) Waste chemicals must be located in a central area, and accessible.

11) Should you choose to issue a Purchase Order in addition to the execution of this document, you must indicate that the Purchase Order is for billing purposes only and that any preprinted terms and conditions found in the body of the Purchase Order are to be considered null and of no effect.

NOTES:

The above estimate is based upon the following:

(1) This proposal and all attachments and exhibits are considered confidential and proprietary and shall not be loaned, copied, distributed, or published, in whole or in part, or used for any purpose other than for which they were intended, without prior written consent of CWM.

(2) Pricing is firm for thirty (30) days following the date of the proposal.

(3) Invoices submitted by CWM-Technical Services Division are payable within thirty (30) days from the date of receipt unless otherwise stated. Invoices not settled within 30 days are subject to a 1.5% per month service charge on the outstanding balance.

(4) CWM will not be responsible for project delays that are beyond its direct control.

(5) Any waste which the disposal facility cannot receive, treat, store, process, handle or dispose of for any reason whatsoever is outside the scope of the contract and CWM Technical Services will have no obligation to receive, treat, store, process, handle or dispose of such waste.

(6) Generator is responsible for Federal, State and Local taxes which are not included in the transportation or disposal pricing.

(7) Acceptance at facilities noted via designated disposal methods.

(8) Any permits which are required for on-site services are the client's responsibility.

(9) Wastes for incineration may incur additional charges for TCLP analysis and other analysis, if performed by the designated disposal facility.

(10) Electricity and water required for the operation of equipment used by CWM shall be supplied by the customer. Otherwise, further equipment will be needed and the customer will be billed accordingly.

(11) Services rendered resulting from an increase in the scope of this project, and not covered in this Unit Pricing Summary, will be billed on a time and materials basis according to the latest version of the Schedule A Price List.

(12) Pricing will be verified upon receipt of approval and will include any applicable surcharges.

(13) Customer will provide information such as MSDS's and other product info. if available.

(14) Possible Surcharges:

- Drummed waste liquids for incineration containing >5% ash will be surcharged $.08/gal for each 1% over 5%. Drummed liquids containing >5% chlorine will be surcharged $.11/gal for each 1 % over 5%.
- $79.00 per drum for any waste overpacked in an 85 gallon overpack.
- $26.00/drum for any material received and/or overpacked in a 15-55 gal.
- $10.50 per drum for a 16 gallon plastic overpack.
- Solidified drums for incineration/fuels blending that cannot be processed will be returned.

CWM reserves the right to exclude from services, at a minimum, dioxin (and its derivatives), radioactives, and explosives.

Code	Waste description	Code	Waste description
U243	1-Propene, 1,1,2,3,3,3-hexachloro-		
U243	Hexachloropropene		
U244	Thioperoxydicarbonic diamide $[(H_2N)C(S)]_2S_2$, tetramethyl-		
U244	Thiram		
U246	Cyanogen bromide (CN)Br		
U247	Benzene, 1,1'-(2,2,2-trichloroethylidene)bis[4-methoxy-		
U247	Methoxychlor		
U248	2H-1-Benzopyran-2-one, 4-hydroxy-3-(3-oxo-1-phenyl-butyl)-, & salts, when present at concentrations of 0.3% or less		
U248	Warfarin, & salts, when present at concentrations of 0.3% or less		
U249	Zinc phosphide Zn_3P_2, when present at concentrations of 10% or less		
U328	Benzenamine, 2-methyl-		
U328	o-Toluidine		
U353	Benzenamine, 4-methyl-		
U353	p-Toluidine		
U359	Ethanol, 2-ethoxy-		
U359	Ethylene glycol monoethyl ether		

48-14-1 (4/96) -7a

INN 1596

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. Do not Staple.

Form Approved. OMB No. 2050-0039. Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. NYD 0 3 1 3 1 9 6 5 4 | Manifest Document No. 1 2 3 4 5

2. Page 1 of 1

Information in the shaded areas is not required by Federal Law.

A. State Manifest Document No. NYB 831234 6

B. Generator's ID SAME

3. Generator's Name and Mailing Address
[illegible] Prospect Ave, Hackensack, NY 11550
516 336-1337

4. Generator's Phone ( )

5. Transporter 1 (Company Name) Chemical Pollution Control, Inc.

6. US EPA ID Number NYD 0 8 7 8 5 4 2 3

C. State Transporter's ID XR4643

D. Transporter's Phone ( ) [illegible]

7. Transporter 2 (Company Name)

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone ( )

9. Designated Facility Name and Site Address
Chemical Pollution Control, Inc.
150 South Fourth Street
Bay Shore, NY 11706

10. US EPA ID Number NYD 0 8 7 8 5 4 2 3

G. State Facility's ID
Same

H. Facility's Phone
(516) 366-0333

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. HAZARDOUS WASTE LIQUID NOS 9 NA3082 PG III (F002)	001	DM	00030	G	EPA F002 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above

a 3375-9 1+57 | c | b | d Emergency contact 516-366-0333

K. Handling Codes for Wastes Listed Above

a R | c | b | d

15. Special Handling Instructions and Additional Information
(A) TRICHLOROTRIFLUOROETHANE - CUTTING OIL
ERG-171

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: CONSTANCE L. CONROY | Signature: Constance J Conroy | Mo. Day Year: 1 21 96

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: MICHAEL J SMITH | Signature: [illegible] | Mo. Day Year: 1 21 96

18. Transporter 2 (Acknowledgement or Receipt of Materials)
Printed/Typed Name | Signature | Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name: DAN CARR | Signature: [illegible] | Mo. Day Year: 1 24 96

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Dept. of Environmental Conservation (518) 457-7362.

NYB 831234 6

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

P2SUL002114

COPY 5 - Generator mailed by TSD facility

48-14-1 (4/96)–7a

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

Please print or type. Do not Staple.

P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2050-0039. Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. Manifest Document No.
N Y 0 2 3 3 3 1 3 6 5 1 1 2 3 4 6

2. Page 1 of 1

Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
Chemical Formulators
1101 Prospect Ave, Westbury, NY 11590
516 334-2337

4. Generator's Phone ( )

A. State Manifest Document No.
NY B 831234 6

B. Generator's ID
Same

5. Transporter 1 (Company Name)
Chemical Pollution Control, Inc.

6. US EPA ID Number
N Y D 9 8 2 3 5 4 2 9

C. State Transporter's ID
NY 4443

D. Transporter's Phone ( )

7. Transporter 2 (Company Name)

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone ( )

9. Designated Facility Name and Site Address
Chemical Pollution Control, Inc.
170 South Fourth Street
Ave Acres, NY 11706

10. US EPA ID Number
N Y D 0 8 8 0 1 6 4 1 9

G. State Facility's ID
Same

H. Facility's Phone
(516) 256-0333

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)

	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. HAZARDOUS WASTE LIQUID NOS 9 NA2082 PG III (Fuel)	001	DM	00030	G	EPA F002 STATE
b.					EPA STATE
c.					EPA STATE
d.					EPA STATE

J. Additional Descriptions for Materials listed Above
a 3325-9 1+57
b
c
d Emergency Response # 516 286-0332

K. Handling Codes for Wastes Listed Above
a R
b
c
d

15. Special Handling Instructions and Additional Information
A) TRICHLOROTRIFLUOROETHANE - Cutting Oil
EPA 171

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: CONSTANCE L. CINKY
Signature: Constance L Cinky
Mo. Day Year: 12 12 96

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: DANIEL J. GRAY
Signature: [signature]
Mo. Day Year: 12 12 96

18. Transporter 2 (Acknowledgement or Receipt of Materials)
Printed/Typed Name
Signature
Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name
Signature
Mo. Day Year

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Dept. of Environmental Conservation (518) 457-7362.

NY B 831234 6

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

CHEMICAL POLLUTION CONTROL, INC. OF NEW YORK - A 21ST CENTURY ENVIRONMENTAL MANAGEMENT COMPANY

NOTIFICATION FOR WASTES RESTRICTED FROM LAND DISPOSAL

Generator Name: [illegible] Manifest # [illegible] Line Item # (s) [illegible]

1) **Identify** by placing the line item number(s) in the corresponding box(es) which wastes are wastewaters or non-wastewaters according to the definition in 6 NYCRR 376.1(b)(1)(vi) Wastewater_____ Non-wastewater_____

2) **Identify** all of the NY State/USEPA waste codes* and subcategories that apply to this shipment, as defined by 6 NYCRR 371 / 6 NYCRR 376 / 40 CFR 261/40 CFR 268.

*For waste streams which carry the waste codes D001, D002 or D012 through D043, the Underlying Hazardous Constituents (UHC) found in 40 CFR 268.48 must be identified. Include a copy of the Underlying Hazardous Constituents (U.H.C.) Form or list the U.H.C. on this form for the waste stream. If the waste requires identification of the U.H.C. but none are present, place an 'X' in the space provided under 'No UHC'.
*For waste where the NY 376 regulations are more stringent include either a completed NY 376 attachment indentifying the constituents regulated under NY 376 or list the information in the section provided below.

Line Item	Waste Code	Description	No UHC	If NY 376 is more restrictive list the applicable treatment level or technology next to the applicable NY 376 section.		
[illegible]	[illegible]	[illegible]		376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)
				376.4(b)	376.4(c)	376.4(d)

3) **List the line item number next to the applicable category.**

[illegible] **A. RESTRICTED WASTE REQUIRES TREATMENT**
This waste must be treated to the applicable standards set forth in 6 NYCRR 376, 40 CFR 268.32 or RCRA 3004(d).

___ **B. RESTRICTED WASTE IS SUBJECT TO A VARIANCE**
This waste is subject to exemption from a prohibition on the type of land disposal utilized for the waste, such as a case-by-case extension under 268.5, an exemption under 268.6, or a nationwide capacity variance [see 268.7(a)(3)]. All variances are regulated under 6 NYCRR 376.1(a)(5).
Please list the date the waste is subject to the prohibitions_____

___ **C. LAB PACK QUALIFYING FOR ALTERNATIVE TREATMENT UNDER 6 NYCRR 376.4(C)/40 CFR 268.42(C)**
This waste contains wastes listed in 6 NYCRR 376, Appendix 38 and 39, as applicable.
"I certify under penalty of law that I personally have examined and am familiar with the waste and that the lab pack contains only wastes which have not been excluded under appendix IV to 40 CFR 268 or solid wastes not subject to regulation under 40 CFR 261. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."

4) **Identify** the line item(s) in the corresponding space(s) below for which attachments are included in this notification by writing in the line item number next to the applicable attachment.

_____U.H.C._____NY376_____ANALYSIS_____OTHER (SPECIFY)_____

Waste analysis is attached where available, otherwise, the information contained herein is based upon my thorough knowledge of the waste(s).
I hereby certify that I believe that the information I submitted is true, accurate and complete.

Signature [illegible] Title [illegible] Date [illegible]

(Rev. 5/95)

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
NEW YORK STATE
DIV OF SOLID & HAZARDOUS WASTE
MANIFEST SECTION
PO BOX 12820
ALBANY NY 12212

4a. Article Number
Z 024 624 286

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: *(Print Name)*

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature: *(Addressee or Agent)*
X

PS Form **3811**, December 1994 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 024 624 286

Receipt for Certified Mail
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

NEW YORK STATE DIV OF SOLID & HAZARDOUS WASTE
PO BOX 12820
ALBANY NY 12212

$

Postmark or Date

line over top of envelope to the right of the return address

CERTIFIED MAIL

Z 024 624 286

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
NEW YORK STATE
DIV OF SOLID & HAZARDOUS WASTE
MANIFEST SECTION
PO BOX 12820
ALBANY NY 12212

4a. Article Number
Z 024 624 286

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
12-18

5. Received By: *(Print Name)*

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature: *(Addressee or Agent)*
X

PS Form **3811**, December 1994 Domestic Return Receipt

Thank you for using Return Receipt Service.

PRESS HARD – You Are Writing Through Eight Copies
(See Reverse Side for Instructions)

48-14-1 (4/96)-7a

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

Please print or type. Do not Staple.

P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2050-0039. Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No.: NYD131318651 — Manifest Document No.: 1234 6

2. Page 1 of 1

Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
Sulzer Metco
1101 Prospect Ave, Westbury, NY 11590

4. Generator's Phone (516) 338-2337

A. State Manifest Document No.: NYB 831234 6

B. Generator's ID: SAME

5. Transporter 1 (Company Name): Chemical Pollution Control, Inc.

6. US EPA ID Number: NYD082785429

C. State Transporter's ID: XR4643

D. Transporter's Phone (516) 586-0333

7. Transporter 2 (Company Name)

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone ( )

9. Designated Facility Name and Site Address
Chemical Pollution Control, Inc.
120 South Fourth Street
Bay Shore, NY 11706

10. US EPA ID Number: NYD082785429

G. State Facility's ID: Same

H. Facility's Phone: (516) 586-0333

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. HAZARDOUS WASTE LIQUID NOS 9 NA3082 PG III (F002)	001	DM	00030	G	EPA F002 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
a 3375-Q 1.57
b
c
d

K. Handling Codes for Wastes Listed Above
a R
b
c
d

Emergency Response# 516-586-0333

15. Special Handling Instructions and Additional Information
A) TRICHLOROTRIFLUOROETHANE - CUTTING OIL
ERG 171

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: CONSTANCE L. CONROY — Signature: Constance J Conroy — Mo. Day Year: 12 12 96

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: MICHAEL J SMITH — Signature: M J Smith — Mo. Day Year: 12 12 96

18. Transporter 2 (Acknowledgement or Receipt of Materials)
Printed/Typed Name — Signature — Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name — Signature — Mo. Day Year

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Dept. of Environmental Conservation (518) 457-7362.

NYB 831234 6

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

P2SUL002118

PRESS HARD – You Are Writing Through Eight Copies
(See Reverse Side for Instructions)

48-14-1 (4/96)–7a

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

Please print or type. Do not Staple.

P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2050-0039. Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No.: NYD131318651 — Manifest Document No.: 1234 6

2. Page 1 of 1

Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
Sulzer Metco
1101 Prospect Ave, Westbury, NY 11590

4. Generator's Phone (516) 338-2337

A. State Manifest Document No.: NY B 831234 6

B. Generator's ID: SAME

5. Transporter 1 (Company Name): Chemical Pollution Control, Inc.

6. US EPA ID Number: NYD082785429

C. State Transporter's ID: XR4643

D. Transporter's Phone (516) 586-0333

7. Transporter 2 (Company Name)

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone ( )

9. Designated Facility Name and Site Address
Chemical Pollution Control, Inc.
120 South Fourth Street
Bay Shore, NY 11706

10. US EPA ID Number: NYD082785429

G. State Facility's ID: Same

H. Facility's Phone: (516) 586-0333

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. HAZARDOUS WASTE LIQUID NOS 9 NA3082 PG III (F002)	001	DM	00030	G	EPA F002 / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
a 3375-Q 1.57
b
c
d

K. Handling Codes for Wastes Listed Above
a R
b
c
d

Emergency Response# 516-586-0333

15. Special Handling Instructions and Additional Information
(A) TRICHLOROTRIFLUOROETHANE - CUTTING OIL
ERG 171

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: CONSTANCE L. CONROY — Signature: Constance J Conroy — Mo. Day Year: 12 12 96

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: MICHAEL J SMITH — Signature: M J Smith — Mo. Day Year: 12 12 96

18. Transporter 2 (Acknowledgement or Receipt of Materials)
Printed/Typed Name — Signature — Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name — Signature — Mo. Day Year

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Dept. of Environmental Conservation (518) 457-7362.

NY B 831234 6

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

P2SUL002119

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United States Environmental Protection Agency

FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER: 11590PRKNL1101P

Toxic Chemical, Category, or Generic Name: Cobalt Powder

WHERE TO SEND COMPLETED FORMS:

1. EPCRA Reporting Center
   P.O. Box 3348
   Merrifield, VA 22116-3348
   ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 93

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?

[ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [X] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official: Joe Macri, Manager Facilities and Transportation

Signature: JMacri

Date Signed: June 30, 1994

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: Metco Division Perkin-Elmer

TRI Facility ID Number: 11590PRKNL1101P

Street Address: 1101 Prospect Avenue

City: Westbury

County: Nassau

State: New York

Zip Code: 11590

Mailing Address (if different from street address):

City:

State:

Zip Code:

PUT LABEL HERE

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United States Environmental Protection Agency

EPA FORM R

PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Cobalt Powder

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check only one)	a. [ ] An entire facility	b. [X] Part of a facility
4.3	Technical Contact	Name: Joe Macri	Telephone Number (include area code): (516) 334-1300
4.4	Public Contact	Name: Joe Macri	Telephone Number (include area code): (516) 334-1300

4.5	SIC Code (4-digit)	a. 3542	b.	c.	d.	e.	f.

4.6	Latitude and Longitude	Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		075	09	50	027	53	16

4.7	Dun & Bradstreet Number(s) (9 digits)	a. 05-773-1663	b.
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. NYD131318651	b.
4.9	Facility NPDES Permit Number(s) (9 characters)	a. N/A	b.
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. N/A	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	[ ] NA Perkin-Elmer Corporation
5.2	Parent Company's Dun & Bradstreet Number	[ ] NA (9 digits) 00-118-4480

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Cobalt Powder

SECTION 1. TOXIC CHEMICAL IDENTITY

(Important: DO NOT complete this section if you complete Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	7440-48-4
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	Cobalt
1.3	Generic Chemical Name (Important: Complete **only** if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)
	N/A

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
	N/A

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1	Manufacture the toxic chemical:	a. ☐ Produce b. ☐ Import	If produce or import: c. ☐ For on-site use/processing d. ☐ For sale/distribution e. ☐ As a byproduct f. ☐ As an impurity
3.2	Process the toxic chemical:	a. ☐ As a reactant b. ☐ As a formulation component	c. ☐ As an article component d. ☐ Repackaging
3.3	Otherwise use the toxic chemical:	a. ☐ As a chemical processing aid b. ☐ As a manufacturing aid	c. ☒ Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	03	(Enter two-digit code from instruction package.)

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Cobalt Powder

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X] NA			
5.2	Stack or point air emissions	[ ] NA	B	C	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name N/A				
5.3.2	Stream or Water Body Name N/A				
5.3.3	Stream or Water Body Name N/A				
5.4	Underground injections on-site	[X] NA			
5.5	Releases to land on-site				
5.5.1	Landfill	[X] NA			
5.5.2	Land treatment/ application farming	[X] NA			
5.5.3	Surface impoundment	[X] NA			
5.5.4	Other disposal	[X] NA			

[ ] Check here only if additional Section 5.3 information is provided on page 5 of this form.

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

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United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Cobalt Powder

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3	Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__	Stream or Water Body Name			
	N/A			
5.3.__	Stream or Water Body Name			
	N/A			
5.3.__	Stream or Water Body Name			
	N/A			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)
N/A	

6.1.B POTW Name and Location Information

6.1.B.__ POTW Name		6.1.B.__ POTW Name	
N/A			
Street Address		Street Address	
City	County	City	County
State	Zip Code	State	Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ]
(example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

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United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 11590PRKNL1101P

Toxic Chemical, Category, or Generic Name: Cobalt Powder

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: Loni-Jo Metal Corporation

Street Address: 70 Kinkel Street

City: Westbury

County: Nassau

State: New York

Zip Code: 11590

Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. B	1. M	1. M 24
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: N/A

Street Address:

City:

County:

State:

Zip Code:

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Section 6.2 page this is, here. [ ] (example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

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United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Cobalt Powder

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] **Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.**

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b 1 2 3 4 5 6 7 8	7A.1c	7A.1d %	7A.1e Yes [ ] No [ ]
7A.2a	7A.2b 1 2 3 4 5 6 7 8	7A.2c	7A.2d %	7A.2e Yes [ ] No [ ]
7A.3a	7A.3b 1 2 3 4 5 6 7 8	7A.3c	7A.3d %	7A.3e Yes [ ] No [ ]
7A.4a	7A.4b 1 2 3 4 5 6 7 8	7A.4c	7A.4d %	7A.4e Yes [ ] No [ ]
7A.5a	7A.5b 1 2 3 4 5 6 7 8	7A.5c	7A.5d %	7A.5e Yes [ ] No [ ]

If additional copies of page 7 are attached, indicate the total number of pages in this box [ ] and indicate which page 7 this is, here. [ ] (example: 1, 2, 3, etc.)

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United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Cobalt Powder

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.**

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.**

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Chemical, Category, or Generic Name
Cobalt Powder

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

All quantity estimates can be reported using up to two significant figures.		Column A 1992 (pounds/year)	Column B 1993 (pounds/year)	Column C 1994 (pounds/year)	Column D 1995 (pounds/year)
8.1	Quantity released*	0	0	0	0
8.2	Quantity used for energy recovery on-site	0	0	0	0
8.3	Quantity used for energy recovery off-site	0	0	0	0
8.4	Quantity recycled on-site	0	0	0	0
8.5	Quantity recycled off-site	120	150	180	180
8.6	Quantity treated on-site	0	0	0	0
8.7	Quantity treated off-site	0	0	0	0
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	N/A			
8.9	Production ratio or activity index	.89			

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	W19	a. T04	b. T06	c.
8.10.2	W39	a. T04	b. T10	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

		YES	NO
8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)		X

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

(IMPORTANT: Type or print; read instructions before completing form)

Form Approved OMB Number: 2070-0093
Approval Expires: 11/92

EPA United States Environmental Protection Agency

FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER: 11590PRKNL1101P

Toxic Chemical, Category, or Generic Name: Nickel Powder

WHERE TO SEND COMPLETED FORMS:
1. EPCRA Reporting Center, P.O. Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

For EPA use only

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 93

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?
[ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [X] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official: Joe Macri, Manager Facilities and Transportation

Signature: JMacri

Date Signed: June 30, 1994

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: Metco Division Perkin-Elmer

TRI Facility ID Number: 11590PRKNL1101P

Street Address: 1101 Prospect Avenue

City: Westbury

County: Nassau

State: New York

Zip Code: 11590

Mailing Address (if different from street address):

City:

State:

Zip Code:

PUT LABEL HERE

EPA
United States Environmental Protection Agency

EPA FORM R

PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Nickel Powder

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check only one)	a. [ ] An entire facility	b. [X] Part of a facility
4.3	Technical Contact	Name: Joe Macri	Telephone Number (include area code): (516) 334-1300
4.4	Public Contact	Name: Joe Macri	Telephone Number (include area code): (516) 334-1300

4.5	SIC Code (4-digit)	a. 3542	b.	c.	d.	e.	f.

		Latitude			Longitude		
4.6	Latitude and Longitude	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		075	09	50	027	53	16

4.7	Dun & Bradstreet Number(s) (9 digits)	a. 05-773-1663	b.
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. NYD131318651	b.
4.9	Facility NPDES Permit Number(s) (9 characters)	a. N/A	b.
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. N/A	b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	[ ] NA Perkin-Elmer Corporation
5.2	Parent Company's Dun & Bradstreet Number	[ ] NA (9 digits) 00-118-4480

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Nickel Powder

SECTION 1. TOXIC CHEMICAL IDENTITY

(Important: DO NOT complete this section if you complete Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	7440-02-0
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	Nickel
1.3	Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)
	N/A

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
	N/A

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1	Manufacture the toxic chemical:	a. ☐ Produce b. ☐ Import	If produce or import: c. ☐ For on-site use/processing d. ☐ For sale/distribution e. ☐ As a byproduct f. ☐ As an impurity
3.2	Process the toxic chemical:	a. ☐ As a reactant b. ☐ As a formulation component	c. ☐ As an article component d. ☐ Repackaging
3.3	Otherwise use the toxic chemical:	a. ☐ As a chemical processing aid b. ☐ As a manufacturing aid	c. ☒ Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	04	(Enter two-digit code from instruction package.)

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Nickel Powder

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X] NA			
5.2	Stack or point air emissions	[ ] NA	C	C	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name N/A				
5.3.2	Stream or Water Body Name N/A				
5.3.3	Stream or Water Body Name N/A				
5.4	Underground injections on-site	[X] NA			
5.5	Releases to land on-site				
5.5.1	Landfill	[X] NA			
5.5.2	Land treatment/ application farming	[X] NA			
5.5.3	Surface impoundment	[X] NA			
5.5.4	Other disposal	[X] NA			

[ ] Check here only if additional Section 5.3 information is provided on page 5 of this form.

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Nickel Powder

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3 Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__ Stream or Water Body Name N/A			
5.3.__ Stream or Water Body Name N/A			
5.3.__ Stream or Water Body Name N/A			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)
N/A	

6.1.B POTW Name and Location Information

6.1.B.__ POTW Name		6.1.B.__ POTW Name	
N/A			
Street Address		Street Address	
City	County	City	County
State	Zip Code	State	Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ]
(example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pound
C = 500 - 999 pounds.

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United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 11590PRKNL1101P

Toxic Chemical, Category, or Generic Name: Nickel Powder

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: Loni-Jo Metal Corporation

Street Address: 70 Kinkel Street

City: Westbury

County: Nassau

State: New York

Zip Code: 11590

Is location under control of reporting facility or parent company? [ ] Yes [X] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 3700	1. M	1. M 24
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: N/A

Street Address:

City:

County:

State:

Zip Code:

Is location under control of reporting facility or parent company? [ ] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Section 6.2 page this is, here. [ ] (example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounc

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Nickel Powder

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]								c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b	1		2		3		4	7A.1c	7A.1d	7A.1e
	5		6		7		8			%	Yes [ ] No [ ]
7A.2a	7A.2b	1		2		3		4	7A.2c	7A.2d	7A.2e
	5		6		7		8			%	Yes [ ] No [ ]
7A.3a	7A.3b	1		2		3		4	7A.3c	7A.3d	7A.3e
	5		6		7		8			%	Yes [ ] No [ ]
7A.4a	7A.4b	1		2		3		4	7A.4c	7A.4d	7A.4e
	5		6		7		8			%	Yes [ ] No [ ]
7A.5a	7A.5b	1		2		3		4	7A.5c	7A.5d	7A.5e
	5		6		7		8			%	Yes [ ] No [ ]

If additional copies of page 7 are attached, indicate the total number of pages in this box [ ] and indicate which page 7 this is, here. [ ] (example: 1, 2, 3, etc.)

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER: 11590PRKNL1101P

Toxic Chemical, Category, or Generic Name: Nickel Powder

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.**

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] **Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.**

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Chemical, Category, or Generic Name
Nickel Powder

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

All quantity estimates can be reported using up to two significant figures.		Column A 1992 (pounds/year)	Column B 1993 (pounds/year)	Column C 1994 (pounds/year)	Column D 1995 (pounds/year)
8.1	Quantity released*	0	0	0	0
8.2	Quantity used for energy recovery on-site	0	0	0	0
8.3	Quantity used for energy recovery off-site	0	0	0	0
8.4	Quantity recycled on-site	0	0	0	0
8.5	Quantity recycled off-site	3000	3700	4000	4000
8.6	Quantity treated on-site	0	0	0	0
8.7	Quantity treated off-site	0	0	0	0
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	N/A			
8.9	Production ratio or activity index	.89			

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	W19	a. T04	b. T06	c.
8.10.2	W39	a. T04	b. T10	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)	YES [ ]	NO [X]

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0084
RUN DATE: 08/01/88

C 282200 1828 00039 W I
LOCATION FAC EP

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/07/87
(5) 11590	(10) REP: A TEICHER 334-1300	PRIOR CO ISSUE DATE 11/16/87
		PRIOR CO EXPIRATION DATE 11/15/88

FACILITY EMIS-CLASS / PGM-CODE: A2 POINT EMIS-CLASS / PGM-CODE:

EMISSION POINT 00039
(41)UTM-E: 622.2 KM. (42)STACK HEIGHT: 30 FT. (43)EXIT VELOCITY: 50.00 FT/SEC (44)SIC: 3569 (45)AGENCY-CODE-1: C (COUNTY)
(46)UTM-N: 513.4 KM. (47)HT ABV STRUC: 10 FT. (48)EXIT FLOW: 1975.00 ACFM (49)CO FEE: $25.00 (50)AGENCY-CODE-2: C (COUNTY)
(51)GRND ELEV: 139 FT. (52)STK DIAM: 11 IN. (53)EXIT TEMP: 72 DEGR F (54)CO CONDITIONS:

UNIT I
(55)HOURS/DAY: 1.0 (56)DAYS/YEAR: 200 (57)% OP BY SEASON: 25 25 25 25 (58)SOURCE CODE: 1303 SPRAYING (OTHER THAN
(59)BLDG: (60)FLOOR NAME: (61)RULE 1: 212.00 (62)RULE 2:

PROCESS/UNIT DESCRIPTION (72)DESCRIPTION 1. SPRAYING OF METAL WIRES & POWDERS FOR TESTING
2. PURPOSES OF EQUIPMENT & OR WIRES OR POWDERS

CONTROL EQUIPMENT (73)TYPE: 012 IMPINGEMENT PLATE (74)MFG: UNITED SWIRL ORIFICE SCRUBBERS STM 25 (75)ID: 01 (76)DATE INSTALLED: 06/72
(77)DISPOSAL METHOD: 09 OTHER (78)USEFUL LIFE: 20 YEARS

AIR CONTAMINANTS	CAS NUMBER	ENV RATING	EMISSIONS ACTUAL	UNIT	HOW DET	PERMISSIBLE	% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR	ANNUAL EMISSIONS (LBS/YEAR) ACTUAL	10x	PERMISSIBLE
TUNGSTEN W	(085) 07440-33-7	(086) C	(087) .001	(088) 15	(089) 06	(090) .001	(091)	(092) .001	(093) .200	(094) 0	(095) .200
MOLYBDENUM (8CI9CI)	(096) 07439-98-7	(097) C	(098) .001	(099) 01	(100) 06	(101) .001	(102) 90.0	(103) .001	(104) .200	(105) 0	(106) .200
ALUMINUM	(107) 07429-90-5	(108) C	(109) .001	(110) 01	(111) 06	(112) .001	(113) 90.0	(114) .001	(115) .200	(116) 0	(117) .200
ALUMINUM OXIDE	(118) 01344-28-1	(119) C	(120) .001	(121) 01	(122) 06	(123) .001	(124) 90.0	(125) .001	(126) .200	(127) 0	(128) .200
TITANIUM OXIDE	(129) 13463-67-7	(130) C	(131) .001	(132) 01	(133) 06	(134) .001	(135) 90.0	(136) .001	(137) .200	(138) 0	(139) .200
NICKEL	(140) 07440-02-0	(141) C	(142) .001	(143) 01	(144) 06	(145) .001	(146) 90.0	(147) .001	(148) .200	(149) 0	(150) .200

NOTE - SHOULD NEW EVIDENCE REQUIRE LOWER AMBIENT LEVELS BE MET FOR THE ABOVE UNDERSCORED CAS NUMBER(S) ,

THE SOURCE OWNER MAY BE REQUIRED TO REDUCE EMISSIONS.

SPECIAL CONDITIONS (151)CONDITION 1. AG1 COMPLIANCE

CONTINUED ON NEXT PAGE

Page 1 of 3 pages
Form Approved OMB No 2050-0072

Tier Two
EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: METCO DIVISION PERKIN-ELMER
Street Address: 1101 PROSPECT AVENUE
City: WESTBURY State: NY Zip: 11590
SIC Code: 3542 Dun & Bradstreet Number: 05-793-1663

FOR OFFICIAL USE ONLY — ID #: ; Date Received:

Owner/Operator Name

Name: PATRICK A. TIGHE Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY, N.Y. 11590

Emergency Contact

Name: PATRICK A. TIGHE Title: SUPERINTENDENT, FACILITIES COORDINATION
Phone: (516) 334-1300 24 Hr. Phone: (516) 798-1249

Name: Title:
Phone: ( ) 24 Hr. Phone: ( )

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19__

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory: Max. Daily Amount (code)	Inventory: Avg. Daily Amount (code)	Inventory: No. of Days On-site (days)	Storage Codes and Locations (Non-Confidential): Storage Code	Storage Locations
CAS 7440508; Trade Secret ☐; Chem. Name: COPPER POWDER; Check all that apply: Pure ☒, Mix ☒, Solid ☒, Liquid ☐, Gas ☐	Fire ☐; Sudden Release of Pressure ☐; Reactivity ☒; Immediate (acute) ☒; Delayed (chronic) ☒	03	03	365	N14	STOCK WAREHOUSE
CAS 71556; Trade Secret ☐; Chem. Name: 1,1,1 TRICHLORDETHANE; Check all that apply: Pure ☒, Mix ☒, Solid ☐, Liquid ☒, Gas ☐	Fire ☒; Sudden Release of Pressure ☐; Reactivity ☒; Immediate (acute) ☒; Delayed (chronic) ☒	02	02	365	F14	STOCK WAREHOUSE
CAS 108952; Trade Secret ☐; Chem. Name: PHENOL; Check all that apply: Pure ☒, Mix ☒, Solid ☐, Liquid ☒, Gas ☐	Fire ☒; Sudden Release of Pressure ☐; Reactivity ☒; Immediate (acute) ☒; Delayed (chronic) ☒	01	01	365	F14	STOCK WAREHOUSE

Certification *(Read and sign after completing all sections)*

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 responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

PATRICK A. TIGHE SUPERINTENDENT, FACILITIES COORDINATION

Name and official title of owner/operator OR owner/operator's authorized representative — Signature — Date signed

Optional Attachments *(Check one)*

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations

Page 2 of 3 pages
Form Approved OMB No. 2050-0072

Tier Two
EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY
Specific Information by Chemical

Facility Identification
Name: METCO DIVISION PERKIN-ELMER
Street Address: 1101 PROSPECT AVENUE
City: WESTBURY State: NY Zip: 11590
SIC Code: 3542 Dun & Bradstreet Number: 05-773-1663

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Phone: ( ) 24 Hr. Phone: ( )

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19__

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory: Max. Daily Amount (code)	Inventory: Avg. Daily Amount (code)	Inventory: No. of Days On-site (days)	Storage Codes and Locations (Non-Confidential): Storage Code	Storage Locations
CAS 7440025 Trade Secret ☐ Chem. Name: NICKEL POWDER Check all that apply: Pure ☒ Mix ☒ Solid ☒ Liquid ☐ Gas ☐	☐ Fire ☐ Sudden Release of Pressure ☒ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	04	04	365	N14	STOCK WAREHOUSE
CAS 7440484 Trade Secret ☐ Chem. Name: COBALT POWDER Check all that apply: Pure ☒ Mix ☒ Solid ☒ Liquid ☐ Gas ☐	☐ Fire ☐ Sudden Release of Pressure ☒ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	02	02	365	N14	STOCK WAREHOUSE
CAS 7440473 Trade Secret ☐ Chem. Name: CHROMIUM (III) POWDER Check all that apply: Pure ☒ Mix ☒ Solid ☒ Liquid ☐ Gas ☐	☐ Fire ☐ Sudden Release of Pressure ☒ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	04	04	365	N14	STOCK WAREHOUSE

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Page 3 of 3 pages
Form Approved OMB No 2050-0072

Tier Two
EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY
Specific Information by Chemical

Facility Identification
Name: METCO DIVISION PERKIN-ELMER
Street Address: 1101 PROSPECT AVENUE
City: WESTBURY State: NY Zip: 11590
SIC Code: 3542 Dun & Bradstreet Number: 05-773-1663

FOR OFFICIAL USE ONLY
ID #
Date Received

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Emergency Contact
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Phone: (516) 334-1300 24 Hr. Phone: (516) 798-1249
Name: Title:
Phone: ( ) 24 Hr. Phone: ( )

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19__

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory: Max. Daily Amount (code)	Inventory: Avg. Daily Amount (code)	Inventory: No. of Days On-site (days)	Storage Codes and Locations (Non-Confidential): Storage Code	Storage Locations
CAS 7429905 Trade Secret ☐ Chem. Name: ALUMINUM Check all that apply: ☒ Pure ☒ Mix ☒ Solid ☐ Liquid ☐ Gas	☐ Fire ☐ Sudden Release of Pressure ☒ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	03	03	365	N14	STOCK WAREHOUSE
CAS 13444281 Trade Secret ☐ Chem. Name: ALUMINUM OXIDE Check all that apply: ☒ Pure ☒ Mix ☒ Solid ☐ Liquid ☐ Gas	☐ Fire ☐ Sudden Release of Pressure ☒ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	03	03	365	N14	STOCK WAREHOUSE
CAS ☐ Trade Secret ☐ Chem. Name: Check all that apply: ☐ Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic)					

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Optional Attachments *(Check one)*
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Page 1 of 2 pages
Form Approved OMB No 2050-0072

Tier Two
EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY
Specific Information by Chemical

Facility Identification
Name: METCO DIVISION PERKIN-ELMER
Street Address: 225 MILLER PLACE
City: HICKSVILLE State: NY Zip: 11801
SIC Code: 3399 Dun & Brad Number: 05-773-1663

FOR OFFICIAL USE ONLY: ID #: ; Date Received:

Owner/Operator Name
Name: PATRICK A. TIGHE Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY N.Y. 11590

Emergency Contact
Name: PATRICK A. TIGHE Title: SUPERINTENDENT, FACILITIES COORDINATION
Phone: (516) 334-1300 24 Hr. Phone: (516) 798-1249
Name: Title:
Phone: ( ) 24 Hr. Phone: ( )

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 19__

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory: Max. Daily Amount (code)	Inventory: Avg. Daily Amount (code)	Inventory: No. of Days On-site (days)	Storage Codes (Non-Confidential): Storage Code	Storage Locations
CAS 7440025 Trade Secret ☐ Chem. Name: NICKEL POWDER Check all that apply: Pure ☒ Mix ☒ Solid ☒ Liquid ☐ Gas ☐	☐ Fire ☐ Sudden Release of Pressure ☒ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	04	04	365	D14 N14	WAREHOUSE PRODUCTION LINES
CAS 7440473 Trade Secret ☐ Chem. Name: CHROMIUM (III) POWDER Check all that apply: Pure ☒ Mix ☒ Solid ☒ Liquid ☐ Gas ☐	☐ Fire ☐ Sudden Release of Pressure ☒ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	03	03	365	D14 N14	WAREHOUSE PRODUCTION LINES
CAS 7440484 Trade Secret ☐ Chem. Name: COBALT POWDER Check all that apply: Pure ☒ Mix ☒ Solid ☒ Liquid ☐ Gas ☐	☐ Fire ☐ Sudden Release of Pressure ☒ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	03	03	365	D14 N14	WAREHOUSE PRODUCTION LINES

Certification *(Read and sign after completing all sections)*

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Page 2 of 2 pages
Form Approved OMB No. 2050-0072

Tier Two
EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY
Specific Information by Chemical

Facility Identification
Name: METCO DIVISION PERKIN-ELMER
Street Address: 220 HILLER PLACE
City: HICKSVILLE State: NY Zip: 11801
SIC Code: 3399 Dun & Bradstreet Number: 05-773-1663

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name
Name: PATRICK A. TIGHE Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY NY 11590

Emergency Contact
Name: PATRICK A. TIGHE Title: SUPERINTENDENT, FACILITIES COORDINATION
Phone: (516) 334-1300 24 Hr. Phone: (516) 798-1249
Name: Title:
Phone: ( ) 24 Hr. Phone: ( )

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19__

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory: Max. Daily Amount (code)	Inventory: Avg. Daily Amount (code)	Inventory: No. of Days On-site (days)	Storage Codes and Locations (Non-Confidential): Storage Code	Storage Locations
CAS 71556 Trade Secret ☐ Chem. Name: 1,1,1 TRICHLOROETHANE Check all that apply: Pure ☒ Mix ☐ Solid ☐ Liquid ☒ Gas ☐	Fire ☒ Sudden Release of Pressure ☐ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic) ☒	02	02	365	C15 D14	DEGREASING OPERATION
CAS 7429905 Trade Secret ☐ Chem. Name: ALUMINUM Check all that apply: Pure ☒ Mix ☒ Solid ☒ Liquid ☐ Gas ☐	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic) ☒	00	00	365	D14 N14	WAREHOUSE PRODUCTION LINES
CAS 1344281 Trade Secret ☐ Chem. Name: ALUMINUM OXIDE Check all that apply: Pure ☒ Mix ☒ Solid ☒ Liquid ☐ Gas ☐	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic) ☒	00	00	365	D14 N14	WAREHOUSE PRODUCTION LINES

Certification *(Read and sign after completing all sections)*

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 responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

PATRICK A. TIGHE SUPERINTENDENT, FACILITIES COORDINATION

Name and official title of owner/operator or owner/operator's authorized representative Signature Date signed

Optional Attachments *(Check one)*
☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations

Page 1 of 1 pages
Form Approved OMB No. 2050-0072

Tier Two
EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: METCO DIVISION PERKIN-ELMER
Street Address: 325 DUFFY AVENUE
City: HICKSVILLE State: NY Zip: 11801
SIC Code: 3542 Dun & Bradstreet Number: 05-773-1663

FOR OFFICIAL USE ONLY: ID #
Date Received

Owner/Operator Name

Name: PATRICK A. TIGHE Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY NY 11590

Emergency Contact

Name: PATRICK A. TIGHE Title: SUPERINTENDENT, FACILITIES COORDINATION
Phone: (516) 334-1300 24 Hr. Phone: (516) 798-1249
Name: Title:
Phone: ( ) 24 Hr. Phone: ( )

Important: Read all instructions before completing form

Reporting Period: From January 1 to December 31, 19__

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory: Max. Daily Amount (code)	Inventory: Avg. Daily Amount (code)	Inventory: No. of Days On-site (days)	Storage Codes and Locations (Non-Confidential): Storage Code	Storage Locations
CAS 71556 Trade Secret ☐ Chem. Name 1,1,1 TRICHLOROETHANE Check all that apply: ☒ Pure ☐ Mix ☐ Solid ☒ Liquid ☐ Gas	☒ Fire ☐ Sudden Release of Pressure ☒ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic)	02	02	365	C15 D14	DEGREASING PROCESS
CAS ☐ Trade Secret ☐ Chem. Name Check all that apply: ☐ Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic)					
CAS ☐ Trade Secret ☐ Chem. Name Check all that apply: ☐ Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas	☐ Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic)					

Certification *(Read and sign after completing all sections)*

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 responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

PATRICK A. TIGHE SUPERINTENDENT, FACILITIES COORDINATION

Name and official title of owner/operator or owner/operator's authorized representative Signature Date signed

Optional Attachments *(Check one)*

☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations

SULZER METCO

Sulzer Metco (US) Inc.
1101 Prospect Avenue
PO Box 1006
Westbury, NY 11590-0201
Phone: (516) 334-1300
Fax: (516) 338-2488

November 19, 1996

Mr. A. Sathianathan
HAECO
Hong Kong Aircraft Engineering Company Limited
60 Concorde Road
Hong Kong International Airport
Hong Kong

Subject: Supplier Environmental Audit

Dear Mr. Sathianathan:

Sulzer Metco is committed to the implementation of sound environmental protection policies and practices. In reply to your request, we are pleased to enclose the completed Supplier Environmental Audit Questionnaire.

Please call me if you have any questions or require clarification.

Sincerely,

Constance L. Conroy
Environment, Health and Safety
Phone: (516) 338-2337
FAX: (516) 338-2336

c: Robert Considine, Sulzer Metco
Laurence Miles, Sulzer Metco

Enclosure

HAECO

Hong Kong Aircraft Engineering Company Limited
60 Concorde Road Hong Kong International Airport Hong Kong
Telex 44664 HAECO HX SITA HKG/SXH Cables AIRENG
Fax (852) 3628394

SUPPLIER ENVIRONMENTAL AUDIT QUESTIONNAIRE

* * * * * * * * * * * *

REF : SPML015.05.95

A. Supplier Profile

Company Name Sulzer Metco (US) Inc.	Scope of Business
Contact Name Laurence Miles	Advanced Thermal Coatings - Materials,
Tel/Fax Number (516) 338-2374	Equipment, Processes and Technical Support

B. Environmental Issues

1. Does your company have an environmental policy? (if so, please enclose).
   See enclosure.
2. Is there an appointed person in your company who is responsible for environmental matters? (please specify his/her position and main duty).
   Constance L. Conroy, Environment, Health and Safety
3. Please describe briefly the major operations (with the help of process flow diagrams) undertaken by your company. Machining of parts and equipment, blending of ceramic and metal powders.
4. Have any environmental issues been taken into consideration in the manufacturing of products/provision of servicces? What are they? Company has a practiceto continually seek environmentally friendly materials for processes, such as degreasing agent
5. Does your company use any environmentally harmful substances (i.e. CFC etc) in your production process? No.
6. If yes, how do intend replacing with environmental friendly substances and when.
   N/A
7. Please describe briefly the types and quantities of pollutants generated (effluent, waste nosia and air). Please describe also the disposal methods of pollutants. Intense efforts to minimize waste have resulted in Small Quantity Generator Status in 3 of 4 facilities - seeking status in 4th facility. Waste streams generally recycled.
8. Have there been any violations of regulations or complaints on environmental issues?
   No.
9. Is there any monitoring of the pollutants generated (e.g. effluent, waste, air and noise) carried out by the company, regulatory authorities or by a third party? Yes and we meet all environmental standards of the community.
10. Has an environment audit or report been conducted by or on behalf of the company in the last 5 years. An environmental audit was conducted in 1994.

TRI FACILITY ID: 11590-PRKNL-1101P
DATE: 11/15/94

PERKIN-ELMER CORP. METCO DIV.
1101 PROSPECT AVE.
WESTBURY, NY 11590

R E L E A S E V A L U E R E P O R T

Document Control Nbr.	Chemical Name	CAS Number
13-93-07524987-0-NY	CHROMIUM	007440-47-3

5.1	Fugitive or non-point air emissions	NA
5.2	Stack or point air emissions	11 - 499
5.3.A	Discharges to water bodies NA	NA
5.4	Underground injections on-site	NA
5.5.1	Releases to landfill	NA
5.5.2	Releases to land treatment/application farming	NA
5.5.3	Releases to surface impoundment	NA
5.5.4	Releases to other land disposal	NA
6.2.01	Transfer to other off-site LONI-JO METAL CORP.	1,000
6.2.02	Transfer to other off-site	NA
6.1.A	Total quantity transferred to POTWs	NA
8.1.A	Quantity released	0
8.1.B	Quantity released	0
8.1.C	quantity released	0
8.1.D	Quantity released	0
8.2.A	Quantity used for energy recovery on-site	0
8.2.B	Quantity used for energy recovery on-site	0
8.2.C	Quantity used for energy recovery on-site	0
8.2.D	Quantity used for energy recovery on-site	0
8.3.A	Quantity used for energy recovery off-site	0
8.3.B	Quantity used for energy recovery off-site	0
8.3.C	Quantity used for energy recovery off-site	0
8.3.D	Quantity used for energy recovery off-site	0
8.4.A	Quantity recycled on-site	0
8.4.B	Quantity recycled on-site	0
8.4.C	Quantity recycled on-site	0
8.4.D	Quantity recycled on-site	0
8.5.A	Quantity recycled off-site	830
8.5.B	Quantity recycled off-site	1,000
8.5.C	Quantity recycled off-site	1,200
8.5.D	Quantity recycled off-site	1,200
8.6.A	Quantity treated on-site	0
8.6.B	Quantity treated on-site	0
8.6.C	Quantity treated on-site	0
8.6.D	Quantity treated on-site	0
8.7.A	Quantity treated off-site	0
8.7.B	Quantity treated off-site	0
8.7.C	Quantity treated off-site	0
8.7.D	Quantity treated off-site	0
8.8	Quantity released from catastrophic/remedial action	NA
8.9	Production ratio or activity index	.89

BÖWE
SYSTEC INC
99 SEAVIEW BOULEVARD
PORT WASHINGTON, NY 11050-4610
Sales: (516) 621-3300
Parts & Service: (516) 621-3374
Accounting: (516) 621-3453
Fax: (516) 621-3569

May 3, 1993

Mr. Jim Zanetti
METCO
325 Duffy Avenue
Hicksville, N.Y.

Dear Jim Zanetti,

As you may know, Bowe Systec, Inc. is the owner of the property located immediately adjacent to the east of the Metco facility (at Section 11, Block H, Lot 484). Both of our properties are shown on the enclosed tax map for reference and accuracy.

Recently, we have been directed by the New York State Department of Environmental Conservation (NYSDEC) to conduct a groundwater investigation in the area surrounding our facility. Based on the groundwater flow direction map (constructed by our hydrogeologist) in this area of Hicksville and the location of Metco's recharge basin, a temporary well must be drilled and installed on your property. The purpose of the temporary well is to conduct a subsurface sampling program to determine background conditions for our property. We therefore seek your written authorization to access the recharge basin on your property so that we may conduct the work as required by NYSDEC.

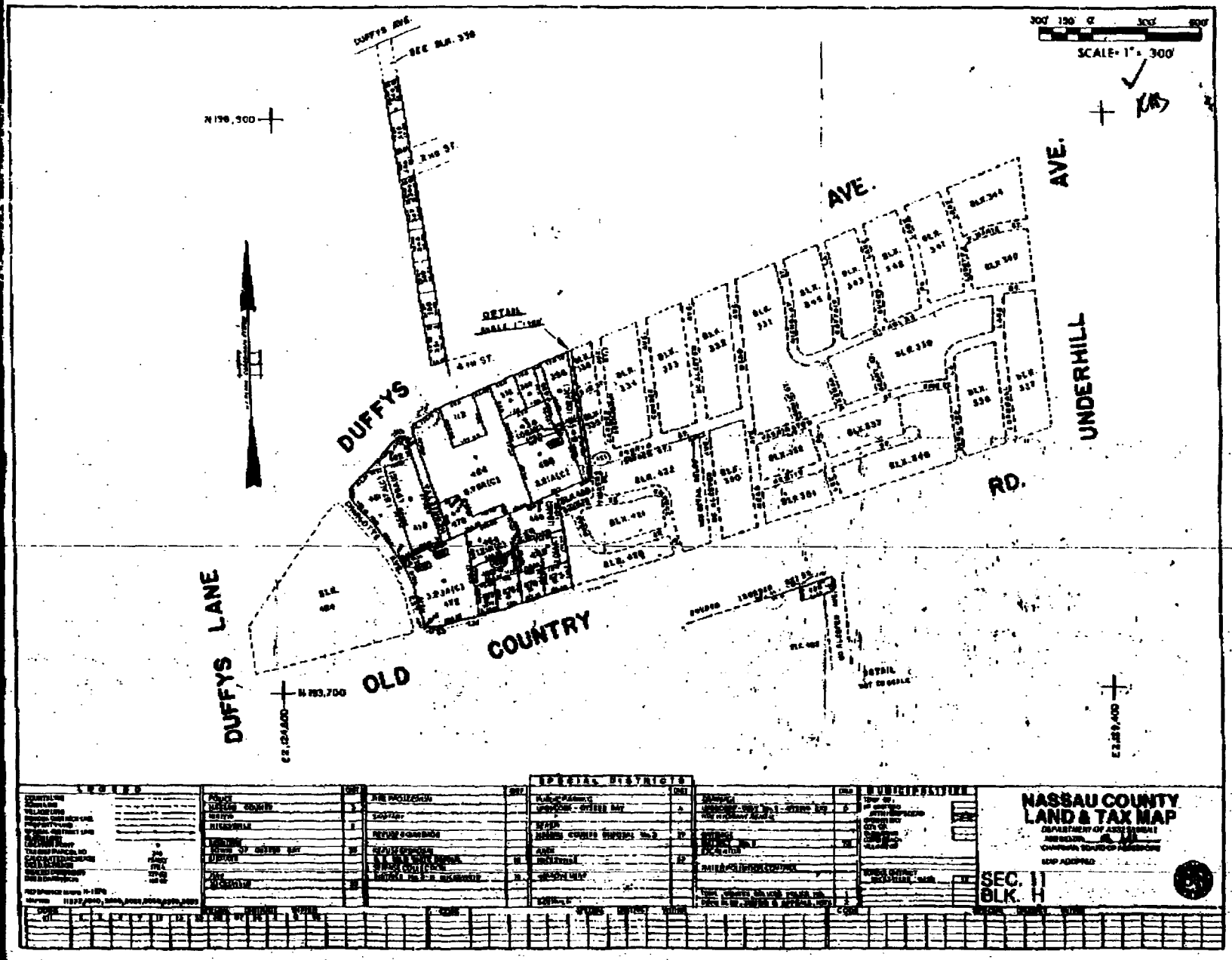
We will provide all necessary efforts in order to access the drilling location and will not obstruct your normal daily business operations while we are working. In addition, your site will also be restored to the pre-existing conditions (after our work) at no cost to you.

Since the importance of time has been stressed by NYSDEC, we ask that you provide us with your written authorization within the next week. Should you require any additional information from Bowe regarding this matter, please feel free to call me at any time.

Very truly yours,

Richard Reilly
National Service Director

Enclosure
cc: John Lombard
Harold Shaw, Esq.
Jamie Ascher, NYSDEC
Martin O. Klein, C.P.G.


SCALE: 1" = 300'
DUFFYS AVE.
DUFFYS LANE
OLD COUNTRY RD.
UNDERHILL AVE.
DETAIL
N 190,900
N 193,700
E 2,124,400
E 2,129,400
LEGEND
SPECIAL DISTRICTS
MUNICIPALITIES
NASSAU COUNTY
LAND & TAX MAP
SEC. 11
BLK. H

U.S. Environmental Protection Agency
Office of Prevention, Pesticides and Toxic Substances
Office of Pollution Prevention and Toxics
Information Management Division

JOSEPH D. REARDON
SULZER METCO INC.
1101 PROSPECT AVE.
WESTBURY, NY 11590

11/15/95

TRI ID #: 11590-PRKNL-1101P
Reporting Year: 1994

TOXIC RELEASE INVENTORY (TRI)

RELEASE VALUE REPORT

The attached reports list the chemical identities and corresponding release values for your Form R reports.

EPA wishes to represent accurately the data reported by your facility. We believe our data entry is of excellent quality; however, as a final quality measure, we ask that you verify the release values listed on this report against your own Form R records. If the data reported do not match those on the Forms R you submitted, please let us know within 21 days of receipt of this report, by following these instructions:

- On the attached report, mark through the erroneous value and write the correct value next to it;
- Return the corrected report to:

  The EPCRA Reporting Center
  P.O. Box 3348
  Merrifield, VA 22116-3348
  Attn: TRI RVR

If you do not find any errors in the report, no further action is required. Please note:

1) The report lists only those Form R reports which have completed our internal data quality checks. If any reports or revisions submitted by your facility are not listed, you will be receiving additional correspondence from us.

2) We observe certain conventions in the way your facility identification information is represented. For example, we list the main company name first, followed by the division name. We use standard abbreviations for certain words such as Corp. for Corporation and Hwy. for Highway. Please correct this type of information only if the actual data are incorrect.

3) Releases, off-site transfers, and other waste stream quantities are entered to the nearest pound. Thus amounts smaller than 0.5 will appear as 0.

Please do not use the reports to make changes to release values or any other data you reported incorrectly. If your original submission contains information you now believe to be incorrect, please resubmit a complete Form R with the corrected information. Follow the voluntary revision guidelines outlined in the TRI Reporting Form R and Instructions. If you wish to make the required corrections on magnetic media, please resubmit ONLY for the chemical being corrected. Within 21 days, send the revised complete Form R and a copy of this notice to the address above, 'Attn: Revision'. You must also send a copy of your corrected Form R to the same State organization to which you sent a copy of your original submission. EPA recommends that Government-Owned Contractor-Operated (GOCO) facilities send copies of their corrections to their associated Federal facilities.

If you have any questions about the information on this report, please call the Emergency Planning and Community Right-to-Know (EPCRA) Reporting Center at:

(703) 816-4445

Tell the operator that you are calling about the TRI RVR.

For a copy of the TRI Reporting Instructions, call the EPCRA Hotline at:

(800) 535-0202 (toll free, outside the D.C. Metro area)
(800) 553-7682 (TDD #)
(703) 412-9877 (D.C. Metro and Northern Virginia areas)

Thank you for assisting in our efforts to make the TRI data as accurate as possible.

/s/ Ruby N. Boyd

Ruby N. Boyd, Acting Chief
Toxic Release Inventory
Information Management Branch (7407)

Attachment(s)

TRI FACILITY ID: 11590-PRKNL-1101P
DATE: 11/15/95

SULZER METCO INC.
1101 PROSPECT AVE.
WESTBURY, NY 11590

R E L E A S E V A L U E R E P O R T

Document Control Nbr.	Chemical Name	CAS Number
13-94-08533985-9-NY	ALUMINUM (FUME OR DUST)	007429-90-5

6.1.A	Total quantity transferred to POTWs	NA
5.1	Fugitive or non-point air emissions	NA
5.2	Stack or point air emissions	1 - 10
5.3.A	Discharges to water bodies NA	NA
5.4	Underground injections on-site	NA
5.5.1	Releases to landfill	NA
5.5.2	Releases to land treatment/application farming	NA
5.5.3	Releases to surface impoundment	NA
5.5.4	Releases to other land disposal	NA
6.2.01	Transfer to other off-site CHEMICAL WASTE MANAGEMEN	11 - 499
6.2.02	Transfer to other off-site	NA
8.1.A	Quantity released	0
8.1.B	Quantity released	0
8.1.C	quantity released	0
8.1.D	Quantity released	0
8.2.A	Quantity used for energy recovery on-site	0
8.2.B	Quantity used for energy recovery on-site	0
8.2.C	Quantity used for energy recovery on-site	0
8.2.D	Quantity used for energy recovery on-site	0
8.3.A	Quantity used for energy recovery off-site	0
8.3.B	Quantity used for energy recovery off-site	0
8.3.C	Quantity used for energy recovery off-site	0
8.3.D	Quantity used for energy recovery off-site	0
8.4.A	Quantity recycled on-site	0
8.4.B	Quantity recycled on-site	0
8.4.C	Quantity recycled on-site	0
8.4.D	Quantity recycled on-site	0
8.5.A	Quantity recycled off-site	200
8.5.B	Quantity recycled off-site	200
8.5.C	Quantity recycled off-site	200
8.5.D	Quantity recycled off-site	200
8.6.A	Quantity treated on-site	0
8.6.B	Quantity treated on-site	0
8.6.C	Quantity treated on-site	0
8.6.D	Quantity treated on-site	0
8.7.A	Quantity treated off-site	0
8.7.B	Quantity treated off-site	0
8.7.C	Quantity treated off-site	0
8.7.D	Quantity treated off-site	0
8.8	Quantity released from catastrophic/remedial action	NA
8.9	Production ratio or activity index	.90

TRI FACILITY ID: 11590-PRKNL-1101P
DATE: 11/15/95

SULZER METCO INC.
1101 PROSPECT AVE.
WESTBURY, NY 11590

R E L E A S E V A L U E R E P O R T

Document Control Nbr.	Chemical Name	CAS Number
13-94-08533986-1-NY	CHROMIUM	007440-47-3

6.1.A	Total quantity transferred to POTWs	NA
5.1	Fugitive or non-point air emissions	NA
5.2	Stack or point air emissions	1 - 10
5.3.A	Discharges to water bodies NA	NA
5.4	Underground injections on-site	NA
5.5.1	Releases to landfill	NA
5.5.2	Releases to land treatment/application farming	NA
5.5.3	Releases to surface impoundment	NA
5.5.4	Releases to other land disposal	NA
6.2.01	Transfer to other off-site CHEMICAL WASTE MANAGEMEN	500 - 999
6.2.02	Transfer to other off-site	NA
8.1.A	Quantity released	3
8.1.B	Quantity released	3
8.1.C	quantity released	3
8.1.D	Quantity released	3
8.2.A	Quantity used for energy recovery on-site	0
8.2.B	Quantity used for energy recovery on-site	0
8.2.C	Quantity used for energy recovery on-site	0
8.2.D	Quantity used for energy recovery on-site	0
8.3.A	Quantity used for energy recovery off-site	0
8.3.B	Quantity used for energy recovery off-site	0
8.3.C	Quantity used for energy recovery off-site	0
8.3.D	Quantity used for energy recovery off-site	0
8.4.A	Quantity recycled on-site	0
8.4.B	Quantity recycled on-site	0
8.4.C	Quantity recycled on-site	0
8.4.D	Quantity recycled on-site	0
8.5.A	Quantity recycled off-site	1,000
8.5.B	Quantity recycled off-site	940
8.5.C	Quantity recycled off-site	950
8.5.D	Quantity recycled off-site	950
8.6.A	Quantity treated on-site	0
8.6.B	Quantity treated on-site	0
8.6.C	Quantity treated on-site	0
8.6.D	Quantity treated on-site	0
8.7.A	Quantity treated off-site	0
8.7.B	Quantity treated off-site	0
8.7.C	Quantity treated off-site	0
8.7.D	Quantity treated off-site	0
8.8	Quantity released from catastrophic/remedial action	NA
8.9	Production ratio or activity index	.90

TRI FACILITY ID: 11590-PRKNL-1101P
DATE: 11/15/95

SULZER METCO INC.
1101 PROSPECT AVE.
WESTBURY, NY 11590

R E L E A S E V A L U E R E P O R T

Document Control Nbr.	Chemical Name	CAS Number
13-94-08533987-3-NY	COBALT	007440-48-4

6.1.A	Total quantity transferred to POTWs	NA
5.1	Fugitive or non-point air emissions	NA
5.2	Stack or point air emissions	1 - 10
5.3.A	Discharges to water bodies NA	NA
5.4	Underground injections on-site	NA
5.5.1	Releases to landfill	NA
5.5.2	Releases to land treatment/application farming	NA
5.5.3	Releases to surface impoundment	NA
5.5.4	Releases to other land disposal	NA
6.2.01	Transfer to other off-site CHEMICAL WASTE MANAGEMEN	11 - 499
6.2.02	Transfer to other off-site	NA
8.1.A	Quantity released	2
8.1.B	Quantity released	2
8.1.C	quantity released	2
8.1.D	Quantity released	2
8.2.A	Quantity used for energy recovery on-site	0
8.2.B	Quantity used for energy recovery on-site	0
8.2.C	Quantity used for energy recovery on-site	0
8.2.D	Quantity used for energy recovery on-site	0
8.3.A	Quantity used for energy recovery off-site	0
8.3.B	Quantity used for energy recovery off-site	0
8.3.C	Quantity used for energy recovery off-site	0
8.3.D	Quantity used for energy recovery off-site	0
8.4.A	Quantity recycled on-site	0
8.4.B	Quantity recycled on-site	0
8.4.C	Quantity recycled on-site	0
8.4.D	Quantity recycled on-site	0
8.5.A	Quantity recycled off-site	150
8.5.B	Quantity recycled off-site	140
8.5.C	Quantity recycled off-site	140
8.5.D	Quantity recycled off-site	140
8.6.A	Quantity treated on-site	0
8.6.B	Quantity treated on-site	0
8.6.C	Quantity treated on-site	0
8.6.D	Quantity treated on-site	0
8.7.A	Quantity treated off-site	0
8.7.B	Quantity treated off-site	0
8.7.C	Quantity treated off-site	0
8.7.D	Quantity treated off-site	0
8.8	Quantity released from catastrophic/remedial action	NA
8.9	Production ratio or activity index	.90

TRI FACILITY ID: 11590-PRKNL-1101P
DATE: 11/15/95

SULZER METCO INC.
1101 PROSPECT AVE.
WESTBURY, NY 11590

R E L E A S E V A L U E R E P O R T

Document Control Nbr.	Chemical Name	CAS Number
13-94-08533988-5-NY	COPPER	007440-50-8

6.1.A	Total quantity transferred to POTWs	NA
5.1	Fugitive or non-point air emissions	NA
5.2	Stack or point air emissions	1 - 10
5.3.A	Discharges to water bodies NA	NA
5.4	Underground injections on-site	NA
5.5.1	Releases to landfill	NA
5.5.2	Releases to land treatment/application farming	NA
5.5.3	Releases to surface impoundment	NA
5.5.4	Releases to other land disposal	NA
6.2.01	Transfer to other off-site CHEMICAL WASTE MANAGEMEN	500 - 999
6.2.02	Transfer to other off-site	NA
8.1.A	Quantity released	2
8.1.B	Quantity released	2
8.1.C	quantity released	2
8.1.D	Quantity released	2
8.2.A	Quantity used for energy recovery on-site	0
8.2.B	Quantity used for energy recovery on-site	0
8.2.C	Quantity used for energy recovery on-site	0
8.2.D	Quantity used for energy recovery on-site	0
8.3.A	Quantity used for energy recovery off-site	0
8.3.B	Quantity used for energy recovery off-site	0
8.3.C	Quantity used for energy recovery off-site	0
8.3.D	Quantity used for energy recovery off-site	0
8.4.A	Quantity recycled on-site	0
8.4.B	Quantity recycled on-site	0
8.4.C	Quantity recycled on-site	0
8.4.D	Quantity recycled on-site	0
8.5.A	Quantity recycled off-site	1,000
8.5.B	Quantity recycled off-site	920
8.5.C	Quantity recycled off-site	920
8.5.D	Quantity recycled off-site	920
8.6.A	Quantity treated on-site	0
8.6.B	Quantity treated on-site	0
8.6.C	Quantity treated on-site	0
8.6.D	Quantity treated on-site	0
8.7.A	Quantity treated off-site	0
8.7.B	Quantity treated off-site	0
8.7.C	Quantity treated off-site	0
8.7.D	Quantity treated off-site	0
8.8	Quantity released from catastrophic/remedial action	NA
8.9	Production ratio or activity index	.90

TRI FACILITY ID: 11590-PRKNL-1101P
DATE: 11/15/95

SULZER METCO INC.
1101 PROSPECT AVE.
WESTBURY, NY 11590

R E L E A S E V A L U E R E P O R T

Document Control Nbr.	Chemical Name	CAS Number
13-94-08533989-7-NY	NICKEL	007440-02-0

6.1.A	Total quantity transferred to POTWs	NA
5.1	Fugitive or non-point air emissions	NA
5.2	Stack or point air emissions	11 - 499
5.3.A	Discharges to water bodies NA	NA
5.4	Underground injections on-site	NA
5.5.1	Releases to landfill	NA
5.5.2	Releases to land treatment/application farming	NA
5.5.3	Releases to surface impoundment	NA
5.5.4	Releases to other land disposal	NA
6.2.01	Transfer to other off-site CHEMICAL WASTE MANAGEMEN	3,500
6.2.02	Transfer to other off-site	NA
8.1.A	Quantity released	13
8.1.B	Quantity released	13
8.1.C	quantity released	13
8.1.D	Quantity released	13
8.2.A	Quantity used for energy recovery on-site	0
8.2.B	Quantity used for energy recovery on-site	0
8.2.C	Quantity used for energy recovery on-site	0
8.2.D	Quantity used for energy recovery on-site	0
8.3.A	Quantity used for energy recovery off-site	0
8.3.B	Quantity used for energy recovery off-site	0
8.3.C	Quantity used for energy recovery off-site	0
8.3.D	Quantity used for energy recovery off-site	0
8.4.A	Quantity recycled on-site	0
8.4.B	Quantity recycled on-site	0
8.4.C	Quantity recycled on-site	0
8.4.D	Quantity recycled on-site	0
8.5.A	Quantity recycled off-site	3,700
8.5.B	Quantity recycled off-site	3,500
8.5.C	Quantity recycled off-site	3,500
8.5.D	Quantity recycled off-site	3,500
8.6.A	Quantity treated on-site	0
8.6.B	Quantity treated on-site	0
8.6.C	Quantity treated on-site	0
8.6.D	Quantity treated on-site	0
8.7.A	Quantity treated off-site	0
8.7.B	Quantity treated off-site	0
8.7.C	Quantity treated off-site	0
8.7.D	Quantity treated off-site	0
8.8	Quantity released from catastrophic/remedial action	NA
8.9	Production ratio or activity index	.90

EXXON CHEMICAL

ACTREL® CLEANERS

Data Sheet
Rev. 93-6 (4/93)

ACTREL 3360L Cleaner

Properties	Sales Specifications
Appearance, ASTM D 4176	Bright and Clear
Aromatics Content, AM-S 140.31 (Mass %)	0.1 max
Color, Saybolt, ASTM D 156	30 min
Flash Point, ASTM D 56, °C	61 min
Specific Gravity @ 15.6°C, ASTM D 4052	0.76 - 0.77

40012

PERFORMANCE
PRODUCTS
GROUP

INDUSTRIAL CLEANING

EXXON CHEMICAL

Product Information
Rev. 1 (4/91)

ACTREL® 3360L

PHYSICAL AND CHEMICAL PROPERTIES

Aromatics Content, wt%	<0.1
Corrosivity to Metals	NIL
Density, ASTM D1250, lb/U.S. Gallon @ 60°F (kg/L @ 15°C)	6.4 (0.77)
Drying Time, Minutes	
Room Temperature, Forced Air Drying	26.5
38°C, Forced Air Drying	8.4
Flash Point, ASTM D56, °F (°C)	142 (61)
Halogen Content, wppm	<1
Odor	Very Low
Surface Tension, du Nuoy, dynes/cm @ 25°C	26
Solubility in Water, wt%	Negligible

DESCRIPTION

ACTREL products are hydrocarbon-based solvent formulations developed for precision and metal cleaning during the manufacture of original equipment and in the maintenance of this equipment. They meet the stringent performance, emissions and health requirements of modern industrial cleaning. ACTREL products can be recycled using filtration and/or distillation. For disposal, fuel substitution or incineration are preferred methods.

ACTREL products are specifically designed for liquid phase industrial cleaning processes operating at temperatures at least 15°C (27°F) below the flash point. Properly designed equipment is required to avoid the risks associated with flammability. Do not substitute other cleaning products nor utilize an alternate ACTREL grade without consultation with Exxon Chemical.

ACTREL 3360L is suitable for cleaning many types of petroleum-based oils and grimes from metal or plastic parts. Its flash point exceeds 140°F, in compliance with proposed new DOT regulations for combustible fluids. Cleaning can be carried out at either ambient or moderately elevated temperatures. Drying of cleaned parts is usually achieved by hot forced-air. ACTREL 3360L is characterized by a high Occupational Exposure Limit of 300 ppm and a very low odor.

Performance Products Group

This information relates only to the specific material designated and may not be valid for such material used in combination with any other materials or in any process. Such information is, to the best of our knowledge and belief, accurate and reliable as of the date compiled. However, no representation, warranty or guarantee is made as to its accuracy, reliability or completeness. It is the user's responsibility to satisfy himself as to the suitability and completeness of such information for his own particular use. We do not accept liability for any loss or damage that may occur from the use of this information nor do we offer any warranty against patent infringement. Exxon, Actrel and the Exxon Chemical emblem are all registered trademarks of Exxon Corporation.

EXXON CHEMICAL COMPANY
P.O. Box 3272, Houston, TX 77253-3272. For more information call: 1-800-578-0749. In Texas: 713-870-6065

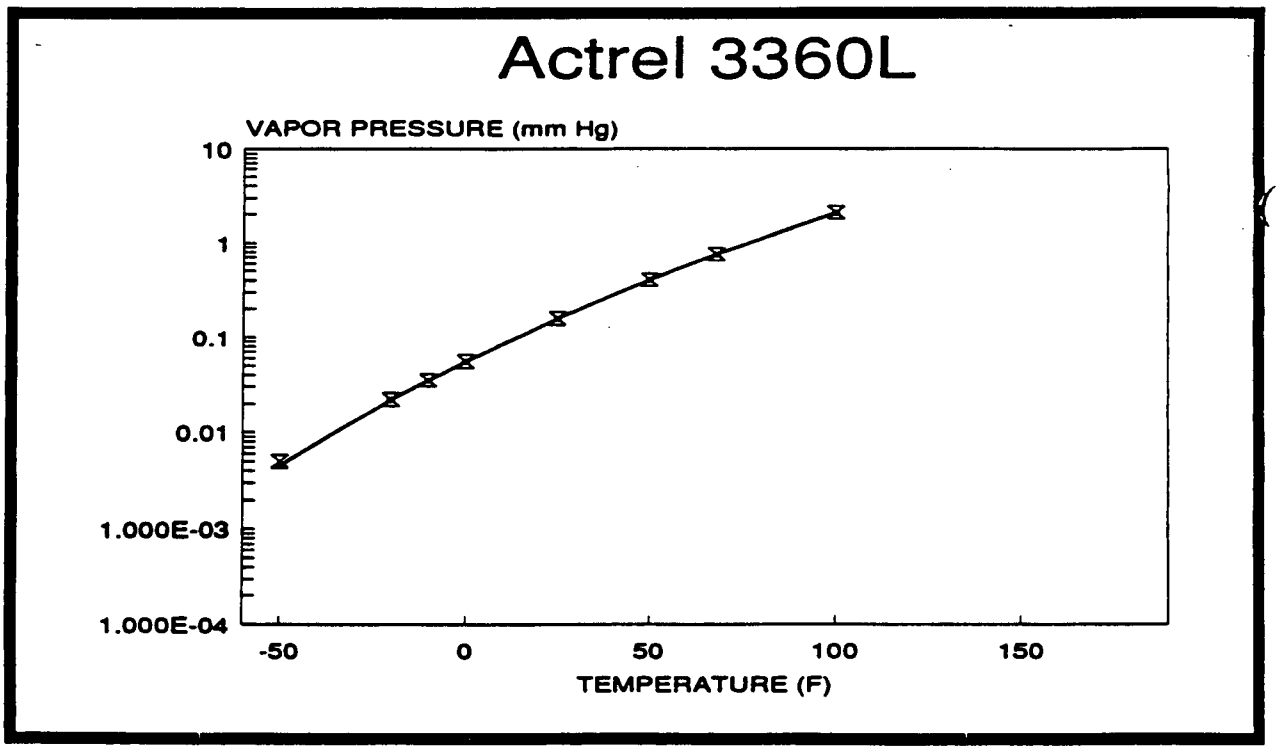
Actrel 3360L con't.

KEY REGULATORY INFORMATION

DOT Hazard class	Combustible Liquid
SARA Title III Section 313 Reportables	None
VOC Content,* lb/U.S. gal	6.2

SUPPLEMENTARY PHYSICAL PROPERTIES

Heat of Combustion, BTU/lb (KJ/kg)	19000 (44000)
Lower Explosive Limit, vol % at 25°C	0.6
Specific Heat, BTU/lb/°F (kJ/kg/°C)	0.49 (2.05) @ 60°F (16°C)



OTHER PHYSICAL PROPERTIES AVAILABLE ON REQUEST

*VOC content defined as material with vapor pressure >0.1mm Hg at standard conditions, as defined in many State regulations; eg. Michigan Air Pollution Act 348 (1965) as amended.

MATERIAL SAFETY DATA SHEET

EXXON CHEMICAL

EXXON CHEMICAL AMERICAS, P.O. BOX 3272, HOUSTON, TEXAS 77001
A Division of EXXON CHEMICAL COMPANY, A Division of EXXON CORPORATION

ACTREL 3360L CLEANER

DATE PREPARED: JAN 9, 1994
MSDS NO.: 92883637

SECTION 1 PRODUCT IDENTIFICATION & EMERGENCY INFORMATION

PRODUCT NAME: ACTREL 3360L Cleaner

CHEMICAL NAME:
Petroleum Hydrocarbon CAS 64742-48-9

CHEMICAL FAMILY:
Aliphatic Hydrocarbon

PRODUCT DESCRIPTION:
Clear colorless liquid.

EMERGENCY TELEPHONE NUMBERS:

EXXON CHEMICAL AMERICAS	**800-726-2015**
CHEMTREC	**800-424-9300**

SECTION 2 HAZARDOUS INGREDIENT INFORMATION

This product is hazardous as defined in 29 CFR1910.1200.

OSHA HAZARD
Combustible

For additional information see Section 3.

SECTION 3 HEALTH INFORMATION & PROTECTION

NATURE OF HAZARD

EYE CONTACT:
Slightly irritating but does not injure eye tissue.

SKIN CONTACT:
Low order of toxicity.
Frequent or prolonged contact may irritate and cause dermatitis.
Skin contact may aggravate an existing dermatitis condition.

INHALATION:
High vapor/aerosol concentrations (greater than approximately 1000 ppm) are irritating to the eyes and the respiratory tract, may cause headaches, dizziness, anesthesia, drowsiness, unconsciousness, and other central nervous system effects, including death.

INGESTION:
Small amounts of this product aspirated into the respiratory system during ingestion or vomiting may cause mild to severe pulmonary injury, possibly progressing to death.
Minimal toxicity.

FIRST AID

EYE CONTACT:
Flush eyes with large amounts of water until irritation subsides. If irritation persists, get medical attention.

SKIN CONTACT:
Flush with large amounts of water; use soap if available.
Remove grossly contaminated clothing, including shoes, and launder before reuse.

INHALATION:
Using proper respiratory protection, immediately remove the affected victim from exposure. Administer artificial respiration if breathing is stopped. Keep at rest. Call for prompt medical attention.

INGESTION:
If swallowed, DO NOT induce vomiting. Keep at rest. Get prompt medical attention.

WORKPLACE EXPOSURE LIMITS

EXXON RECOMMENDS THE FOLLOWING OCCUPATIONAL EXPOSURE LIMITS:
300 ppm total hydrocarbon based on composition.

PRECAUTIONS

SPECIAL PRECAUTIONS:
Health studies have shown that many petroleum hydrocarbons pose potential human health risks which may vary from person to person. As a precaution, exposure to liquids, vapors, mists or fumes should be minimized.

PERSONAL PROTECTION:
For open systems where contact is likely, wear safety glasses with side shields, long sleeves, and chemical resistant gloves.
Where contact may occur, wear safety glasses with side shields.
Where concentrations in air may exceed the limits given in this Section and engineering, work practice or other means of exposure reduction are not adequate, NIOSH/MSHA approved respirators may be necessary to prevent overexposure by inhalation.

VENTILATION:
The use of mechanical dilution ventilation is recommended whenever this product is used in a confined space, is heated above ambient temperatures, or is agitated.

SECTION 4 FIRE & EXPLOSION HAZARD

FLASHPOINT: 142 Deg F. METHOD: TCC D-56 NOTE: Typical
FLAMMABLE LIMITS: LEL: 1.3 UEL: 8.8
AUTOIGNITION TEMPERATURE: > 392 Deg F.

GENERAL HAZARD:
Combustible Liquid, can form combustible mixtures at temperatures at or above the flashpoint.
Static Discharge, material can accumulate static charges which can cause an incendiary electrical discharge .
"Empty" containers retain product residue (liquid and/or vapor) and can be dangerous. DO NOT PRESSURIZE, CUT, WELD, BRAZE, SOLDER, DRILL, GRIND, OR EXPOSE SUCH CONTAINERS TO HEAT, FLAME, SPARKS, STATIC ELECTRICITY, OR OTHER SOURCES OF IGNITION; THEY MAY EXPLODE AND CAUSE INJURY OR DEATH.
Empty drums should be completely drained, properly bunged and promptly returned to a drum reconditioner, or properly disposed of.

FIRE FIGHTING:
Use water spray to cool fire exposed surfaces and to protect personnel.
Isolate "fuel" supply from fire.

Use foam, dry chemical, or water spray to extinguish fire.
Avoid spraying water directly into storage containers due to danger of boilover.
This liquid is volatile and gives off invisible vapors. Either the liquid or vapor may settle in low areas or travel some distance along the ground or surface to ignition sources where they may ignite or explode.

HAZARDOUS COMBUSTION PRODUCTS:
No unusual

SECTION 5 SPILL CONTROL PROCEDURE

LAND SPILL:
Eliminate sources of ignition. Prevent additional discharge of material, if possible to do so without hazard. For small spills implement cleanup procedures; for large spills implement cleanup procedures and, if in public area, keep public away and advise authorities. Also, if this product is subject to CERCLA reporting (see Section 7) notify the National Response Center.
Prevent liquid from entering sewers, watercourses, or low areas. Contain spilled liquid with sand or earth. Do not use combustible materials such as sawdust.
Recover by pumping (use an explosion proof or hand pump) or with a suitable absorbent.
Consult an expert on disposal of recovered material and ensure conformity to local disposal regulations.

WATER SPILL:
Eliminate sources of ignition. Warn occupants and shipping in surrounding and downwind areas of fire and explosion hazard and request all to stay clear.
Remove from surface by skimming or with suitable adsorbents. If allowed by local authorities and environmental agencies, sinking and/or suitable dispersants may be used in non-confined waters.
Consult an expert on disposal of recovered material and ensure conformity to local disposal regulations.

SECTION 6 NOTES

HAZARD RATING SYSTEMS:
This information is for people trained in:
National Paint & Coatings Association's (NPCA)
Hazardous Materials Identification System (HMIS)
National Fire Protection Association (NFPA 704)
Identification of the Fire Hazards of Materials

	NPCA-HMIS	NFPA 704
HEALTH	1	1
FLAMMABILITY	2	2
REACTIVITY	0	0

KEY
4 = Severe
3 = Serious
2 = Moderate
1 = Slight
0 = Minimal

SECTION 7 REGULATORY INFORMATION

DEPARTMENT OF TRANSPORTATION (DOT):
DOT SHIPPING DESCRIPTION: NAPHTHA, SOLVENT, COMBUSTIBLE LIQUID, UN 1256, III

Note: In containers less than 119 gallons, this product is not regulated by the DOT unless the product contains a Reportable Quantity (RQ) which is less than the size of the container. In such cases, the DOT classification is Environmentally Hazardous Substance, Class 9.

FLASHPOINT: 142 Deg F. METHOD: TCC D-56 NOTE: Typical

TSCA:
This product is listed on the TSCA Inventory at CAS Registry Number 64742-48-9

CERCLA:
If this product is accidentally spilled, it is not subject to any special reporting under the requirements of the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA). We recommend you contact local authorities to determine if there may be other local reporting requirements.

SARA TITLE III:
Under the provisions of Title III, Sections 311/312 of the Superfund Amendments and Reauthorization Act, this product is classified into the following hazard categories:
Fire.
This information may be subject to the provisions of the Community Right-to-Know Reporting Requirements (40 CFR 370) if threshold quantity criteria are met.

SECTION 8 TYPICAL PHYSICAL & CHEMICAL PROPERTIES

SPECIFIC GRAVITY:
0.77 at 60

SOLUBILITY IN WATER, WT. % AT °F:
Less than 0.10

SP. GRAV. OF VAPOR, at 1 atm (Air=1):
5.90

EVAPORATION RATE, n-Bu Acetate=1:
0.0

VAPOR PRESSURE, mmHg at °F:
0.8 mmHg at 68 Estimated

VISCOSITY OF LIQUID, CST AT °F:
2 at 77

FREEZING/MELTING POINT, °F:
Less than 32

BOILING POINT, °F:
365 to 405 Approximate

SECTION 9 REACTIVITY DATA

STABILITY:
Stable

CONDITIONS TO AVOID INSTABILITY:
Not Applicable

HAZARDOUS POLYMERIZATION:
Will not occur

MATERIALS AND CONDITIONS TO AVOID INCOMPATIBILITY:
Strong oxidizing agents.
HAZARDOUS DECOMPOSITION PRODUCTS:
None

SECTION 10 STORAGE AND HANDLING

ELECTROSTATIC ACCUMULATION HAZARD:
Yes, use proper grounding procedure
STORAGE TEMPERATURE, °F:
Ambient
STORAGE/TRANSPORT PRESSURE, mmHg:
Atmospheric
LOADING/UNLOADING TEMPERATURE, °F:
Ambient
VISC. AT LOADING/UNLOADING TEMP., cST:
3

REVISION SUMMARY:
Since JANUARY 6,1994 this MSDS has been revised in Section(s):
8

REFERENCE NUMBER:	DATE PREPARED:	SUPERSEDES ISSUE DATE:
HDHA-C-25104	January 9,1994	January 6,1994

FOR ADDITIONAL PRODUCT INFORMATION, CONTACT YOUR TECHNICAL SALES REPRESENTATIVE
FOR ADDITIONAL HEALTH/SAFETY INFORMATION, CALL 713-870-6884

THIS INFORMATION RELATES TO THE SPECIFIC MATERIAL DESIGNATED AND MAY NOT BE VALID FOR SUCH MATERIAL USED IN COMBINATION WITH ANY OTHER MATERIALS OR IN ANY PROCESS. SUCH INFORMATION IS TO THE BEST OF OUR KNOWLEDGE AND BELIEF, ACCURATE AND RELIABLE AS OF THE DATE COMPILED. HOWEVER, NO REPRESENTATION, WARRANTY OR GUARANTEE IS MADE AS TO ITS ACCURACY, RELIABILITY OR COMPLETENESS. IT IS THE USER'S RESPONSIBILITY TO SATISFY HIMSELF AS TO THE SUITABILITY AND COMPLETENESS OF SUCH INFORMATION FOR HIS OWN PARTICULAR USE. WE DO NOT ACCEPT LIABILITY FOR ANY LOSS OR DAMAGE THAT MAY OCCUR FROM THE USE OF THIS INFORMATION NOR DO WE OFFER WARRANTY AGAINST PATENT INFRINGEMENT.

(IMPORTANT: Type or print; read instructions before completing form)

Form Approved OMB Number: 2070-0093
Approval Expires: 11/92

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FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER: 11590PRKNL1101P

Toxic Chemical, Category, or Generic Name: Nickel Powder

WHERE TO SEND COMPLETED FORMS:
1. EPCRA Reporting Center, P.O. Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

For EPA use only

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 94

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?
[ ] Yes (Answer question 2.2; Attach substantiation forms) [X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [X] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official: Joseph D. Reardon, Global Quality

Signature: Joseph D Reardon

Date Signed: July 20, 1995

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: Sulzer Metco (US) Inc.

TRI Facility ID Number: 11590PRKNL1101P

Street Address: 1101 Prospect Avenue

City: Westbury

County: Nassau

State: New York

Zip Code: 11590

Mailing Address (if different from street address):

City:

State:

Zip Code:

PUT LABEL HERE

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PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Nickel Powder

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check a or b; check c if applicable)	a. ☐ An entire facility	b. ☒ Part of a facility	c. ☐ A Federal facility			
4.3	Technical Contact	Name: Joseph D. Reardon			Telephone Number (include area code): (516) 334-1300		
4.4	Public Contact	Name: Joseph D. Reardon			Telephone Number (include area code): (516) 334-1300		
4.5	SIC Code (4-digit)	a. 3542	b.	c.	d.	e.	f.
4.6	Latitude and Longitude	Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		075	09	50	027	53	16
4.7	Dun & Bradstreet Number(s) (9 digits)	a. 15-208-4398					
		b.					
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. NYD131318651					
		b.					
4.9	Facility NPDES Permit Number(s) (9 characters)	a. N/A					
		b.					
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. N/A					
		b.					

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	☐ NA Sulzer Inc.
5.2	Parent Company's Dun & Bradstreet Number	☐ NA (9 digits) 00-182-6957

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PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Nickel Powder

SECTION 1. TOXIC CHEMICAL IDENTITY (Important: DO NOT complete this section if you complete Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	7440-02-0
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	Nickel
1.3	Generic Chemical Name (Important: Complete **only** if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)
	N/A

SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
	N/A

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY (Important: Check all that apply.)

3.1	Manufacture the toxic chemical:	a. ☐ Produce b. ☐ Import	If produce or import: c. ☐ For on-site use/processing d. ☐ For sale/distribution e. ☐ As a byproduct f. ☐ As an impurity
3.2	Process the toxic chemical:	a. ☐ As a reactant b. ☐ As a formulation component	c. ☐ As an article component d. ☐ Repackaging
3.3	Otherwise use the toxic chemical:	a. ☐ As a chemical processing aid b. ☐ As a manufacturing aid	c. ☒ Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	04 (Enter two-digit code from instruction package.)	

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Nickel Powder

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X] NA			
5.2	Stack or point air emissions	[ ] NA	B	C	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name: N/A				
5.3.2	Stream or Water Body Name: N/A				
5.3.3	Stream or Water Body Name: N/A				
5.4	Underground injections on-site	[X] NA			
5.5	Releases to land on-site				
5.5.1	Landfill	[X] NA			
5.5.2	Land treatment/ application farming	[X] NA			
5.5.3	Surface impoundment	[X] NA			
5.5.4	Other disposal	[X] NA			

[ ] Check here only if additional Section 5.3 information is provided on page 5 of this form.

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Nickel Powder

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3	Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__	Stream or Water Body Name			
	N/A			
5.3.__	Stream or Water Body Name			
	N/A			
5.3.__	Stream or Water Body Name			
	N/A			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)
N/A	

6.1.B POTW Name and Location Information

6.1.B.__ POTW Name		6.1.B.__ POTW Name	
N/A			
Street Address		Street Address	
City	County	City	County
State	Zip Code	State	Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ]
(example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Nickel Powder

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): NJD089216790

Off-Site Location Name: Chemical Waste Management of New Jersey, Inc.

Street Address: 100 Lister Avenue

City: Newark | County:

State: New Jersey | Zip Code: 07105 | Is location under control of reporting facility or parent company? [X] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1. 3500	1. M	1. M 72
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.__ Off-site EPA Identification Number (RCRA ID No.): N/A

Off-Site Location Name: N/A

Street Address:

City: | County:

State: | Zip Code: | Is location under control of reporting facility or parent company? [ ] Yes [ ] No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Section 6.2 page this is, here. [ ] (example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Nickel Powder

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

[X] **Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.**

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b 1 2 3 4 5 6 7 8	7A.1c	7A.1d %	7A.1e Yes [ ] No [ ]
7A.2a	7A.2b 1 2 3 4 5 6 7 8	7A.2c	7A.2d %	7A.2e Yes [ ] No [ ]
7A.3a	7A.3b 1 2 3 4 5 6 7 8	7A.3c	7A.3d %	7A.3e Yes [ ] No [ ]
7A.4a	7A.4b 1 2 3 4 5 6 7 8	7A.4c	7A.4d %	7A.4e Yes [ ] No [ ]
7A.5a	7A.5b 1 2 3 4 5 6 7 8	7A.5c	7A.5d %	7A.5e Yes [ ] No [ ]

If additional copies of page 7 are attached, indicate the total number of pages in this box [ ] and indicate which page 7 this is, here. [ ] (example: 1, 2, 3, etc.)

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PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Toxic Chemical, Category, or Generic Name
Nickel Powder

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [enter 3-character code(s)]

1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ]

6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ]

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11590PRKNL1101P
Chemical, Category, or Generic Name
Nickel Powder

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

All quantity estimates can be reported using up to two significant figures.		Column A Prior Year (pounds/year)	Column B Current Reporting Year (pounds/year)	Column C Following Year (pounds/year)	Column D Second Following Year (pounds/year)
8.1	Quantity released *	13	13	13	13
8.2	Quantity used for energy recovery on-site	0	0	0	0
8.3	Quantity used for energy recovery off-site	0	0	0	0
8.4	Quantity recycled on-site	0	0	0	0
8.5	Quantity recycled off-site	3700	3500	3500	3500
8.6	Quantity treated on-site	0	0	0	0
8.7	Quantity treated off-site	0	0	0	0
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)	N/A			
8.9	Production ratio or activity index	.90			

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.

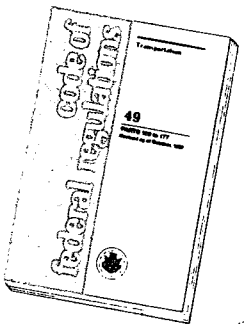
	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	N/A	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

		YES	NO
8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)		X

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

U.S. Department of Transportation

Research and Special Programs Administration



DOT CHART 9

Hazardous Materials Marking, Labeling & Placarding Guide

This Marking, Labeling and Placarding Guide will assist shippers, carriers, fire departments, police, emergency response personnel, and others in complying with, and enforcing the regulations governing the safe transport of hazardous materials by highway, rail, water and air.

The information and illustrations presented in this Guide are intended to serve as an introduction to regulations governing hazardous materials transportation. The Guide should be read in conjunction with the Hazardous Materials Regulations (HMR; 49 CFR 100-199). Published annually, and amended periodically, the HMR are the key to compliance and contain the information needed to comply with the requirements for the safe transport of hazardous materials.

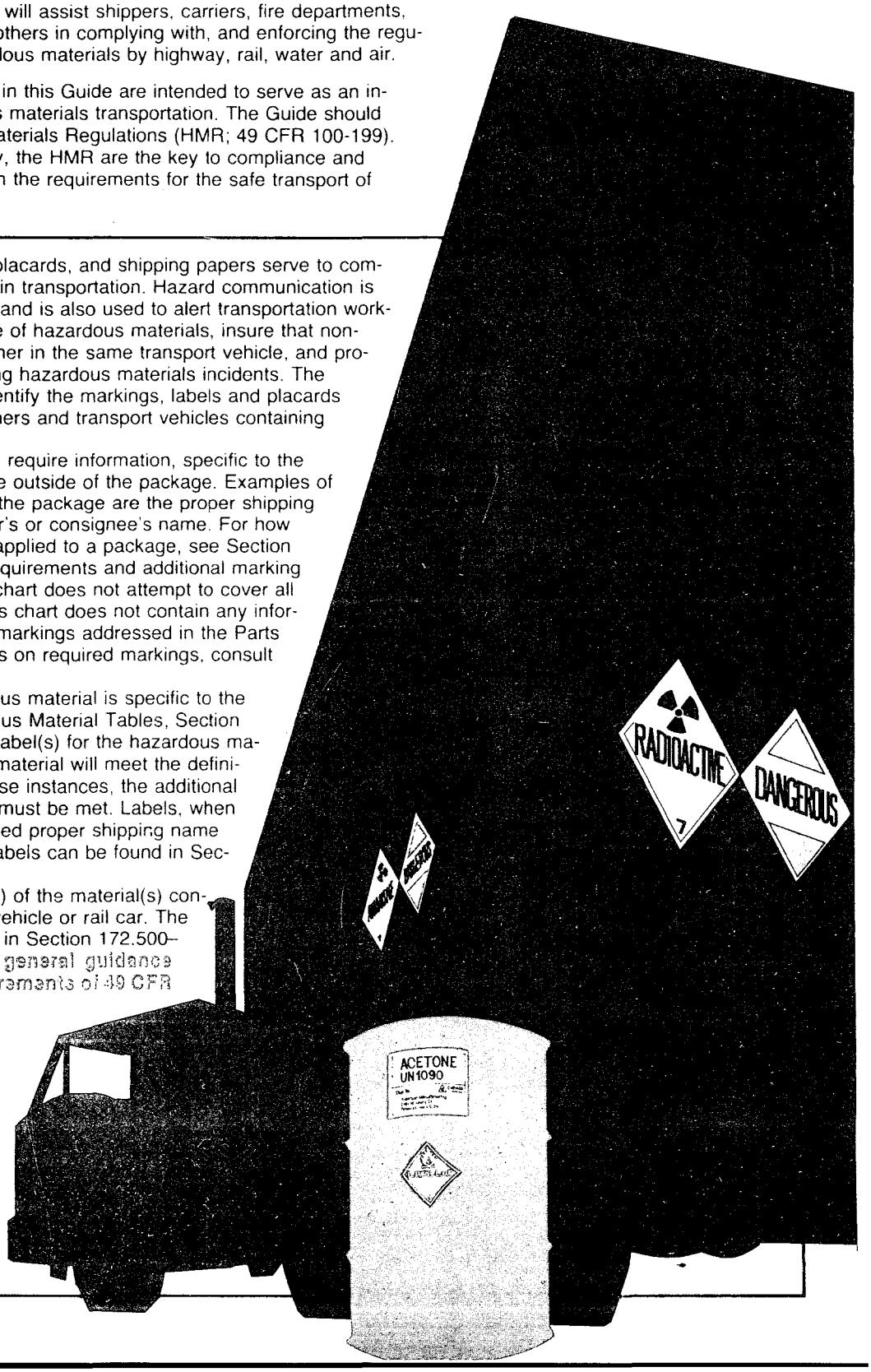
Hazardous materials markings, labels, placards, and shipping papers serve to communicate the hazards posed by materials in transportation. Hazard communication is the key to effective emergency response, and is also used to alert transportation workers and the general public of the presence of hazardous materials, insure that non-compatible materials are not loaded together in the same transport vehicle, and provide the necessary information for reporting hazardous materials incidents. The purpose of this Guide is to explain and identify the markings, labels and placards which appear on packages, freight containers and transport vehicles containing hazardous materials.

Marking regulations (Section 172.300) require information, specific to the hazardous material, to be "marked" on the outside of the package. Examples of the information required to be marked on the package are the proper shipping name, identification number and consignor's or consignee's name. For how markings required by the HMR are to be applied to a package, see Section 172.304. For exceptions to the marking requirements and additional marking requirements, see Section 172.300. This chart does not attempt to cover all the marking requirements. In particular this chart does not contain any information related to specification packaging markings addressed in the Parts 178 and 179 of 49 CFR. For further details on required markings, consult the appropriate sections in the HMR.

The Labeling of a package of hazardous material is specific to the hazard class of the material. The Hazardous Material Tables, Section 172.101 and 172.102, identify the proper label(s) for the hazardous material listed. In some cases, a hazardous material will meet the definition of two or more hazard classes. In these instances, the additional labeling requirements of Section 172.402 must be met. Labels, when required, must be placed next to the marked proper shipping name (Section 172.406). The requirements for labels can be found in Section 172.400–172.450.

Placards represent the hazard class(es) of the material(s) contained within the freight container, motor vehicle or rail car. The requirements for placarding are contained in Section 172.500–172.558. **NOTE: This document is for general guidance only and is not a substitute for the requirements of 49 CFR 100-199.**

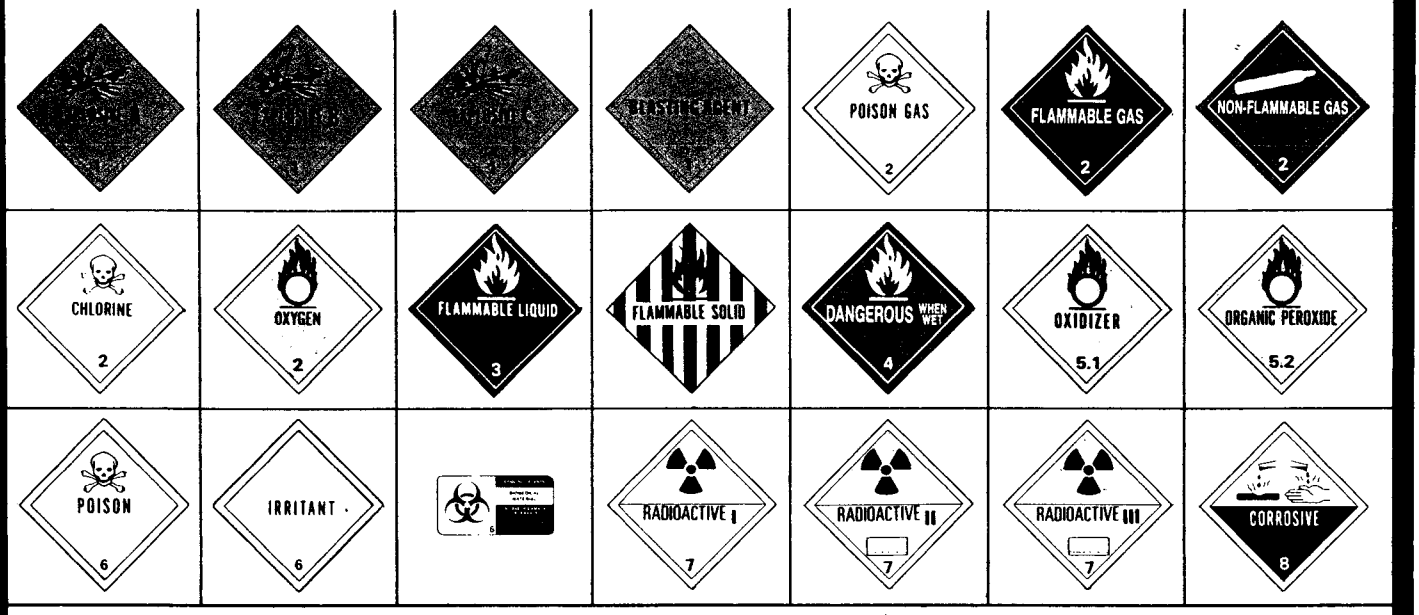
Response begins with identification.



A transport vehicle carrying 1 package of Radioactive Material labeled Yellow III, 500 pounds of Flammable Liquid and 600 pounds of Corrosive Materials would be placarded with both RADIOACTIVE and DANGEROUS placards.

Hazardous Materials Warning Labels

DOMESTIC LABELING



General Guidelines on Use of Labels

(CFR, Title 49, Transportation, Parts 100-177)

- Labels illustrated above are normally for *domestic shipments.* However, some air carriers *may* require the use of International Civil Aviation Organization (ICAO) labels.
- Domestic Warning Labels *may* display UN Class Number, Division Number (and Compatibility Group for Explosives only) [Sec. 172.407(g)].
- Any person who offers a hazardous material for transportation MUST label the package, if required [Sec. 172.400(a)].
- The Hazardous Materials Tables, Sec. 172.101 and 172.102, identify the proper label(s) for the hazardous materials listed.
- Label(s), when required, must be printed on or affixed to the surface of the package near the proper shipping name [Sec. 172.406(a)].
- When two or more different labels are required, display them next to each other [Sec. 172.406(c)].
- Labels may be affixed to packages (even when not required by regulations) provided each label represents a hazard of the material in the package [Sec. 172.401].

Check the Appropriate Regulations
Domestic or International Shipment

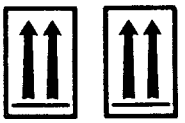
Additional Markings and Labels

HANDLING LABELS

Cargo Aircraft Only
172.402(b)

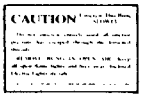
ORM-E

172.316



Package Orientation Markings

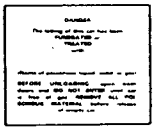
172.312(a)(c)



Bung Label
172.402(e)

INNER PACKAGES COMPLY WITH PRESCRIBED SPECIFICATIONS

173.25(a)(4)



Fumigation
173.9

EMPTY

173.427

Here are a few additional markings and labels pertaining to the transport of hazardous materials. The section number shown with each item refers to the appropriate section in the HMR. The Hazardous Materials Tables, Section 172.101 and 172.102, identify the proper shipping name, hazard class, identification number, required label(s) and packaging sections.

Poisonous Materials

172.505

INHALATION HAZARD

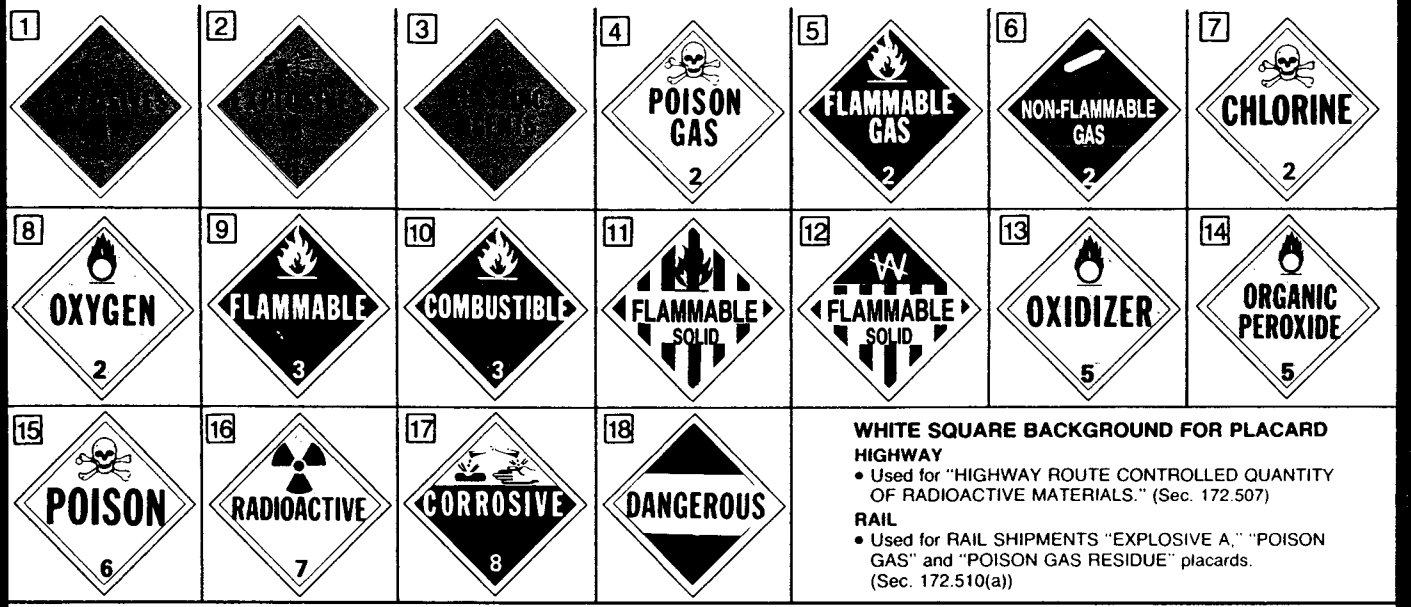
172.301

Materials which meet the inhalation toxicity criteria specified in Section 173.3a(b)(2), have additional "communication standards" prescribed by the HMR. First, the words "Poison-Inhalation Hazard" must be entered on the shipping paper, as required by Section 172.203(k)(4), for any primary capacity units with a capacity greater than one liter. Second, packages of 110 gallons or less capacity must be marked "Inhalation Hazard" in accordance with Section 172.301(a). Lastly, transport vehicles, freight containers and portable tanks subject to the shipping paper requirements contained in Section 172.203(k)(4) must be placarded with POISON placards in addition to the placards required by Section 172.504. For additional information and exceptions to these communication requirements, see the referenced sections in the HMR.

Keep a copy of the DOT Emergency Response Guidebook handy!

Hazardous Materials Warning Placards

DOMESTIC PLACARDING



WHITE SQUARE BACKGROUND FOR PLACARD

HIGHWAY

- Used for "HIGHWAY ROUTE CONTROLLED QUANTITY OF RADIOACTIVE MATERIALS." (Sec. 172.507)

RAIL

- Used for RAIL SHIPMENTS "EXPLOSIVE A," "POISON GAS" and "POISON GAS RESIDUE" placards. (Sec. 172.510(a))

Guidelines

(CFR, Title 49, Transportation, Parts 100-177)

- Placard any transport vehicle, freight container, or rail car containing any quantity of material listed in Table 1.
- Materials which are shipped in portable tanks, cargo tanks, or tank cars must be placarded when they contain any quantity of Table 1 and/or Table 2 material.
- Motor vehicles or freight containers containing packages which are subject to the "Poison-Inhalation Hazard" shipping paper description of Section 172.203(k)(4), must be placarded POISON in addition to the placards required by Section 172.504 (see Section 172.505).
- When the gross weight of all hazardous material covered in TABLE 2 is less than 1000 pounds, no placard is required on a transport vehicle or freight container.
- Placard freight containers 640 cubic feet or more containing any quantity of hazardous material classes listed in TABLES 1 and/or 2 when offered for transportation by air or water (see Section 172.512(a)). Under 640 cubic feet see Section 172.512(b).

TABLE 1

Hazard Classes	No.
Class A explosives	1
Class B explosives	2
Poison A	4
Flammable solid (DANGEROUS WHEN WET label only)	12
Radioactive material (YELLOW III label)	16
Radioactive material:	
Uranium hexafluoride fissile (Containing more than 1.0% U^{235})	16 & 17
Uranium hexafluoride, low-specific activity (Containing 1.0% or less U^{235})	16 & 17

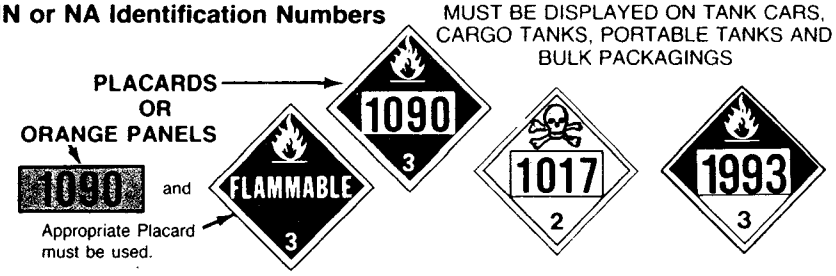
Note: For details on the use of Tables 1 and 2, see Sec. 172.504 (see footnotes at bottom of tables.)

TABLE 2

Hazard Classes	No.
Class C explosives	18
Blasting agent	3
Nonflammable gas	6
Nonflammable gas (Chlorine)	7
Nonflammable gas (Fluorine)	15
Nonflammable gas (Oxygen, cryogenic liquid)	8
Flammable gas	5
Combustible liquid	10
Flammable liquid	9
Flammable solid	11
Oxidizer	13
Organic peroxide	14
Poison B	15
Corrosive material	17
Irritating material	18

UN or NA Identification Numbers

MUST BE DISPLAYED ON TANK CARS, CARGO TANKS, PORTABLE TANKS AND BULK PACKAGINGS



- When hazardous materials are transported in Tank Cars (Section 172.330), Cargo Tanks (Section 172.328), Portable Tanks (Section 172.326) or Bulk Packagings (Section 172.331), UN or NA numbers must be displayed on placards, orange panels or, when authorized, plain white square-on-point configuration.
- UN (United Nations) or NA (North American) numbers are found in the Hazardous Materials Tables, Sections 172.101 and 172.102.
- Identification numbers may not be displayed on "POISON GAS," "RADIOACTIVE," or "EXPLOSIVE A," "EXPLOSIVE B," "BLASTING AGENTS," or "DANGEROUS" placards. (See Section 172.334.)
- In lieu of the orange panel, identification numbers may be placed on plain white square-on-point configuration when there is no placard specified for the hazard class (*e.g.*, ORM-A, B, C, D, or E) or where the identification number may not be displayed on the placard. See Section 172.336(b) for additional provisions and specifications.
- When the identification number is displayed on a placard the UN hazard class number must be displayed in the lower corner of each placard (see Section 172.332 (c)(3)).
- *Specifications of size and color of the Orange Panel* can be found in Section 172.332(b).
- NA numbers are used only in the USA and Canada.

Additional Placarding Guidelines

A transport vehicle or freight container containing two or more classes of material requiring different placards specified in Table 2 may be placarded DANGEROUS in place of the separate placards specified for each of those classes of material specified in Table 2. However, when 5000 pounds or more of one class of material is loaded therein at one loading facility, the placard specified for that class must be applied. This exception, provided in Section 172.504(b), does not apply to portable tanks, tank cars, or cargo tanks.

CAUTION: Check each shipment for compliance with the appropriate hazardous materials regulations — Proper Classification, Packaging, Marking, Labeling, Placarding, Documentation — prior to offering for shipment.

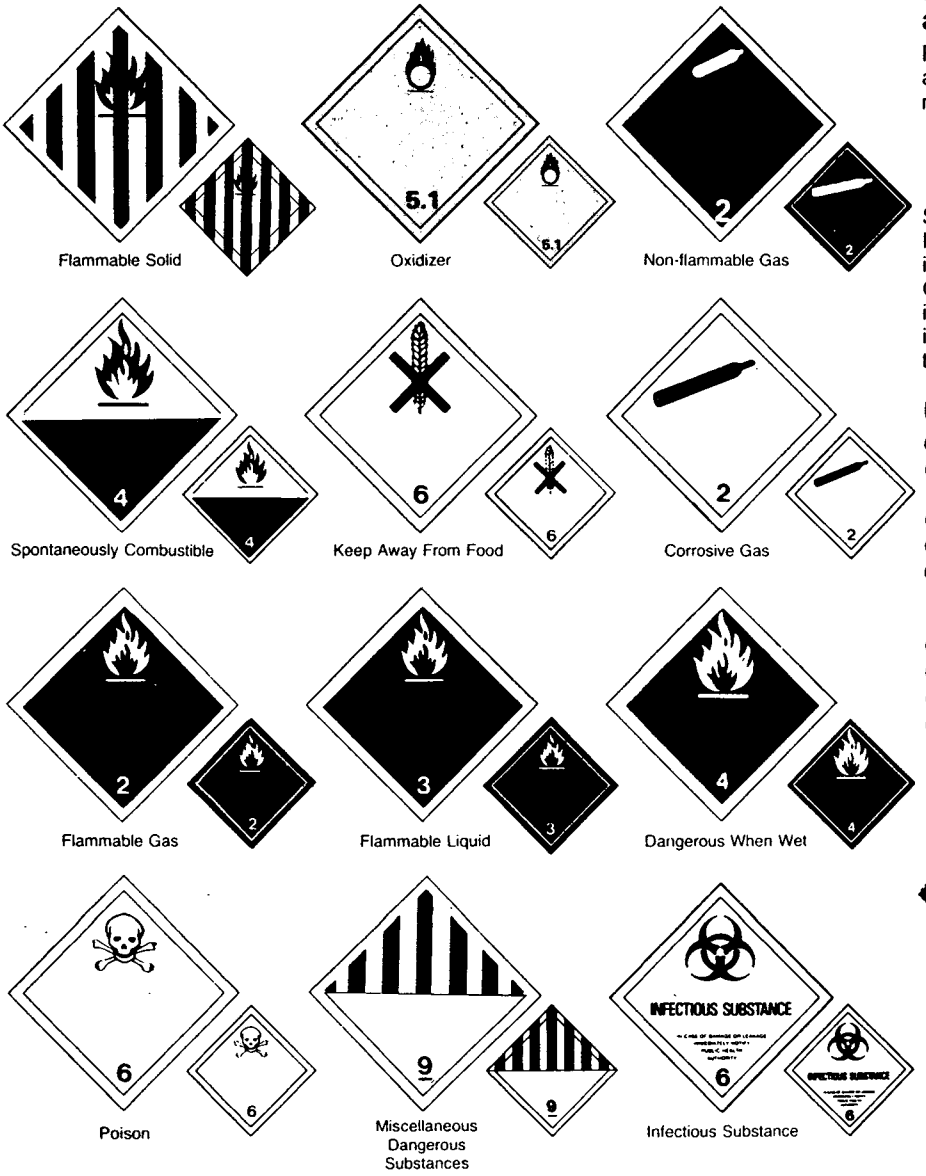
In an emergency, call Chemtrec, 1-800-424-9300

Examples of Canadian and International Placards and Labels

The shipment of hazardous materials internationally is governed by one or more regulatory bodies with regulations that may be similar to domestic regulations or radically different. Canada, for example, has adopted wordless placards and labels because their country is bilingual. Canada also requires cargo and rail tanks to use retro-reflective placarding. However, Canada and the United States have reciprocity regarding the use of wordless and worded placards and labels.

Several international organizations govern the transportation of hazardous materials according to the mode of transportation. If a shipment is going by water, the International Maritime Organization (IMO) has authority. The International Civil Aviation Organization (ICAO) is concerned about the safe shipment of dangerous goods (*i.e.*, hazardous materials) by air. Transport Canada (TC) is the Canadian counterpart to the U.S. Department of Transportation (DOT).

The United Nations publishes "Recommendations for the Transport of Dangerous Goods," a publication that is used by many nations of the world when promulgating regulations. Since the safe transport of hazardous materials is of concern to people everywhere, the work done by the United Nations is of critical importance world-wide. Labels and placards used in the Canadian, IMO, and ICAO regulations are generally based on the U.N. Recomendations, although Canada has some labels and placard designs that vary from the U.N. White borders are optional on International Placards.



Examples of Wordless Placards and Labels

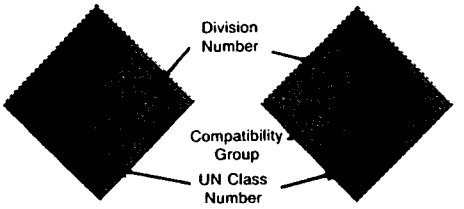
Pictured here are typical wordless placards and labels required for use in Canada and many other countries around the world.

Spontaneously Combustible and Keep Away From Food placards and labels are used internationally and in Canada. The Corrosive Gas placard and label are used exclusively in Canada. Most placards and labels used internationally are similar (color and symbols) to those required by DOT regulations.

UN Class Numbers

Class 1: Explosives
Class 2: Gases (compressed, liquified or dissolved under pressure
Class 3: Flammable liquids
Class 4: Flammable solids or substances
Class 5: Oxidizing substances. Division 5.1, Oxidizing substances or agents. Division 5.2, Organic peroxides.
Class 6: Poisonous and infectious substances
Class 7: Radioactive substances
Class 8: Corrosives
Class 9: Misc. dangerous substances

Examples of Explosive Labels



The Numerical Designation represents the Class or Division. Alphabetical Designation represents the Compatibility Group (for Explosives only). Division Numbers and Compatibility Group combinations can result in over 30 different "Explosives" labels (see IMDG Code/ICAO).

For complete details, refer to one or more of the following:

- Code of Federal Regulations, Title 49, Transportation. Parts 100-199. [All modes]
- International Civil Aviation Organization (ICAO) Technical Instructions for the Safe Transport of Dangerous Goods by Air [Air]
- International Maritime Organization (IMO) Dangerous Goods Code [Water]
- "Transportation of Dangerous Goods Regulations" of Transport Canada. [All Modes]

U.S. Department of Transportation
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EPA

OMB No. 2050-0075
Expires November 1989

National Survey of Hazardous Waste Generators

QUESTIONNAIRE GG

SOLVENT AND LIQUID ORGANIC RECOVERY FOR REUSE

RTI ID: 128108
EPA ID: NYD057731663

(RTI will place facility label here)

DUFFY [illegible]
325 DUFFY AVENUE
HICKSVILLE
NEW YORK

BOB HUBSCH
AL STASI
JOAN NEARY
PROVIDE INFO
11-07-89

Only those facilities that conducted solvent and liquid organic recovery for reuse onsite during 1986, that are currently conducting solvent and liquid organic recovery for reuse onsite, or that plan to conduct solvent and liquid organic recovery for reuse onsite before January 1992 need to complete this questionnaire.

Read the Instructions booklet BEFORE you answer this questionnaire. The Instructions contain example questions, lists of RCRA and other waste codes, and other important information you will need to consult as you complete the questions. When completing this questionnaire, refer to the schematic(s) you completed for Questionnaire GA, "General Facility Information."

This questionnaire asks about the **PROCESSES**—such as fractionation or batch still distillation—used onsite to recover for reuse solvents or liquid organics from hazardous waste. See Appendix A of the Instructions booklet for a list of solvent recovery processes. Additional questions about the units of equipment in which these processes occur appear separately in Questionnaire GI, "Tank Systems."

If the SAME equipment is sometimes used to comply with pretreatment standards or a National Pollutant Discharge Elimination System (NPDES) permit AND is sometimes used to recover for reuse solvents or liquid organics from hazardous waste, the processes must be reported separately. Report processes that are used to comply with pretreatment standards or a NPDES permit as wastewater treatment processes in Questionnaire GE. Solvent and liquid organic recovery for reuse processes should be reported in this questionnaire.

For the purposes of this study, this questionnaire uses the following definitions. Please keep them in mind as you answer the questions:

Unit = A single piece of equipment used to recover for reuse solvents or liquid organics from hazardous waste.

Process = One or more units acting together to perform a single operation, such as fractionation, to recover for reuse solvents or liquid organics from hazardous waste.

Throughout this questionnaire, the term solvent recovery is used to mean solvent and liquid organic recovery for reuse.

This questionnaire has two parts. The first part asks about processes that are **currently operating**, that are **temporarily not operating**, or that are **no longer operational** (but were during 1986) that are used to recover for reuse solvents or liquid organics from hazardous waste. The second part asks about processes that are **in place but not yet operating**, that are **being reconfigured to operate** (existing equipment), that are **being constructed to operate** (new equipment), or that are **planned** to recover for reuse solvents or liquid organics from hazardous waste onsite before January 1992. Special instructions in italics and enclosed in parentheses—*(Go to next question)*—will direct you to the questions that you should answer.

This questionnaire is designed with five sets of answer spaces for solvent recovery processes that are currently operating, that are temporarily not operating, or that are no longer operational (but were during 1986) and two sets of answer spaces for solvent recovery processes that are in place but not yet operating, that are being reconfigured to operate, that are being constructed to operate, or that are planned. These answer spaces appear in the gray columns opposite the questions. If you have more than this number, call the Survey Helpline and we will provide additional answer spaces in one or more answer booklets specially designed and labeled for your facility. DO NOT PHOTOCOPY THIS QUESTIONNAIRE TO CREATE MORE ANSWER SPACES.

If you wish to clarify or explain any answers you give, use the two lined pages labeled "FACILITY NOTES" at the end of this questionnaire. Beside each question that you wish to clarify or explain, write "see note." Then turn to the note pages, enter the question number, and write your comments beside that number. If a single note applies to more than one question, write the numbers of all the questions the note applies to.

If you need more answer spaces or have any questions about this survey or this questionnaire, call the Survey Helpline (1-800-635-8850).

1. **Does this facility have onsite any processes in any of the following categories to recover for reuse solvents or liquid organics from hazardous waste?**

   - **Currently operating to recover solvents or liquid organics from hazardous waste.**
   - **Temporarily not operating, that is, they have been used onsite in the past to recover solvents or liquid organics from hazardous waste AND they will be used onsite in the future to recover solvents or liquid organics from hazardous waste.**
   - **No longer operational, that is, they were used onsite DURING 1986 to recover solvents or liquid organics from hazardous waste BUT they will never be used onsite in the future to recover solvents or liquid organics from hazardous waste.**

   (Circle one)

   01 Yes *(Go to next question)*
   02 No *(Skip to Question 31 on page 24)*

2. What types of processes are operated onsite to recover for reuse solvents or liquid organics from hazardous waste?

Include in your answer processes that are currently operating, that are temporarily not operating, or that are no longer operational (but were during 1986) to recover solvents or liquid organics from hazardous waste onsite. Do not include processes that are used ONLY to manage nonhazardous waste.

Type and Number of Hazardous Waste Solvent Recovery Processes Onsite	*Indicate whether or not this facility has a process of each type onsite for the recovery of solvents or liquid organics from hazardous waste. If you circle 01, indicate how many processes of that type this facility has onsite.*		
Type of solvent recovery process	**Does this facility operate this type of process onsite for the recovery of solvents or liquid organics from hazardous waste?** *(Circle one)* **Yes**	**No**	**How many processes of this type does this facility have onsite?**
a. Fractionation: The separation and collection of organic compounds from hazardous waste using trays (also called plates) or packed beds. The primary purpose of such units is to obtain reusable overhead and/or bottom products. (If this process is used to comply with pretreatment standards or a National Pollutant Discharge Elimination System [NPDES] permit, it should be reported as a wastewater treatment process in Questionnaire GE.)	01	02	
b. Batch Still Distillation: The separation and collection of volatile organics from hazardous waste to recover a single overhead product. This process is a single equilibrium stage operation that contains no trays or packed beds and does not have a reflux stream. This process is generally used to recover solvents used (a) as tank cleaners by the paint industry; (b) as a photo resistant strip by the electronics industry; and (c) as degreasing agents in a variety of applications	01	02	01
c. Solvent Extraction: The separation of organic constituents in a liquid hazardous waste solution by contact with another immiscible liquid. Following extraction, one stream is recovered and the other stream is usually discharged	01	02	
d. Thin-Film Evaporation: The separation and collection of volatile organics from a liquid hazardous waste solution that contains the volatile organic and less volatile or nonvolatile components. The liquid waste feed forms a film and flows down the inside walls or tubes which are heated from the outside. Separation into various components occurs by vaporization followed by condensation	01	02	

Type and Number of Hazardous Waste Solvent Recovery Processes Onsite (con.)

Type of solvent recovery process	Does this facility operate this type of process onsite for the recovery of solvents or liquid organics from hazardous waste? (Circle one) Yes	No	How many processes of this type does this facility have onsite?
e. **Filtration:** A physical process in which a liquid hazardous waste is passed through a filter to remove suspended solids. This process is generally used as a pretreatment prior to batch still distillation or fractionation to remove suspended solids that might otherwise foul distillation equipment or is used to remove solids from off-spec solvents or liquid organic chemicals prior to reuse	01	02	
f. **Phase Separation (also called decanting):** A continuous or batch process in which two (or more) immiscible liquids are allowed to separate from each other by permitting the mixture of the liquids to remain relatively quiescent, so that gravity will separate the liquids based on differences in densities (i.e., the more dense liquid will settle in a layer beneath a less dense liquid)	01	02	
g. **Dessication (for removal of water):** A process by which small or trace quantities of water are removed from liquid organic materials. The process generally consists of contacting the water containing organic liquids with a "dessicant," such as silica gel or various granular "molecular sieve" materials. Water is removed from the organic liquid by adsorption. The dessicant may be regenerated by heating or other mechanisms	01	02	
h. **Other Solvent Recovery:** Any other type process (including pretreatment) used to recover solvents or liquid organics from hazardous waste onsite at this facility but not addressed above _____ (specify)	01	02	
i. **(Second) Other Solvent Recovery** (including pretreatment) _____ (specify)	01	02	

3. What quantity of hazardous waste was managed onsite in solvent recovery processes during 1986?

Report here the TOTAL quantity of hazardous waste that entered one or more of this facility's solvent recovery processes during 1986. COUNT ONLY ONCE any quantity of hazardous waste that entered more than one type of process. For example, hazardous waste that underwent both filtration and fractionation would be COUNTED ONLY ONCE.

Quantity of Hazardous Waste Managed in Solvent Recovery Processes Onsite	*Enter the quantity and circle a unit of measure.*	
	Unit of measure *(Circle one)*	
Quantity	**Tons**	**Gallons**
660	01	(02)

Complete Questions 4 through 30 for EACH process that is currently operating, that is temporarily not operating, or that is no longer operational (but was during 1986) to recover solvents or liquid organics from hazardous waste onsite. (These are the processes for which you circled 01 in your response to the table in Question 2.) To minimize errors in recording your answers in the multiple answer columns, answer the questions for only one process at a time. For example, if you have two hazardous waste solvent recovery processes onsite, you should answer ALL of the questions for one before you answer ANY of the questions for the other. Call the Survey Helpline (1-800-635-8850) if you need additional answer spaces or if you have any questions.

Question	Solvent Recovery Process No. 1	Solvent Recovery Process No. 2
4. What type of solvent recovery process is this? *(Circle one)*		
Fractionation	01	01
Batch still distillation	02	02
Solvent extraction	03	03
Thin-film evaporation	04	04
Filtration	05	05
Phase separation	06	06
Dessication	07	07
Other *(specify)*	08	08
	_____ *(specify)*	_____ *(specify)*
5. Do you plan to make this process commercial (accept waste from the general public or buy hazardous waste to recover solvents or chemicals for reuse) before January 1992? *(Circle one)*		
Yes	01	01
No	02	02
6. What is the operating status of this solvent recovery process? *(Circle one)*		
Currently operating *(Circle 01 and skip to Question 8 for this solvent recovery process)*	01 *(Skip to Q.8)*	01 *(Skip to Q.8)*
Temporarily not operating *(Go to next question)*	02	02
No longer operational *(Circle 03 and skip to Question 9 for this solvent recovery process)*	03 *(Skip to Q.9)*	03 *(Skip to Q.9)*

Solvent Recovery Process No. 3	Solvent Recovery Process No. 4	Solvent Recovery Process No. 5
01	01	01
02	02	02
03	03	03
04	04	04
05	05	05
06	06	06
07	07	07
08	08	08
_____ (specify)	_____ (specify)	_____ (specify)
01	01	01
02	02	02
01 *(Skip to Q.8)*	01 *(Skip to Q.8)*	01 *(Skip to Q.8)*
02	02	02
03 *(Skip to Q.9)*	03 *(Skip to Q.9)*	03 *(Skip to Q.9)*

Question	Solvent Recovery Process No. 1	Solvent Recovery Process No. 2
7. When does this facility expect to resume use of this solvent recovery process? *(Circle one)*		
1987	01	01
1988	02	02
Don't know	03	03
8. When does this facility expect to close this solvent recovery process? *(Circle one)*		
1987	01	01
1988	02	02
1989-1990	03	03
After 1990	04	04
No closure date currently set	(05)	05
9. Is this a batch or continuous process? *(Circle one)*		
Batch *(Go to next question)*	(01)	01
Continuous *(Circle 02 and skip to Question 14 for this solvent recovery process)*	02 *(Skip to Q.14)*	02 *(Skip to Q.14)*
10. How long does it typically take to process a batch? *(Include in your answer the actual treatment time, required setup time, and cleanup time.)*	1.5 hr	hr
11. What is the typical hazardous waste input batch size? *(Enter the quantity and circle a unit of measure)*		
a. Quantity	50	
b. Unit of measure *(Circle one)*		
Pounds per batch	01	01
Gallons per batch	(02)	02
12. What is the maximum hazardous waste input batch size? *(Enter the quantity and circle a unit of measure)*		
a. Quantity	50	
b. Unit of measure *(Circle one)*		
Pounds per batch	01	01
Gallons per batch	(02)	02
13. What is the typical number of batches per day? *(Enter the number of batches and skip to Question 16 for this solvent recovery process)*	18 *(Skip to Q.16)*	*(Skip to Q.16)*

Solvent Recovery Process No. 3	Solvent Recovery Process No. 4	Solvent Recovery Process No. 5
01 02 03	01 02 03	01 02 03
01 02 03 04 05	01 02 03 04 05	01 02 03 04 05
01 02 *(Skip to Q.14)*	01 02 *(Skip to Q.14)*	01 02 *(Skip to Q.14)*
☐☐☐ hr	☐☐☐ hr	☐☐☐ hr
☐☐☐☐☐ 01 02	☐☐☐☐☐ 01 02	☐☐☐☐☐ 01 02
☐☐☐☐☐ 01 02	☐☐☐☐☐ 01 02	☐☐☐☐☐ 01 02
☐☐☐ *(Skip to Q.16)*	☐☐☐ *(Skip to Q.16)*	☐☐☐ *(Skip to Q.16)*

Question	Solvent Recovery Process No. 1	Solvent Recovery Process No. 2
14. What is the typical feed rate for this continuous process? *(Enter the rate and circle a unit of measure)* a. Feed rate ..... b. Unit of measure *(Circle one)* Pounds per hour ..... Gallons per hour	☐☐☐☐☐☐☐ ..... 01 .... 02	☐☐☐☐☐☐☐ ..... 01 .... 02 .....
15. What is the maximum practical feed rate for this continuous process? *(Enter the rate and circle a unit of measure)* a. Feed rate ..... b. Unit of measure *(Circle one)* Pounds per hour ..... Gallons per hour	☐☐☐☐☐☐☐ ..... 01 .... 02	☐☐☐☐☐☐☐ ..... 01 .... 02 .....
16. Which onsite tanks are used with this solvent recovery process? *(Identify the tanks used with this process by listing the identification numbers that you entered on the schematic of your solvent recovery process(es) that you drew for Questionnaire GA, "General Facility Information.")*	a. ☐☐☐ n. ☐☐☐ b. ☐☐☐ o. ☐☐☐ c. ☐☐☐ p. ☐☐☐ d. ☐☐☐ q. ☐☐☐ e. ☐☐☐ r. ☐☐☐ f. ☐☐☐ s. ☐☐☐ g. ☐☐☐ t. ☐☐☐ h. ☐☐☐ u. ☐☐☐ i. ☐☐☐ v. ☐☐☐ j. ☐☐☐ w. ☐☐☐ k. ☐☐☐ x. ☐☐☐ l. ☐☐☐ y. ☐☐☐ m. ☐☐☐ z. ☐☐☐	a. ☐☐☐ n. ☐☐☐ b. ☐☐☐ o. ☐☐☐ c. ☐☐☐ p. ☐☐☐ d. ☐☐☐ q. ☐☐☐ e. ☐☐☐ r. ☐☐☐ f. ☐☐☐ s. ☐☐☐ g. ☐☐☐ t. ☐☐☐ h. ☐☐☐ u. ☐☐☐ i. ☐☐☐ v. ☐☐☐ j. ☐☐☐ w. ☐☐☐ k. ☐☐☐ x. ☐☐☐ l. ☐☐☐ y. ☐☐☐ m. ☐☐☐ z. ☐☐☐

Solvent Recovery Process No. 3	Solvent Recovery Process No. 4	Solvent Recovery Process No. 5
... ☐☐☐☐☐☐☐ ...	... ☐☐☐☐☐☐☐ ...	... ☐☐☐☐☐☐☐ ...
01	01	01
02	02	02
... ☐☐☐☐☐☐☐ ...	... ☐☐☐☐☐☐☐ ...	... ☐☐☐☐☐☐☐ ...
01	01	01
02	02	02
a. ☐☐☐ n. ☐☐☐	a. ☐☐☐ n. ☐☐☐	a. ☐☐☐ n. ☐☐☐
b. ☐☐☐ o. ☐☐☐	b. ☐☐☐ o. ☐☐☐	b. ☐☐☐ o. ☐☐☐
c. ☐☐☐ p. ☐☐☐	c. ☐☐☐ p. ☐☐☐	c. ☐☐☐ p. ☐☐☐
d. ☐☐☐ q. ☐☐☐	d. ☐☐☐ q. ☐☐☐	d. ☐☐☐ q. ☐☐☐
e. ☐☐☐ r. ☐☐☐	e. ☐☐☐ r. ☐☐☐	e. ☐☐☐ r. ☐☐☐
f. ☐☐☐ s. ☐☐☐	f. ☐☐☐ s. ☐☐☐	f. ☐☐☐ s. ☐☐☐
g. ☐☐☐ t. ☐☐☐	g. ☐☐☐ t. ☐☐☐	g. ☐☐☐ t. ☐☐☐
h. ☐☐☐ u. ☐☐☐	h. ☐☐☐ u. ☐☐☐	h. ☐☐☐ u. ☐☐☐
i. ☐☐☐ v. ☐☐☐	i. ☐☐☐ v. ☐☐☐	i. ☐☐☐ v. ☐☐☐
j. ☐☐☐ w. ☐☐☐	j. ☐☐☐ w. ☐☐☐	j. ☐☐☐ w. ☐☐☐
k. ☐☐☐ x. ☐☐☐	k. ☐☐☐ x. ☐☐☐	k. ☐☐☐ x. ☐☐☐
l. ☐☐☐ y. ☐☐☐	l. ☐☐☐ y. ☐☐☐	l. ☐☐☐ y. ☐☐☐
m. ☐☐☐ z. ☐☐☐	m. ☐☐☐ z. ☐☐☐	m. ☐☐☐ z. ☐☐☐

Question	Solvent Recovery Process No. 1	Solvent Recovery Process No. 2
17. Provide the following information on 1986 operating hours for this solvent recovery process. *(Enter the number of hours for each of the following. The sum of a through e must equal 8,760 hours.)*		
a. Operating, with at least some hazardous waste in the influent	3536 hr	hr
b. Operating, with no hazardous waste in the influent	hr	hr
c. Downtime—repair and maintenance	30 hr	hr
d. Downtime—no or little waste available	hr	hr
e. Downtime—other	5194 hr	hr
18. When this solvent recovery process was in operation during 1986, what percentage of its maximum capacity was typically being utilized?	50 %	%
19. What is the maximum operating temperature of this solvent recovery process? *(Enter the temperature and circle a unit of measure)*		
a. Temperature	165	
b. Unit of measure *(Circle one)*		
Fahrenheit (°F)	01	01
Celsius (°C)	02	02
20. What is the disposition of the products your facility recovers with this solvent recovery process? *(Circle all that apply)*		
Reused as fuel onsite	01	01
Reused onsite as solvent or process chemical	02	02
Sold as fuel	03	03
Sold as solvent or process chemical	04	04
Other *(specify)*	05 Return to Vendor *(specify)*	05 *(specify)*

Solvent Recovery Process No. 3	Solvent Recovery Process No. 4	Solvent Recovery Process No. 5
..... hr	..... hr	..... hr .....
..... hr	..... hr	..... hr .....
..... hr	..... hr	..... hr .....
..... hr	..... hr	..... hr .....
..... hr	..... hr	..... hr .....
..... %	..... %	..... % .....
.....	.....	.....
..... 01	..... 01	..... 01 .....
..... 02	..... 02	..... 02 .....
..... 01	..... 01	..... 01 .....
..... 02	..... 02	..... 02 .....
..... 03	..... 03	..... 03 .....
..... 04	..... 04	..... 04 .....
..... 05	..... 05	..... 05 .....
_____ (specify)	_____ (specify)	_____ (specify)

Question	Solvent Recovery Process No. 1	Solvent Recovery Process No. 2
21. What quantity of HAZARDOUS waste entered this solvent recovery process for management during 1986? *(Enter the quantity and circle a unit of measure; if none, enter zero.)*		
a. Quantity	660	
b. Unit of measure *(Circle one)*		
Tons	01	01
Gallons	02	02
22. What quantity of NONHAZARDOUS waste entered this solvent recovery process for management during 1986? *(Enter the quantity and circle a unit of measure; if none, enter zero.)*		
a. Quantity	0	
b. Unit of measure *(Circle one)*		
Tons	01	01
Gallons	02	02

Solvent Recovery Process No. 3	Solvent Recovery Process No. 4	Solvent Recovery Process No. 5
... ☐☐☐☐☐☐☐ ...	... ☐☐☐☐☐☐☐ ...	... ☐☐☐☐☐☐☐ ...
..... 01	..... 01	..... 01 .....
..... 02	..... 02	..... 02 .....
... ☐☐☐☐☐☐☐ ...	... ☐☐☐☐☐☐☐ ...	... ☐☐☐☐☐☐☐ ...
..... 01	..... 01	..... 01 .....
..... 02	..... 02	..... 02 .....

Question	Solvent Recovery Process No. 1	Solvent Recovery Process No. 2
23. What quantity of solvents and chemicals was recovered for reuse using this process during 1986? *(Enter the quantity and circle a unit of measure; if none, enter zero.)*		
a. Quantity	510	
b. Unit of measure *(Circle one)*		
Tons	01	01
Gallons	02	02
24. What is the MAXIMUM possible quantity of waste that could have been managed during 1986 using this solvent recovery process? *(Enter the quantities and circle a unit of measure)* Assume **NO CHANGE IN YOUR EQUIPMENT** and an unlimited supply of waste. In addition, consider the number of hours per day and days per year this process can operate due to necessary downtime for maintenance and other factors such as other processes that may use the same tank. Also, consider the number of hours or shifts this facility would/could operate. If this process was not operational during 1986, estimate the maximum possible quantity of waste that could be managed during 1987.		
a. ALL waste (both hazardous and nonhazardous)		
i. Quantity	1320	
ii. Unit of measure *(Circle one)*		
Tons	01	01
Gallons	02	02
b. HAZARDOUS waste		
i. Quantity	1320	
ii. Unit of measure *(Circle one)*		
Tons	01	01
Gallons	02	02

Solvent Recovery Process No. 3	Solvent Recovery Process No. 4	Solvent Recovery Process No. 5
... ☐☐☐☐☐☐☐ ...	... ☐☐☐☐☐☐☐ ...	... ☐☐☐☐☐☐☐ ...
01	01	01
02	02	02
... ☐☐☐☐☐☐☐ ...	... ☐☐☐☐☐☐☐ ...	... ☐☐☐☐☐☐☐ ...
01	01	01
02	02	02
... ☐☐☐☐☐☐☐ ...	... ☐☐☐☐☐☐☐ ...	... ☐☐☐☐☐☐☐ ...
01	01	01
02	02	02

Question	Solvent Recovery Process No. 1	Solvent Recovery Process No. 2
25. What quantity of HAZARDOUS waste managed using this process during 1986 underwent treatment onsite prior to this process? *(Enter the quantity and circle a unit of measure; if none, enter zero.)*		
Report only the hazardous waste quantities that will also be reported in one or more of the treatment questionnaires mailed to you for this survey. Do not include in your answer hazardous waste quantities that were only accumulated, stored, blended, or mixed onsite prior to solvent recovery.		
a. Quantity	0	
b. Unit of measure *(Circle one)*		
Tons	01	01
Gallons	02	02
26. What quantity of residuals—solid, liquid, and sludge—was generated by this solvent recovery process during 1986? What percentage of these residuals was hazardous? *(Include residuals from air pollution control devices [APCDs] as well as other treatment residuals. Do not include in your answer the recovered solvent or chemicals. If this process was not operational during 1986, estimate the quantity of residuals that would be generated if operated at full capacity. Enter the quantities in the unit specified and indicate the percentage. If none, enter zero.)*		
a. Solid Residuals		
i. Total quantity generated, pounds		
ii. Percentage of solid residuals that was hazardous	%	%
b. Liquid Residuals (including scrubber water)		
i. Total quantity generated, gallons	45	
ii. Percentage of liquid residuals that was hazardous	100 %	%
c. Sludge Residuals		
i. Total quantity generated, pounds	840	
ii. Percentage of sludge residuals that was hazardous	100 %	%

Solvent Recovery Process No. 3	Solvent Recovery Process No. 4	Solvent Recovery Process No. 5
☐☐☐☐☐☐☐	☐☐☐☐☐☐☐	☐☐☐☐☐☐☐
01	01	01
02	02	02
☐☐☐☐☐☐☐	☐☐☐☐☐☐☐	☐☐☐☐☐☐☐
☐☐☐ %	☐☐☐ %	☐☐☐ %
☐☐☐☐☐☐☐	☐☐☐☐☐☐☐	☐☐☐☐☐☐☐
☐☐☐ %	☐☐☐ %	☐☐☐ %
☐☐☐☐☐☐☐	☐☐☐☐☐☐☐	☐☐☐☐☐☐☐
☐☐☐ %	☐☐☐ %	☐☐☐ %

Question	Solvent Recovery Process No. 1	Solvent Recovery Process No. 2
27. Does this facility have plans to make any changes to this solvent recovery process before January 1992 that would increase/decrease its capacity to manage hazardous waste? *(Circle one)*		
Yes *(Go to next question)*	01	01
No *(Circle 02 and skip to Question 29 for this solvent recovery process)*	02 *(Skip to Q.29)*	02 *(Skip to Q.29)*
28. What plans does your facility have to make changes to this solvent recovery process that would increase/decrease its capacity to manage hazardous waste?		
"Capacity change" for a solvent recovery process is the maximum quantity of waste that would be added or deleted from the quantity that could have been managed during 1986 due to changes. DO NOT INCLUDE capacity changes related to changes in facility operations, such as adding or discontinuing shifts.		
a. Type of capacity change planned for this solvent recovery process *(Circle one)*		
Capacity increase	01	01
Capacity decrease	02	02
b. Describe the capacity change	_____	_____
c. Size of planned capacity change (net change only, not new total capacity)	☐☐☐☐☐☐☐	☐☐☐☐☐☐☐
d. Unit of measure for capacity change *(Circle one)*		
Tons per year	01	01
Gallons per year	02	02
e. Timeframe of planned capacity change *(Circle one)*		
1987	01	01
1988-1989	02	02
1990-1991	03	03
f. Percentage of capacity increase that will be offered commercially *(If none, enter zero. If the capacity change is a decrease in capacity, enter "NA.")*	☐☐☐ %	☐☐☐ %

Solvent Recovery Process No. 3	Solvent Recovery Process No. 4	Solvent Recovery Process No. 5
..... 01	..... 01	..... 01 .....
..... 02 *(Skip to Q.29)*	..... 02 *(Skip to Q.29)*	..... 02 *(Skip to Q.29)* .....
..... 01	..... 01	..... 01 .....
..... 02	..... 02	..... 02 .....
_____	_____	_____
_____	_____	_____
... [ ][ ][ ][ ][ ][ ][ ] ...	... [ ][ ][ ][ ][ ][ ][ ] ...	... [ ][ ][ ][ ][ ][ ][ ] ...
..... 01	..... 01	..... 01 .....
..... 02	..... 02	..... 02 .....
..... 01	..... 01	..... 01 .....
..... 02	..... 02	..... 02 .....
..... 03	..... 03	..... 03 .....
..... [ ][ ][ ] %	..... [ ][ ][ ] %	..... [ ][ ][ ] % .....

Question	Solvent Recovery Process No. 1	Solvent Recovery Process No. 2
29. List a RCRA waste code for each type of hazardous waste that was managed using this solvent recovery process during 1986. *(See Appendix C of the Instructions booklet for a list of RCRA and other waste codes.)*	a. F001 b. c. d. e. f. g. h. i. j. k. l. m. n. o. p. q. r. s. t. u. v. w. x. y. z.	a. b. c. d. e. f. g. h. i. j. k. l. m. n. o. p. q. r. s. t. u. v. w. x. y. z.
30. What types of air pollution control devices are connected to this solvent recovery process? *(Circle all that apply)*		
Condenser	01	01
Wet ionizing scrubber	02	02
Packed bed scrubber	03	03
Carbon adsorption device	04	04
Vapor/fume incinerator	05	05
Flare	06	06
Boiler	07	07
None	08	08
Other *(specify)*	09 *(specify)*	09 *(specify)*

Solvent Recovery Process No. 3		Solvent Recovery Process No. 4		Solvent Recovery Process No. 5	
a.	n.	a.	n.	a.	n.
b.	o.	b.	o.	b.	o.
c.	p.	c.	p.	c.	p.
d.	q.	d.	q.	d.	q.
e.	r.	e.	r.	e.	r.
f.	s.	f.	s.	f.	s.
g.	t.	g.	t.	g.	t.
h.	u.	h.	u.	h.	u.
i.	v.	i.	v.	i.	v.
j.	w.	j.	w.	j.	w.
k.	x.	k.	x.	k.	x.
l.	y.	l.	y.	l.	y.
m.	z.	m.	z.	m.	z.
01		01		01	
02		02		02	
03		03		03	
04		04		04	
05		05		05	
06		06		06	
07		07		07	
08		08		08	
09		09		09	
(specify)		(specify)		(specify)	

31. Does this facility have any processes in any of the following categories that WILL BE used to recover for reuse solvents or liquid organics from HAZARDOUS WASTE ONSITE BEFORE JANUARY 1992?

- **In place but not yet operating to recover solvents or liquid organics from hazardous waste (including processes that are currently being used to recover solvents or liquid organics from nonhazardous waste but that will be used to recover solvents or liquid organics from hazardous waste before January 1992).**
- **Existing equipment being reconfigured to recover solvents or liquid organics from hazardous waste before January 1992.**
- **New equipment under construction to recover solvents or liquid organics from hazardous waste before January 1992.**
- **New equipment planned for purchase/construction to recover solvents or liquid organics from hazardous waste before January 1992.**

(Circle one)

01 Yes *(Go to next question)*
02 No *(Skip to Question 47 on page 31)*

32. What types of processes will be operated onsite before January 1992 to recover for reuse solvents or liquid organics from hazardous waste?

Include only those processes that are in place but not yet operating, that are being reconfigured to operate, that are under construction to operate, or that are planned to recover solvents or liquid organics from hazardous waste onsite before January 1992. Do not include in your answer any of the solvent recovery processes that you reported in Question 2 or solvent recovery processes that will be used ONLY to manage nonhazardous waste.

Type and Number of Hazardous Waste Solvent Recovery Processes	*Indicate whether or not this facility will have a process of each type onsite for the recovery of solvents or liquid organics from hazardous waste. If you circle 01, indicate how many processes of that type this facility will have onsite.*		
Type of solvent recovery process	**Will this facility operate this type of process onsite for the recovery of solvents or liquid organics from hazardous waste?** *(Circle one)* **Yes**	**No**	**How many processes of this type will this facility have onsite?**
a. Fractionation: The separation and collection of organic compounds from hazardous waste using trays (also called plates) or packed beds. The primary purpose of such units is to obtain reusable overhead and/or bottom products. (If this process is used to comply with pretreatment standards or a National Pollutant Discharge Elimination System [NPDES] permit, it should be reported as a wastewater treatment process in Questionnaire GE.)	01	02	☐☐
b. Batch Still Distillation: The separation and collection of volatile organics from hazardous waste to recover a single overhead product. This process is a single equilibrium stage operation that contains no trays or packed beds and does not have a reflux stream. This process is generally used to recover solvents used (a) as tank cleaners by the paint industry; (b) as a photo resistant strip by the electronics industry; and (c) as degreasing agents in a variety of applications	01	02	☐☐
c. Solvent Extraction: The separation of organic constituents in a liquid hazardous waste solution by contact with another immiscible liquid. Following extraction, one stream is recovered and the other stream is usually discharged	01	02	☐☐
d. Thin-Film Evaporation: The separation and collection of volatile organics from a liquid hazardous waste solution that contains the volatile organic and less volatile or nonvolatile components. The liquid waste feed forms a film and flows down the inside walls or tubes which are heated from the outside. Separation into various components occurs by vaporization followed by condensation	01	02	☐☐

Type and Number of Hazardous Waste Solvent Recovery Processes (con.)

Type of solvent recovery process	Will this facility operate this type of process onsite for the recovery of solvents or liquid organics from hazardous waste? (Circle one) Yes	No	How many processes of this type will this facility have onsite?
e. Filtration: A physical process in which a liquid hazardous waste is passed through a filter to remove suspended solids. This process is generally used as a pretreatment prior to batch still distillation or fractionation to remove suspended solids that might otherwise foul distillation equipment or is used to remove solids from off-spec solvents or liquid organic chemicals prior to reuse	01	02	☐☐
f. Phase Separation (also called decanting): A continuous or batch process in which two (or more) immiscible liquids are allowed to separate from each other by permitting the mixture of the liquids to remain relatively quiescent, so that gravity will separate the liquids based on differences in densities (i.e., the more dense liquid will settle in a layer beneath a less dense liquid)	01	02	☐☐
g. Dessication (for removal of water): A process by which small or trace quantities of water are removed from liquid organic materials. The process generally consists of contacting the water containing organic liquids with a "dessicant," such as silica gel or various granular "molecular sieve" materials. Water is removed from the organic liquid by adsorption. The dessicant may be regenerated by heating or other mechanisms	01	02	☐☐
h. Other Solvent Recovery: Any other type process (including pretreatment) used to recover solvents or liquid organics from hazardous waste onsite at this facility but not addressed above _____ (specify)	01	02	☐☐
i. (Second) Other Solvent Recovery (including pretreatment) _____ (specify)	01	02	☐☐

Complete Questions 33 through 46 for EACH process that is in place but not yet operating, that is being reconfigured to operate, that is being constructed to operate, or that is planned to recover solvents or liquid organics from hazardous waste onsite before January 1992. (These are the processes for which you circled 01 in your response to the table in Question 32.) To minimize errors in recording your answers in the multiple answer columns, answer the questions for only one process at a time. For example, if you will have two hazardous waste solvent recovery processes onsite, you should answer ALL of the questions for one before you answer ANY of the questions for the other. Answer the questions as if the processes are operating (based on design specifications). Call the Survey Helpline (1-800-635-8850) if you need additional answer spaces or if you have any questions.

Question	Solvent Recovery Process A	Solvent Recovery Process B
33. What type of solvent recovery process is this? *(Circle one)*		
Fractionation	01	01
Batch still distillation	02	02
Solvent extraction	03	03
Thin-film evaporation	04	04
Filtration	05	05
Phase separation	06	06
Dessication	07	07
Other *(specify)*	08	08
	_____ *(specify)*	_____ *(specify)*
34. What will be the commercial status of this solvent recovery process? *(Circle all that apply)*		
Commercial—accepts waste from the general public or buys hazardous waste to recover solvents or chemicals for reuse	01	01
Accepts waste from a limited number of facilities not under same ownership	02	02
Manages waste generated onsite	03	03
Accepts waste from offsite facilities under same ownership	04	04
35. What is the status of this solvent recovery process? *(Circle one)*		
In place but not yet operating	01	01
Existing equipment being reconfigured	02	02
New equipment under construction	03	03
Planned	04	04
36. When does this facility expect to begin using this process to recover solvents or liquid organics from hazardous waste? *(Circle one)*		
1987	01	01
1988	02	02
1989-1990	03	03
After 1990	04	04

Question	Solvent Recovery Process A	Solvent Recovery Process B
37. Will this be a batch or continuous process? *(Circle one)* Batch *(Go to next question)*	01	01
Continuous *(Circle 02 and skip to Question 39 for this solvent recovery process)*	02 *(Skip to Q.39)*	02 *(Skip to Q.39)*
38. Estimate how long it will take to process a batch. *(Include in your answer the estimated treatment time, setup time, and cleanup time. Enter the number of hours and skip to Question 40 for this solvent recovery process.)*	☐☐☐ hr *(Skip to Q.40)*	☐☐☐ hr *(Skip to Q.40)*
39. What will be the design feed rate of this continuous process? *(Enter the rate and circle a unit of measure)* a. Feed rate	☐☐☐☐☐☐☐	☐☐☐☐☐☐☐
b. Unit of measure *(Circle one)* Pounds per hour	01	01
Gallons per hour	02	02
40. If known, which EXISTING tanks will be used with this solvent recovery process? *(Identify the tanks that will be used with this process by listing the identification numbers that you entered on the schematic(s) you drew for Questionnaire QA, "General Facility Information." Enter "NA" if only PLANNED tanks will be used with this process.)*	a. ☐☐☐ n. ☐☐☐ b. ☐☐☐ o. ☐☐☐ c. ☐☐☐ p. ☐☐☐ d. ☐☐☐ q. ☐☐☐ e. ☐☐☐ r. ☐☐☐ f. ☐☐☐ s. ☐☐☐ g. ☐☐☐ t. ☐☐☐ h. ☐☐☐ u. ☐☐☐ i. ☐☐☐ v. ☐☐☐ j. ☐☐☐ w. ☐☐☐ k. ☐☐☐ x. ☐☐☐ l. ☐☐☐ y. ☐☐☐ m. ☐☐☐ z. ☐☐☐	a. ☐☐☐ n. ☐☐☐ b. ☐☐☐ o. ☐☐☐ c. ☐☐☐ p. ☐☐☐ d. ☐☐☐ q. ☐☐☐ e. ☐☐☐ r. ☐☐☐ f. ☐☐☐ s. ☐☐☐ g. ☐☐☐ t. ☐☐☐ h. ☐☐☐ u. ☐☐☐ i. ☐☐☐ v. ☐☐☐ j. ☐☐☐ w. ☐☐☐ k. ☐☐☐ x. ☐☐☐ l. ☐☐☐ y. ☐☐☐ m. ☐☐☐ z. ☐☐☐
41. Estimate the expected annual quantity of solvents and chemicals that will be recovered for reuse using this process. *(Enter the quantity and circle a unit of measure)* a. Quantity	☐☐☐☐☐☐☐	☐☐☐☐☐☐☐
b. Unit of measure *(Circle one)* Tons per year	01	01
Gallons per year	02	02

Question	Solvent Recovery Process A	Solvent Recovery Process B
42. What will be the disposition of the products your facility recovers with this solvent recovery process? *(Circle all that apply)*		
Reused as fuel onsite	01	01
Reused onsite as solvent or process chemical	02	02
Sold as fuel	03	03
Sold as solvent or process chemical	04	04
Other *(specify)*	05 _____ *(specify)*	05 _____ *(specify)*
43. What percentage of the hazardous waste managed in this solvent recovery process do you expect to originate from the following sources? *(If none, enter zero)*		
a. Generated onsite at this facility	☐☐☐ %	☐☐☐ %
b. Received from another facility under the same ownership	☐☐☐ %	☐☐☐ %
c. Received from another facility NOT under the same ownership	☐☐☐ %	☐☐☐ %
Total (a + b + c) =	100%	100%
44. Estimate the MAXIMUM possible quantity of waste that could be managed using this solvent recovery process. *(Enter the quantities and circle a unit of measure)* Assume an unlimited supply of waste. In addition, consider the number of hours per day and days per year this process will be able to operate due to necessary downtime for maintenance and other factors such as other processes that may use the same tank. Also, consider the number of hours or shifts you plan to operate.		
a. ALL waste (both hazardous and nonhazardous)		
i. Quantity	☐☐☐☐☐☐☐	☐☐☐☐☐☐☐
ii. Unit of measure *(Circle one)*		
Tons per year	01	01
Gallons per year	02	02
b. HAZARDOUS waste		
i. Quantity	☐☐☐☐☐☐☐	☐☐☐☐☐☐☐
ii. Unit of measure *(Circle one)*		
Tons per year	01	01
Gallons per year	02	02

Question	Solvent Recovery Process A	Solvent Recovery Process B
45. Estimate what quantity of residuals—solid, liquid, and sludge—would be generated by this solvent recovery process if operated at full capacity. Estimate the percentage of residuals that would be hazardous. *(Include residuals from air pollution control devices [APCDs] as well as other treatment residuals. Do not include in your answer the recovered solvent or chemicals. Enter the quantities in the unit specified and indicate the percentage. If none, enter zero.)*		
a. Solid Residuals		
i. Total quantity that would be generated, pounds per year		
ii. Percentage of solid residuals that would be hazardous	%	%
b. Liquid Residuals (including scrubber water)		
i. Total quantity that would be generated, gallons per year		
ii. Percentage of liquid residuals that would be hazardous	%	%
c. Sludge Residuals		
i. Total quantity that would be generated, pounds per year		
ii. Percentage of sludge residuals that would be hazardous	%	%
46. What types of air pollution control devices will be connected to this solvent recovery process? *(Circle all that apply)*		
Condenser	01	01
Wet ionizing scrubber	02	02
Packed bed scrubber	03	03
Carbon adsorption device	04	04
Vapor/fume incinerator	05	05
Flare	06	06
Boiler	07	07
None	08	08
Other *(specify)*	09	09
	(specify)	*(specify)*

47. a. What is the name, title, and telephone number of the person who completed this questionnaire?

Name:

PATRICK TIGHE

Title:

SUPERINTENDENT FACILITIES

Telephone:

516 — 334 — 1300 *(Go to Question b)*

Area Code

b. Is your MAILING ADDRESS the same as the address given in the label on the cover of this questionnaire? *(Circle one)*

"MAILING ADDRESS" refers to the address at which you can be reached for potential future survey-related contacts.

01 Yes *(Skip to note at bottom of page)*

(02) No *(Go to Question c)*

c. At what MAILING ADDRESS can you be contacted for future survey-related information?

Mailing address:

11101 PROSPECT AVENUE

City: WESTBURY

State: NY

ZIP: 11590 — *(Go to note at bottom of page)*

NOTE: *You have now completed this questionnaire. If you have also completed all the other questionnaires you must complete, MAKE A PHOTOCOPY OF THEM FOR YOUR RECORDS and send the originals to the following address using the enclosed postage-paid return envelope:*

U.S. Environmental Protection Agency
MD 99-RTI
Research Triangle Park, NC 27711

If you have not completed all the necessary questionnaires, go to the next questionnaire. If you have any questions about this or the other questionnaires used in this survey, call the Survey Helpline (1-800-635-8850).

FACILITY NOTES

Question Number(s)	Notes, comments, etc.

FACILITY NOTES

Question Number(s)	Notes, comments, etc.

QUESTIONNAIRE GG	SOLVENT AND LIQUID ORGANIC RECOVERY FOR REUSE

EPA Use Only ☐

1. ☐
2. ☐
3. ☐
4. ☐
5. ☐
6. ☐
7. ☐
8. ☐
9. ☐
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38. ☐
39. ☐
40. ☐
41. ☐
42. ☐
43. ☐
44. ☐
45. ☐
46. ☐
47. ☐

State of New Jersey
Department of Environmental Protection
Hazardous Waste Regulation Program
Manifest Section
CN 421, Trenton, NJ 08625-0421

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.) *Form Approved. OMB No. 2050-0039. Expires: 9-30-97*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of | Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: NYD 057731667
SULZER METCO (US), INC
1101 PROSPECT AVE
WESTBURY NY 11590-0311
4. Generator's Phone (516) 338-1661

A. State Manifest Document Number: **NJA 2812517**
B. State Generator's ID-(Gen. Site Address): SAME

5. Transporter 1 Company Name: SAFETY-KLEEN CORP.
6. US EPA ID Number
C. State Trans. ID-NJDEP
Decal No.-

7. Transporter 2 Company Name
8. US EPA ID Number
D. Transporter's Phone ( )
E. State Trans. ID-NJDEP
Decal No.-

9. Designated Facility Name and Site Address: 000633
SAFETY-KLEEN CORP.
1200 SYLVAN STREET
LINDEN NJ 07036
10. US EPA ID Number: NJD 002181887
F. Transporter's Phone ( )
G. State Facility's ID
H. Facility's Phone ( )

11. US DOT Description (*including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group*)

	HM	11. US DOT Description	12. Containers No.	Type	13. Total Quantity	Unit Wt/Vol	14. Waste No.
a.	X	RQ WASTE PETROLEUM DISTILLATES, N.O.S. (ALIPHATIC AND AROMATIC HYDROCARBONS) 3 UN1268 PG III (D001)(ERG#128)	002	DM	00696	P	D001
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above: a. LI; b.; c.; d.

K. Handling Codes for Wastes Listed Above: a. T09 Alternate; b.; c.; d.

15. Special Handling Instructions and Additional Information
EMERGENCY MESSP 800-468-1760(24 HR). IF UNDELIVERABLE RETURN TO GENERATOR. SK CORP. AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY. PLATE ATTACHED
CONTROL/A229014

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Bruce Nelson | Signature | Month 06 Day 11 Year 96

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RONALD ANDERSON | Signature: R Anderson | Month 06 Day 11 Year 96

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

GENERATOR / TRANSPORTER / FACILITY

EPA Form 8700-22 (Rev. 9/88) Previous editions are obsolete.

SIGNATURE AND INFORMATION *MUST* BE LEGIBLE ON ALL COPIES

3—TSD MAIL TO- GENERATOR A229014 P28UL005470

NJA2812517

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

2812517

2-118-08

State of New Jersey
Department of Environmental Protection
Hazardous Waste Regulation Program
Manifest Section
CN 421, Trenton, NJ 08625-0421

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-97

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD 057731663 — Manifest Document No. 3 1 3 1 6
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
SULZER METCO (US), INC
1101 PROSPECT AVE
WESTBURY NY 11590- 031
4. Generator's Phone (516 938-1661)

A. State Manifest Document Number NJA 2812517
B. State Generator's ID (Gen. Site Address) SAME

5. Transporter 1 Company Name SAFETY-KLEEN CORP.
6. US EPA ID Number ILD 9[illegible]
C. State Trans. ID-NJDEP 08690
Decal No.

7. Transporter 2 Company Name
8. US EPA ID Number
D. Transporter's Phone (816 842-6311)
E. State Trans. ID-NJDEP
Decal No.

9. Designated Facility Name and Site Address 000535
SAFETY-KLEEN CORP.
1200 SYLVAN STREET
LINDEN, NJ 07036
10. US EPA ID Number NJD 002182897
F. Transporter's Phone ( )
G. State Facility's ID
H. Facility's Phone (908 862-2000)

	11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	RQ WASTE PETROLEUM DISTILLATES, N.O.S. (ALIPHATIC AND AROMATIC HYDROCARBONS) 3 UN1268 PG III (D001)(ERG#128)	X	002	DM	00696	P	D001
b.							
c.							
d.							

J. Additional Descriptions for Materials Listed Above
a. LI
b.
c.
d.

K. Handling Codes for Wastes Listed Above
a.
b.
c.
d.

15. Special Handling Instructions and Additional Information
MFST R/T# 95161366 2-118-08-1500
EMERGENCY RESP 800-468-1760(24 HR). IF UNDELIVERABLE RETURN TO GENERATOR.
SK CORP AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY.
PLATE ATTCH(NO) CONTROL/A229014
SECTT 8, 1090 B, C, D

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Bruce Nielsen — Signature — Month Day Year: 06 11 96

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: RICHARD ANDERSON — Signature — Month Day Year: 06 11 96

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

GENERATOR / TRANSPORTER / FACILITY

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

NJA2812517

EPA Form 8700-22 (Rev. 9/88) Previous editions are obsolete. SIGNATURE AND INFORMATION MUST BE LEGIBLE ON ALL COPIES

6—GENERATOR MAIL TO- TSD'S STATE) 229014 P2SUL005471

State of New Jersey
Department of Environmental Protection
Hazardous Waste Regulation Program
Manifest Section
CN 421, Trenton, NJ 08625-0421

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-97

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.
Manifest Document No.
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
4. Generator's Phone ( )

A. State Manifest Document Number **NJA 2812517**
B. State Generator's ID-(Gen. Site Address)

5. Transporter 1 Company Name
6. US EPA ID Number
C. State Trans. ID-NJDEP
Decal No.-

7. Transporter 2 Company Name
8. US EPA ID Number
D. Transporter's Phone ( )
E. State Trans. ID-NJDEP
Decal No.-

9. Designated Facility Name and Site Address
10. US EPA ID Number
F. Transporter's Phone ( )
G. State Facility's ID
H. Facility's Phone ( )

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a.	HM					
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above
a.
b.
c.
d.

K. Handling Codes for Wastes Listed Above
a.
b.
c.
d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name | Signature | Month Day Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

NJA2812517

EPA Form 8700-22 (Rev. 9/88) Previous editions are obsolete.

SIGNATURE AND INFORMATION *MUST* BE LEGIBLE ON ALL COPIES

8—GENERATOR COPY

P2SUL005472

NOTICE OF LAND DISPOSAL RESTRICTION OF WASTE

TO: SAFETY-KLEEN CORP.
1200 SYLVAN STREET
LINDEN, NJ 07036

EPA ID: NJD002182897

UNDER MANIFEST NUMBER NTA 2812517 LINE NUMBER 1a
THE GENERATOR NOTED BELOW IS SHIPPING TO YOU A RESTRICTED WASTE UNDER FEDERAL AND STATE LAND DISPOSAL RESTRICTION REGULATIONS.
IN ACCORDANCE WITH THESE REGULATIONS, THE GENERATOR HEREBY PROVIDES NOTICE THAT THE WASTE IS RESTRICTED AND THE EPA WASTE CODES AND APPROPRIATE TREATMENT STANDARDS ARE AS FOLLOWS:

HAZARDOUS WASTE CODES: D001

TREATABILITY GROUP: NONWASTEWATERS

EPA WASTE CODE	WASTE DESCRIPTION AND TREATMENT/REGULATORY SUBCATEGORY OR REGULATED HAZARDOUS CONSTITUENT	TREATMENT STANDARD CONCENTRATION OR TECHNOLOGY CODE
D001	HIGH TOC IGNITABLE CHARACTERISTIC WASTE.	RORGS, OR CMBST **

IN ACCORDANCE WITH 6NYCRR 376.4

NOTES: * THESE TREATMENT STANDARDS DO NOT PRECLUDE SOLVENT RECOVERY OR USE AS FUEL PRIOR TO LAND DISPOSAL.
** NEW TREATMENT STANDARDS UNDER FEDERAL RULES EFFECTIVE 12-19-94.
*** TREATMENT STANDARDS APPLICABLE IN CERTAIN HSWA-AUTHORIZED STATES.
****AND MEET UNIVERSAL TREATMENT STANDARDS
*****NEW TREATMENT STANDARDS UNDER FEDERAL RULES EFFECTIVE 7-8-96.

GENERATOR NAME: METCO EPA ID: NYD057731663

GENERATOR SIGNATURE (OPTIONAL): [signature]

NAME & TITLE (OPTIONAL): Bruce Nielsen - Leadperson

SAFETY-KLEEN SAMPLE NUMBER: 356244 CONTROL NUMBER: 229014-6

P 205 887 223

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (*See reverse*)

Sent to	STATE OF NEW JERSEY DEPT ENVIRONMENTAL PROTECTION
Street & Number	HAZ WASTE REGULATION CN 421
Post Office, State, & ZIP Code	TRENTON NJ 08625-0421
Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form **3800**, April 1995

Fold at line over top of envelope to the right of the return address

CERTIFIED

P 205 887 223

MAIL

Is your RETURN ADDRESS completed on the reverse side?

SENDER:
- Complete items 1 and/or 2 for ad
- Complete items 3, 4a, and 4b.
- Print your name and address on card to you.
- Attach this form to the front of the permit.
- Write *"Return Receipt Requestec*
- The Return Receipt will show to delivered.

3. Article Addressed to:
STATE OF NEW JER
DEPT OF ENVIRONM
& ENERGY
HAZARDOUS WASTE
MANIFEST SECTION
CN 421
TRENTON NJ 0862

5. Received By: *(Print Name*

6. Signature: *(Addressee or*
X

PS Form **3811**, December

I also wish to receive the

Is your RETURN ADDRESS completed on the reverse side?

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:
STATE OF NEW JERSEY
DEPT OF ENVIRONMENTAL PROTECTION
& ENERGY
HAZARDOUS WASTE REGULATION PROGRAM
MANIFEST SECTION
CN 421
TRENTON NJ 08625-0421

5. Received By: *(Print Name)*
STATE OF NEW JERSEY
CAPITOL POST OFFICE

6. S

PS

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number
P 205 887 223

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

8. Addressee's Address *(Only if requested and fee is paid)*

Thank you for using Return Receipt Service.

Receipt

EPA
United States Environmental Protection Agency

FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
ALUMINUM (FUME OR DUST)

WHERE TO SEND COMPLETED FORMS:

1. EPCRA Reporting Center
   P.O Box 3348
   Merrifield, VA 22116-3348
   ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision [ ]

Important: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

For EPA use only

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

1996

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?
[ ] Yes. (Answer question 2.2; Attach substantiation forms)
[X] No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: [ ] Sanitized [ ] Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official
LAURENCE F. MILES MANAGER, FACILITIES

Signature

Date Signed: 07-15-97

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name: SULZER METCO (US), INC.	TRI Facility ID Number: 11801PRKNL220MI
Street Address: 220 MILLER PLACE	
City: HICKSVILLE	County: NASSAU
State: NY	Zip Code: 11801-
Mailing Address (if different from street address): 1101 PROSPECT AVENUE	PUT LABEL HERE
City: WESTBURY	
State: NY	Zip Code: 11590-0201

EPA
United States Environmental Protection Agency

EPA FORM R
PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
ALUMINUM (FUME OR DUST)

SECTION 4. FACILITY IDENTIFICATION (continued)

4.2	**This report contains information for:** (Important check a or b; check c if applicable	a. [X] An entire facility	b. [ ] Part of a facility	c. [ ] A Federal facility			
4.3	**Technical Contact**	Name: MICHAEL S. LYDON	Telephone number (include area code): (516) 338-2337				
4.4	**Public Contact**	Name: MICHAEL S. LYDON	Telephone number (include area code): (516) 338-2337				
4.5	**SIC Code (4-digit)**	a. 3399	b. NA	c.	d.	e.	f.
4.6	**Latitude and Longitude**	Latitude: Degrees 040, Minutes 47, Seconds 10	Longitude: Degrees 073, Minutes 31, Seconds 00				
4.7	**Dun & Bradstreet Number(s) (9 digits)**	a. 938686300	b.				
4.8	**EPA Identification Number(s) (RCRA I.D. No.) (12 characters)**	a. NYD981558570	b. NA				
4.9	**Facility NPDES Permit Number(s) (9 characters)**	a. NA	b.				
4.10	**Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)**	a. NA	b.				

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	[ ] NA SULZER INC.
5.2	Parent Company's Dun & Bradstreet Number	[ ] NA 001826957

EPA
United States Environmental Protection Agency

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
ALUMINUM (FUME OR DUST)

SECTION 1. TOXIC CHEMICAL IDENTITY

(Important: DO NOT complete this section if you complete Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	007429905
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	ALUMINUM (FUME OR DUST)
1.3	Generic Chemical Name (Important: Comp**only** if Part 1, Section 2.1 is checked "yes". Generic Name must be structurally descriptive)
	NA

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)
	NA

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

			If produce or import:
3.1	**Manufacture the toxic chemical:**	a. [ ] Produce b. [X] Import	c. [X] For on-site use/processing d. [X] For sale/distribution e. [ ] As a byproduct f. [ ] As an impurity
3.2	**Process the toxic chemical:**	a. [ ] As a reactant b. [ ] As a formulation component	c. [X] As an article component d. [X] Repackaging
3.3	**Otherwise use the toxic chemical:**	a. [ ] As a chemical processing aid b. [ ] As a manufacturing aid	c. [ ] Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	04 (Enter two-digit code from instruction package.)	

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United States Environmental Protection Agency

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
ALUMINUM (FUME OR DUST)

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	[X] NA			
5.2	Stack or point air emissions	[ ] NA	A	C	
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name				
NA					
5.3.2	Stream or Water Body Name				
5.3.3	Stream or Water Body Name				
5.4.1	Underground injections on-site to Class I Wells	[X] NA			
5.4.2	Underground injections on-site to Class II-V Wells	[X] NA			
5.5	Disposal to land on-site				
5.5.1A	RCRA Subtitle C landfills	[X] NA			
5.5.1B	Other landfills	[X] NA			
5.5.2	Land treatment/ application farming	[X] NA			
5.5.3	Surface impoundment	[X] NA			
5.5.4	Other disposal	[X] NA			

[ ] **Check here only if additional Section 5.3 information is provided on page 5 of this form.**

EPA
United States Environmental Protection Agency

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
ALUMINUM (FUME OR DUST)

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.4 Stream or Water Body Name			
5.3.5 Stream or Water Body Name			
5.3.6 Stream or Water Body Name			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	2 Basis of Estimate (enter code)
NA	

6.1.B POTW Name and Location Information

6.1.B.1 POTW Name		6.1.B. 2 POTW Name	
NA			
Street Address		Street Address	
City	County	City	County
State	Zip Code -	State	Zip Code -

If additional pages of Part II, Section 5.3 and/or 6.1 are attached, indicate the total number of pages in this box 1 **and indicate which Part II, Section 5.3/6.1 page this is, here.** 1 **(example: 1, 2, 3, etc.)**

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EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
ALUMINUM (FUME OR DUST)

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.1	Off-site EPA Identification Number (RCRA ID No.)	NA	
Off-Site Location Name	I. GANZ SCRAP METAL, INC.		
Street Address	96 WYTHE AVENUE		
City	BROOKLYN	County	KINGS
State	NY	Zip Code	11211-
Is location under control of reporting facility or parent company?	☐ Yes	☒ No	

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery(enter code)
1. 5700	1. M	1. M24
2.	2.	2.
3.	3.	3.
4.	4.	4.

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.2	Off-site EPA Identification Number (RCRA ID No.)		
Off-Site Location Name			
Street Address			
City		County	
State		Zip Code	-
Is location under control of reporting facility or parent company?	☐ Yes	☐ No	

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery(enter code)
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box [1] and indicate which Part II, Section 6.2 page this is, here. [1] (example: 1, 2, 3, etc.)

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United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
ALUMINUM (FUME OR DUST)

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ **Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.**

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b 1 ☐ 2 ☐	7A.1c	7A.1d	7A.1e
NA	3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐		%	Yes ☐ No ☐
7A.2a	7A.2b 1 ☐ 2 ☐	7A.2c	7A.2d	7A.2e
	3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐		%	Yes ☐ No ☐
7A.3a	7A.3b 1 ☐ 2 ☐	7A.3c	7A.3d	7A.3e
	3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐		%	Yes ☐ No ☐
7A.4a	7A.4b 1 ☐ 2 ☐	7A.4c	7A.4d	7A.4e
	3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐		%	Yes ☐ No ☐
7A.5a	7A.5b 1 ☐ 2 ☐	7A.5c	7A.5d	7A.5e
	3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐		%	Yes ☐ No ☐

If additional copies of page 7 are attached, indicate the total number of pages in this box [1] and indicate which page 7 this is, here. [1] (example: 1, 2, 3, etc.)

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United States Environmental Protection Agency

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
ALUMINUM (FUME OR DUST)

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

☐ **Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.**

Energy Recovery Methods [enter 3-character code(s)]

1	2	3	4
NA			

SECTION 7C. ON-SITE RECYCLING PROCESSES

☐ **Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.**

Recycling Methods [enter 3-character code(s)]

1.	2.	3.	4.	5.
NA				
6.	**7.**	**8.**	**9.**	**10.**

EPA
United States Environmental Protection Agency

EPA FORM R
PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
11801PRKNL220MI
Toxic Chemical, Category or Generic Name
ALUMINUM (FUME OR DUST)

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

All quantity estimates can be reported using up to two significant figures.		Column A Prior Year (pounds/year)	Column B Current Reporting Year (pounds/year)	Column C Following Year (pounds/year)	Column D Second Following Year (pounds/year)
8.1	Quantity released*	26000	0	2000	2000
8.2	Quantity used for energy recovery on-site	0	0	0	0
8.3	Quantity used for energy recovery off-site	0	0	0	0
8.4	Quantity recycled on-site	0	0	0	0
8.5	Quantity recycled off-site	680	570	0	0
8.6	Quantity treated on-site	0	0	0	0
8.7	Quantity treated off-site	0	0	0	0
8.8	Quantity released to the environment as a result of remedial actions, catastropic events, or one-time events not associated with production processes (pounds/year)	NA			
8.9	Production ratio or activity index	0001.00			

8.10 Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.

	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1	NA	a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)	YES	NO
			X

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

EPA United States Environmental Protection Agency

TOXIC CHEMICAL RELEASE INVENTORY FORM A

WHERE TO SEND COMPLETED FORMS:
1. EPCRA Reporting Center, P.O. Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR: 1996

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes. (Answer question 2.2; Attach substantiation forms) [X] No: Do not answer 2.2; continue with Section 3.

2.2 If yes in 2.1, is this copy: [ ] Sanitized [ ] Unsanitized

SECTION 3. CERTIFICATION (Important: Please read and sign after completing the statement.)

I hereby certify that to the best of my knowledge and belief, for the toxic chemical listed in this statement, the annual reportable amount, as defined in 40 CFR 372.27(a), did not exceed 500 pounds for this reporting year and that the chemical was manufactured, processed, or otherwise used in an amount not exceeding 1 million pounds during this reporting year.

Name and official title of owner/operator or senior management official: LAURENCE F. MILES, MANAGER, FACILITIES

Signature: [signature] Date Signed: 07-15-97

SECTION 4. FACILITY IDENTIFICATION

4.1
- Facility or Establishment Name: SULZER METCO (US), INC.
- TRI Facility ID Number: 11801PRKNL220MI
- Street Address: 220 MILLER PLACE
- City: HICKSVILLE
- County: NASSAU
- State: NY
- Zip Code: 11801-
- Mailing Address (if different from street address): 1101 PROSPECT AVENUE
- City: WESTBURY
- State: NY
- Zip Code: 11590-0201

PUT LABEL HERE

4.2 **This report contains information for:**
(Important: check c if applicable; a and b have been intentionally left blank)
c. [ ] A Federal facility

4.3 **Technical Contact**
- Name: MICHAEL S. LYDON
- Telephone Number (include area code): (516)338-2337

EPA United States Environmental Protection Agency

TOXIC CHEMICAL RELEASE INVENTORY FORM A

SECTION 4. FACILITY IDENTIFICATION (CONTINUED)

4.4	Intentionally left blank						
4.5	SIC Code (4-digit)	a. 3399	b. NA	c.	d.	e.	f.

4.6	Latitude and Longitude	Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		040	47	10	073	31	00

4.7	Dun and Bradstreet Number(s) (9 digits)	a. 938686300
		b.
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. NYD981558570
		b. NA
4.9	Facility NPDES Permit Number(s) (9 characters)	a. NA
		b.
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. NA
		b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	
	☐ NA	SULZER INC.
5.2	Parent Company's Dun & Bradstreet Number	
	☐ NA	001826957

PART II. CHEMICAL IDENTIFICATION

SECTION 1. TOXIC CHEMICAL IDENTITY

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	N100
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	COPPER COMPOUNDS
1.3	Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes". Generic Name must be structurally descriptive).
	NA

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

EPA United States Environmental Protection Agency

TOXIC CHEMICAL RELEASE INVENTORY FORM A

WHERE TO SEND COMPLETED FORMS:
1. EPCRA Reporting Center, P.O. Box 3348, Merrifield, VA 22116-3348, ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE (See instructions in Appendix F)

Enter "X" here if this is a revision: [ ]

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR: 1996

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 2 trade secret?
[ ] Yes. (Answer question 2.2; Attach substantiation forms)
[X] No: Do not answer 2.2; continue with Section 3.

2.2 If yes in 2.1, is this copy: [ ] Sanitized [ ] Unsanitized

SECTION 3. CERTIFICATION (Important: Please read and sign after completing the statement.)

I hereby certify that to the best of my knowledge and belief, for the toxic chemical listed in this statement, the annual reportable amount, as defined in 40 CFR 372.27(a), did not exceed 500 pounds for this reporting year and that the chemical was manufactured, processed, or otherwise used in an amount not exceeding 1 million pounds during this reporting year.

Name and official title of owner/operator or senior management official: LAURENCE F. MILES, MANAGER, FACILITIES

Signature:

Date Signed: 07-15-97

SECTION 4. FACILITY IDENTIFICATION

4.1
- Facility or Establishment Name: SULZER METCO (US), INC.
- TRI Facility ID Number: 11801PRKNL220MI
- Street Address: 220 MILLER PLACE
- City: HICKSVILLE
- County: NASSAU
- State: NY
- Zip Code: 11801-
- Mailing Address (if different from street address): 1101 PROSPECT AVENUE
- City: WESTBURY
- State: NY
- Zip Code: 11590-0201

PUT LABEL HERE

4.2 **This report contains information for:**
(Important: check c if applicable; a and b have been intentionally left blank)
c. [ ] A Federal facility

4.3 **Technical Contact**
- Name: MICHAEL S. LYDON
- Telephone Number (include area code): (516)338-2337

EPA United States Environmental Protection Agency

TOXIC CHEMICAL RELEASE INVENTORY FORM A

SECTION 4. FACILITY IDENTIFICATION (CONTINUED)

4.4	Intentionally left blank						
4.5	SIC Code (4-digit)	a. 3399	b. NA	c.	d.	e.	f.

4.6	Latitude and Longitude	Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
		040	47	10	073	31	00

4.7	Dun and Bradstreet Number(s) (9 digits)	a. 938686300
		b.
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a. NYD981558570
		b. NA
4.9	Facility NPDES Permit Number(s) (9 characters)	a. NA
		b.
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a. NA
		b.

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	
	☐ NA	SULZER INC.
5.2	Parent Company's Dun & Bradstreet Number	
	☐ NA	001826957

PART II. CHEMICAL IDENTIFICATION

SECTION 1. TOXIC CHEMICAL IDENTITY

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	N096
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	COBALT COMPOUNDS
1.3	Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes". Generic Name must be structurally descriptive).
	NA

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

EPHM-2 REV. 5/97

STATE OF CONNECTICUT

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST PROGRAM
79 Elm St., Hartford, CT 06106-5127

BK027825
PINW041202 FOR STATE USE ONLY

Please type (or print) (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No. CRW 3 3 9 8	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but may be required by State law.

3. Generator's Name and Mailing Address
Sabra Plastics USA Inc
1101 Freeport Avenue
Westbury, NY 11590

4. Generator's Phone ( ) 516 338-2097

A. State Manifest Document Number: CT F 1239398

B. G.S.I. (Gen. Site Address): SAME

5. Transporter 1 Company Name: Clean Harbors Environmental Inc
6. US EPA ID Number: MAD980503253

7. Transporter 2 Company Name
8. US EPA ID Number

C. S.T.I. (Trans. Lic. Plate #): 69945 PA, NY
D. Tran. Phone ( )

9. Designated Facility Name and Site Address
Clean Harbors Of Conn Inc
51 Broderick Road
Bristol, CT, 06010
10. US EPA ID Number: CTD000304188

E. S.T.I. (Trans. Lic. Plate #): [illegible]
F. Tran. Phone ( )
G. State Facility's ID (Not Required)
H. Facility's Phone [illegible]

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. NON DOT REGULATED MATERIAL, (CERAMIC CHIPS), NONE, NONE	001	TP	0001.00		EPA NONE / STATE [illegible]
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
a.
b.
c.
d.

K. Handling Codes for Wastes Listed Above

	Interim	Final		Interim	Final
a.			c.		
b.			d.		

15. Special Handling Instructions and Additional Information EMERGENCY PHONE #: (800) 483-5719
Tin ch924128

Point of Departure:

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR,** if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: PETER DI ARMANDO | Signature | Month 0 5 Day 2 1 Year 0 5

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: VICTOR C. [illegible] | Signature | Month 0 5 Day 2 1 Year 0 5

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: The appropriate permits for and will accept this waste | Signature generator is shipping | Month Day Year

GENERATOR — TRANSPORTER — FACILITY

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802. FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILL RESPONSE AT (860) 424-3338

COPY 8: GENERATOR RETAINS

CT F 1239398

EPA Form 8700-22 (Rev. 9/91) Form Approved OMB No.2050-0039.

COPY 8: GENERATOR RETAINS

PARTIAL INSTRUCTIONS FOR COMPLETING THE CONNECTICUT UNIFORM HAZARDOUS WASTE MANIFEST

IMPORTANT: READ ALL INSTRUCTIONS ON THE COVER SHEET BEFORE COMPLETING THIS FORM. ALL 8 COPIES MUST BE TOTALLY LEGIBLE.

GENERAL INFORMATION

The Hazardous Waste Manifest is designed to track waste from the point of generation to final disposal ("cradle to grave"). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete, incorrect or illegible manifests are violations of the law, and could subject you to civil or criminal liabilities as specified in Connecticut Hazardous Waste Management Regulations.

The Connecticut manifest contains 8 copies. ALL COPIES MUST BE LEGIBLE! (Illegible manifests submitted to the State will be returned to the Generator for proper completion). This form is designed for use on a 12 pitch (elite) typewriter. A firm ball point pen may also be used only if you press down HARD. The eight copies must be filed with the appropriate parties as they are completed.

* Be aware that hazardous wastes manifested into or out of Connecticut are subject to a hazardous waste assessment per C.G.S. 22a-132. Please contact the Dept. of Revenue Services at (860) 541-3225 for more information.

COPY DISTRIBUTION is as follows:

COPY 1: FACILITY MAILS TO DESTINATION STATE: This copy is mailed by the Facility to the responsible state agency in the state in which the facility is located, upon receipt of the waste.

COPY 2: FACILITY MAILS TO GENERATOR STATE: This copy is mailed by the facility to the appropriate agency in the Generator's state, upon receipt of the waste.

COPY 3: FACILITY MAILS TO GENERATOR: This copy is mailed to the generator by the facility upon receipt of the waste. This copy is the generator's documentation that the facility received the waste.

COPY 4: FACILITY-RETAINS: This copy is retained by the facility for his records.

COPY 5: TRANSPORTER 1 RETAINS: This copy is retained by the Transporter for his records. This copy is the Transporter's documentation that this shipment was transported from the generator to the facility.
NOTE: If a continuing Transporter is used, the generator is responsible for supplying him with a legible photocopy of the manifest, which must contain signatures where required.

COPY 6: GENERATOR MAILS TO DESTINATION STATE: This copy is mailed by the generator to the appropriate agency in the destination state (the state in which the facility is located).

COPY 7: GENERATOR MAILS TO GENERATOR STATE: This copy is mailed by the generator to the appropriate state agency in his state.

COPY 8: GENERATOR RETAINS: This copy is retained by the generator for his records.

GENERATOR SECTION

Item 12: CONTAINERS (NO. & TYPE) - Enter the number of containers for each waste and the appropriate abbreviation from TABLE 1 (below) for the type of container used.

TABLE 1 - CONTAINER TYPE

DM = Metal drums, barrels, kegs	TP = Tanks, Portable	CM = Metal boxes, cartons, cases (incl. roll-offs)
DW = Wooden drums, barrels, kegs	TT = Cargo Tanks (tank trucks)	CW = Wooden boxes, cartons, cases
DF = Fiberboard or plastic drums, barrels, kegs	TC = Tank Cars	CF = Fiber or plastic boxes, cartons, cases
CY = Cylinders	DT = Dump Trucks	BA = Burlap, cloth, paper, plastic bags

Item 13: TOTAL QUANTITY - Enter the total quantity of waste described on each line, relative to the units used in Item 14.

Item 14: UNIT (Wt./Vol.) - Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line. DO NOT use fractions.

TABLE II - UNITS OF MEASURE

G = Gallons (liquids only)	L = Liters (liquids only)	Y = Cubic Yards
P = Pounds	K = Kilograms	N = Cubic Meters
T = Tons (2000 lb.)	M = Metric Tons (1000 kg.)	

TRANSPORTER SECTION

Item 17: TRANSPORTER 1 ACKNOWLEDGEMENT - Print or type the name of the person accepting the waste on behalf of the 1st transporter. That person must acknowledge acceptance of the waste described on the manifest by signing & entering the date of receipt.

Item 18: TRANSPORTER 2 ACKNOWLEDGEMENT - If applicable, follow instructions for Item 17 for Transporter 2.

DESIGNATED FACILITY (TSDF) SECTION

Item K: HANDLING CODES (TSDF COMPLETES) - Refer to Item K in full instructions.

TABLE III - PROCESS CODES/HANDLING METHOD CODES

STORAGE:	S01 (Containers)	S02 (Tank)	S03 (Waste Pile)	S04 (Surface Impoundment)	S05 (Other - Specify)
TREATMENT:	T01 (Tank)	T02 (Surface Impoundment)	T03 (Incinerator)	(Other Treatment - specify code from 40 CFR 265 Appendix I).	
DISPOSAL:	D80 (Injection well)	D81 (Landfill)	D82 (Land Application)	D84 (Surface Impoundment)	
			D83 (Ocean Disposal)	D85 (Other - Specify)	

Item 19: DISCREPANCY INDICATION SPACE - The authorized representative of the designated facility's owner or operator must note in this space any significant discrepancy between the waste described on the manifest & the waste actually received at the facility. Any rejected materials should be listed here, along with an indication of the disposition of the rejected materials. **Any applicable Discrepancy or Rejection reporting requirements must also be complied with. Federal & State regulations vary.**

Item 20: FACILITY OWNER OR OPERATOR CERTIFICATION - Print or type the name of the person accepting the waste on behalf of the owner or operator of the designated TSDF. That person must acknowledge acceptance of the waste described on the manifest by signing (by hand) & entering the date of the receipt. The signature of the authorized TSDF agent indicates acceptance (except for items specified in Item 19) & agreement with the statements on this manifest.

* NOTE: FOR INTERSTATE SHIPMENTS (between different states) YOU MAY BE REQUIRED TO COMPLY WITH THE MANIFESTING REQUIREMENTS OF BOTH THE DESTINATION & GENERATOR STATES REGARDING THE COMPLETION OF SPECIFIC INFORMATION INCLUDED IN LETTERED ITEMS A-K. You may wish to contact State agencies for more information on this subject.

REMINDER: ALL 8 COPIES OF THIS FORM MUST BE TOTALLY LEGIBLE.

Public reporting burden for this collection of information is estimated to average: 37 minutes for generator, 15 minutes for transporter, 10 minutes for treatment, storage and disposal facility. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to CHIEF, INFORMATION POLICY BRANCH, PM-223, U.S. ENVIRONMENTAL PROTECTION AGENCY, 401 M STREET SW, WASHINGTON, D.C. 20460; and to the OFFICE OF INFORMATION AND REGULATORY AFFAIRS, OFFICE OF MANAGEMENT AND BUDGET, WASHINGTON, D.C. 20503.

WEEKLY INSPECTION REPORT

FILL OUT COMPLETLY AND FORWARD TO PATRICK TIGHE

MILLER PLACE FACILITY

METCO DIVISION PERKIN-ELMER
220 MILLER PLACE
HICKSVILLE, NEW YORK 11801

COORDINATOR: DICK UREVICH

INSPECTED BY: G. MAHLMEISTER

EMPLOYEE #: 14764

DATE OF INSPECTION: 4-9-92

LOCATION OF MATERIAL: MIPIEI

INVENTORY OF MATERIAL:

MATERIAL Profile #	DESCRIPTION/ORIGIN	CONTAINER TYPE 55 DOT	QUANTITY
AB 2876			
AB 2877	UNUSED MATERIAL		7 ✓
AB 2878			
AB 2879			
AC 9217	MAX VAC	OUTSIDE 188	INSIDE ~~22~~ 210 ✓
AC 9218	CERAMIC BAGHOUSE	WILL BE RECLAIMED	~~22~~ 16 ✓ (R)
AC 9219	METAL BAGHOUSE	RECLAIMED 28	~~29~~ 2 (R)
		TOTAL	80-85

ALL CONTAINERS WITH: PROPER LABELS Profile #'s

SEALED TOP yes

INTACT - NO LEAKAGE yes

SIGNS CLEARLY VISIBLE: HAZARDOUS WASTE / SCRAP POWDER / NO SMOKING yes

AISLE SPACE TO ALLOW UNOBSTRUCTED MOVEMENT yes

ID - For Official Use Only														
C													T/A	C
W														1

X. Description of Hazardous Wastes *(continued from front)*

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
F001	F002	F003	F005		
7	**8**	**9**	**10**	**11**	**12**

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	**20**	**21**	**22**	**23**	**24**
25	**26**	**27**	**28**	**29**	**30**

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number 40 CFR Part 261.33 for each chemical substance your installation handles which may be hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	**38**	**39**	**40**	**41**	**42**
43	**44**	**45**	**46**	**47**	**48**

D. Listed Infectious Wastes. Enter the four-digit number 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. *(See 40 CFR Parts 261.21 - 261.24)*

- [X] 1. Ignitable *(D001)*
- [X] 2. Corrosive *(D002)*
- [X] 3. Reactive *(D003)*
- [ ] 4. Toxic *(D000)*

XI. 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.

Signature	Name and Official Title *(type or print)*	Date Signed
Patrick A. Tighe	Patrick A. Tighe Superintendent Facilities Coord.	January 4, 1990

Estimated burden: Public reporting burden for this collection of information is estimated to be 3 hours, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

17. (Continued)

y. Indicate the effect that the waste minimization practices have had on the toxicity of wastewater generated by this operation:

___Increase in the concentration of hazardous constituents
___Decrease in the concentration of hazardous constituents
___No effect on the concentration of hazardous constituents

z. Do this site's waste minimization programs reduce the cost of producing the products or services that generate wastewater?

Yes ___ No ___

aa. Do this site's waste minimization programs reduce the cost of waste management?

Yes ___ No ___

bb. Was it necessary for this site to make any capital investments for equipment in order to implement its waste minimization programs?

Yes ___ No ___

cc. Does this site intend to recover the cost of these capital investments through decreased production costs or waste management costs?

Yes ___ No ___

18. Attach a production process block diagram illustrating the sequence in which all machinery manufacturing, rebuilding, and maintenance operations are conducted, and illustrating water use for each operation that uses process water. Example diagrams are included on pages 20 through 22 of the instructions to this data collection portfolio. Be sure to:

- Identify all unit operations with one of the terms listed in Question 16. Include even those operations that do not use process water.
- Show a separate block on the diagram each time an operation occurs in the production process.
- Identify all duplicate production lines within each production process.
- Air pollution control devices should also be included.
- Include use of noncontact cooling water.
- Indicate the destination of all water used in a process, including evaporation, use in other processes, discharge to treatment, etc.
- Any recycle or reuse should also be indicated clearly on the diagram.
- Flow rates should be assigned to all streams. If flow is intermittent, provide amount and frequency; for example, "200 gallons, twice a month" or "100 gallons once per year".

SHIFT-TIME: 0500-

DAY & DATE: 9-16-05

JOB #: MS 1011633

QUOTE / TASK #:

CLIENT: Sulzer Metco US Inc.

BILLING ADDRESS:
Sulzer Metco US Inc.
1101 Prospect Ave
Westbury, NY 11590-0000

CleanHarbors
ENVIRONMENTAL SERVICES®

P.O. #/COD AMOUNT:

T&M ☐ CONTRACT ☐ CHANGE ORDER ☐

JOB LOCATION: 1101 Prospect Ave
Westbury NY

CONTACT:

JOB DESCRIPTION: Pump Out

LABOR:

NAME	TITLE	PER DIEM	ST	OT	DT	COMMENTS:
	SUPERVISOR					
	FOREMAN					
Troy J Bruno	EQ. OPERATOR					
	EQ. OPERATOR					
	FIELD TECH					
	FIELD TECH					
	FIELD TECH					

DISPOSAL: CTC

DESTINATION	AMOUNT	MANIFEST #
LIQUID (BULK)	1463 GALS.	CTF 1119225
SOLID (BULK)	TONS/YDS.	
LIQUID (DRUMS)	# OF DRUMS AMT. GAL.	
SOLID (DRUMS)	# OF DRUMS AMT. GAL.	
LOADING TIME	START	END

JOB COMPLETED ☒ YES ☐ NO

MATERIAL:

QTY.	DESCRIPTION
	SPEEDI DRI
	DRUM TYPE:
	DRUM TYPE:
	RAIN GEAR
	POLY SHEETING ROLL
	POLY BAG ROLL
	SORBENT PADS BL.
	SORBENT BOOM EA.
	SORBENT BOOM BL.
	SORBENT SWEEP BL.
	SORBENT SNARE (ON ROPE) BL
	ROPE TYPE:
	DEGREASER: WHAT TYPE?
	5 GAL BUCKET
	DUCT TAPE
	SSH&SP
	POLY LINER (ROLL OFF)

NUMBER OF COMPLETE INITIAL PPE SETS	NUMBER OF EMPLOYEES IN PPE

PPE LEVEL (CIRCLE ONE)
A B C D

PPE TYPE (CIRCLE ONE)
1 2 3 4 5

ADDITIONAL PPE ITEMS USED AFTER INITIAL SETS

QTY.	DESCRIPTION
	CARTRIDGE TYPE:
	RESP. TYPE:
	SUIT TYPE:
	INNER GLOVE TYPE:
	OUTER GLOVE TYPE:
	AIR BOTTLES

EQUIPMENT:

QTY.	TYPE	FLEET #	# OF HRS	DAILY RATE
	PICK-UP TRUCK			
1	VACUUM TRAILER	3118		
1	TRACTOR	565715		
	VACUUM ST. TRUCK			
	BOX TRUCK			
	VACTOR			
	COMPRESSOR			
	BACKHOE			
	BOBCAT			
	RACK TRUCK			
	METER TYPE:			
	COMMS PACKAGE			

ANALYSIS:

QTY.	TYPE	DESTINATION

SUBCONTRACTORS:

NAME OF COMPANY	DESCRIPTION

SIGNATURE: Troy J Bruno 5898
(CLEAN HARBORS REPRESENTATIVE)

Date: 9-16-05

Customer: Sulzer Metco US Inc
(Company Name)

By: Michael J. Mueller
(Signature)

MICHAEL J. MUELLER
(Print Name)

VP CERAMICS & CLAD COMPOSITES
(Title)

Date: 9-16-05

CHI 115 Rev. 12/04

IMPORTANT – PAYMENT TERMS ON BACK

(CUSTOMER)

Payment Terms

By signing this Daily Work Sheet, Customer acknowledges receipt of the labor, equipment and materials described herein, and agrees to pay Clean Harbors for same in accordance with Clean Harbors' published Rate Schedule. Customer's obligation to pay the amounts due pursuant to this Daily Work Sheet shall not be conditioned upon or limited by the types, amounts or availability of insurance coverage.

Clean Harbors' standard terms of payment are net fifteen (15) days from the date of invoice. Interest shall accrue at the rate of one and one half (1.5%) percent per month, or at the maximum rate allowed by law, after fifteen (15) days. In the event that legal or other action is required to collect unpaid balances or invoices, Customer agrees to pay all costs of collection, including reasonable attorneys' fees, which may be incurred by Clean Harbors. "Legal or other action" as used above shall include bankruptcy and insolvency proceedings.

Customer hereby assigns to Clean Harbors all rights to any insurance payments that Customer may be entitled to receive to pay for the labor, equipment or materials provided under this Daily Work Sheet and hereby authorizes its insurance company or agent to pay Clean Harbors directly.

Customer agrees that Clean Harbors shall not be responsible for pre-existing contamination at the job location, natural resource damage, or for incidental, consequential or special damages, including loss of use or lost profits, resulting from or arising out of the performance of services hereunder by Clean Harbors, its employees, agents and/or subcontractors.

United States
Environmental Protection
Agency

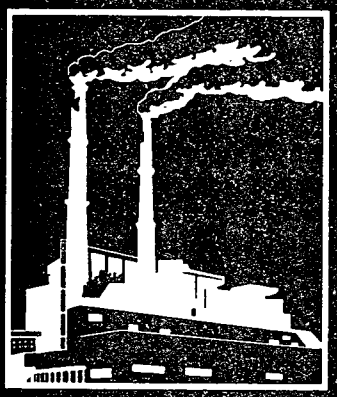
Office of Pollution
Prevention and Toxics
Washington, DC 20460

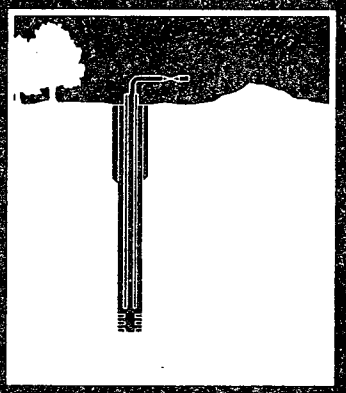
January 1993
EPA 745-K-94-001

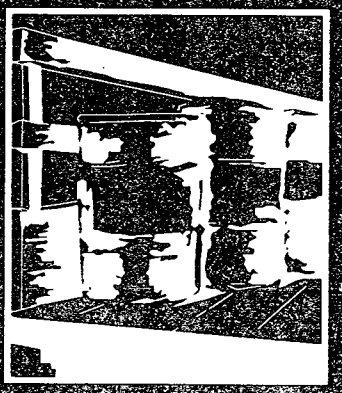
EPA

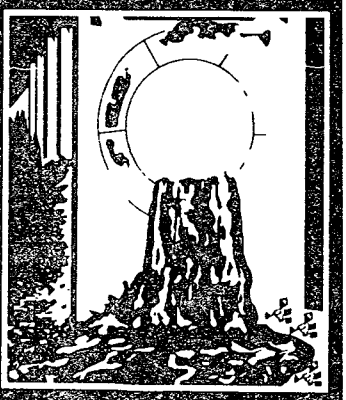
Toxic Chemical Release Inventory Reporting Form R and Instructions

Revised 1993 Version









Section 313

of the Emergency Planning and Community Right-to-Know Act

(Title III of the Superfund Amendments and Reauthorization Act of 1986)

Recycled/Recyclable
Printed with Soy/Canola Ink on paper that contains at least 50% recycled fiber

EPA *Toxic Chemical Release Inventory Form R and Instructions for 1993*

Important Information for Reporting Year 1993

The following information updates or corrects the Form R and Instructions for 1993. No other changes or modifications have been made to the Form R or instructions other than those listed here.

- n-Dioctyl phthalate (CAS # 117-84-0) has been removed from the toxic chemical list (58 FR 51785) and thus removed from Table II. Reports are not required for this chemical for reporting year 1993 and beyond.

- The approval expiration date shown on page one of the Form R is 11/92. This is the date that the OMB approval, given on May 19, 1992, expired. However, due to the passage of the Pollution Prevention Act Implementation provisions of the 1993 Appropriations Act (P.L. 102-879) the Agency may continue to use this Form R until revisions are promulgated pursuant to law. Therefore, even though the expiration date shown on the Form has passed, this Form R is still valid and should be used for all 1993 submissions.

- All references to reporting year 1992 and all other date related references have been changed to reflect the current reporting year. (i.e., Reporting year 1992 has been changed to reporting year 1993; prior year 1991 was changed to prior year 1992, etc.) This change was made for both the Form R and the instructions. In addition, all information which was relevant to only the first year of reporting pollution prevention data elements has been removed.

- The address for the EPCRA reporting center for regular and certified mail is:

  EPCRA Reporting Center
  P.O. Box 3348
  Merrifield, VA 22116-3348
  Attn: Toxic Release Inventory

  For hand delivery or overnight mail, the address is:

  EPCRA Reporting Center
  c/o Computer Based Systems Inc.
  4301 N. Fairfax Drive
  6th Floor, Suite 650
  Arlington, VA 22203

- The back side of the pages of the Form R include a box stating "This page intentionally left blank. Please do not copy double-sided." For data processing reasons the Form R must be submitted single-sided.

- The de minimis level for the toxic chemicals, C.I. Basic Red 1 (CAS # 989-38-8) and p-Nitrosodiphenylamine (CAS # 156-10-5) have been changed to 1%. These chemicals are no longer considered OSHA carcinogens and therefore are not subject to the 0.1% de minimis level.

- Appendix C Common Errors in Completing Form R Reports has been updated to include errors made in completing Section 8 of Form R.

- The State and Regional contacts lists (appendices F and G) have been updated. Appendix H State Waste Reduction Contacts has been replaced with the newly added chemicals. The State Waste Reduction Contacts have been removed.

- On December 1, 1993, EPA issued two rules (58 FR 63496; and 58 FR 63500) finalizing the addition of 34 chemicals to the toxic chemical list. **These chemicals are not to be reported for the 1993 reporting year.** These listings are effective for the 1994 reporting year with the first reports due on July 1, 1995. However, since data on these chemicals must be collected beginning January 1, 1994, a list is provided in Appendix H.

- Appendix I has been renamed *Section 313 Related Materials and Information Access.* The Appendix has been updated to provide current information on guidance documents and information products.

TOXIC RELEASE INVENTORY REPORTING FORM R

Public Reporting Burden

Public reporting burden for this collection of information is estimated to average 43 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Chief, Information Policy Branch (PM-223), U.S. EPA, 401 M Street, SW, Washington, D.C. 20460, Attention: TRI Burden, and to the Office of Information and Regulatory Affairs, Office of Management and Budget Paperwork Reduction Project (2070-0093), Washington, D.C. 20603.

EPA
United States Environmental Protection Agency

FORM R TOXIC CHEMICAL RELEASE INVENTORY REPORTING FORM

Section 313 of the Emergency Planning and Community Right-to-Know Act of 1986, also known as Title III of the Superfund Amendments and Reauthorization Act

TRI FACILITY ID NUMBER

Toxic Chemical, Category, or Generic Name

WHERE TO SEND COMPLETED FORMS:

1. EPCRA Reporting Center
   P.O. Box 3348
   Merrifield, VA 22116-3348
   ATTN: TOXIC CHEMICAL RELEASE INVENTORY
2. APPROPRIATE STATE OFFICE
   (See instructions in Appendix F)

Enter "X" here if this is a revision

IMPORTANT: See instructions to determine when "Not Applicable (NA)" boxes should be checked.

For EPA use only

PART I. FACILITY IDENTIFICATION INFORMATION

SECTION 1. REPORTING YEAR

19 ____

SECTION 2. TRADE SECRET INFORMATION

2.1 Are you claiming the toxic chemical identified on page 3 trade secret?

☐ Yes (Answer question 2.2; Attach substantiation forms) ☐ No (Do not answer 2.2; Go to Section 3)

2.2 If yes in 2.1, is this copy: ☐ Sanitized ☐ Unsanitized

SECTION 3. CERTIFICATION (Important: Read and sign after completing all form sections.)

I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.

Name and official title of owner/operator or senior management official

Signature

Date Signed

SECTION 4. FACILITY IDENTIFICATION

4.1

Facility or Establishment Name

TRI Facility ID Number

Street Address

City

County

State

Zip Code

Mailing Address (if different from street address)

City

State

Zip Code

PUT LABEL HERE

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EPA FORM R

PART I. FACILITY IDENTIFICATION INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
Toxic Chemical, Category, or Generic Name

SECTION 4. FACILITY IDENTIFICATION (Continued)

4.2	This report contains information for: (Important: check only one)	a. ☐ An entire facility			b. ☐ Part of a facility		
4.3	Technical Contact	Name			Telephone Number (include area code)		
4.4	Public Contact	Name			Telephone Number (include area code)		
4.5	SIC Code (4-digit)	a.	b.	c.	d.	e.	f.
4.6	Latitude and Longitude	Latitude			Longitude		
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
4.7	Dun & Bradstreet Number(s) (9 digits)	a.					
		b.					
4.8	EPA Identification Number(s) (RCRA I.D. No.) (12 characters)	a.					
		b.					
4.9	Facility NPDES Permit Number(s) (9 characters)	a.					
		b.					
4.10	Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)	a.					
		b.					

SECTION 5. PARENT COMPANY INFORMATION

5.1	Name of Parent Company	
	☐ NA	
5.2	Parent Company's Dun & Bradstreet Number	
	☐ NA	(9 digits)

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION

TRI FACILITY ID NUMBER
Toxic Chemical, Category, or Generic Name

SECTION 1. TOXIC CHEMICAL IDENTITY

(Important: DO NOT complete this section if you complete Section 2 below.)

1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
1.3	Generic Chemical Name (Important: Complete **only** if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)

SECTION 2. MIXTURE COMPONENT IDENTITY

(Important: DO NOT complete this section if you complete Section 1 above.)

2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers,letters, spaces, and punctuation.)

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY

(Important: Check all that apply.)

3.1	**Manufacture the toxic chemical:**	a. ☐ Produce b. ☐ Import	If produce or import: c. ☐ For on-site use/processing d. ☐ For sale/distribution e. ☐ As a byproduct f. ☐ As an impurity
3.2	**Process the toxic chemical:**	a. ☐ As a reactant b. ☐ As a formulation component	c. ☐ As an article component d. ☐ Repackaging
3.3	**Otherwise use the toxic chemical:**	a. ☐ As a chemical processing aid b. ☐ As a manufacturing aid	c. ☐ Ancillary or other use

SECTION 4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-SITE AT ANY TIME DURING THE CALENDAR YEAR

4.1	☐ (Enter two-digit code from instruction package.)

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
Toxic Chemical, Category, or Generic Name

SECTION 5. RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

			A. Total Release (pounds/ year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.1	Fugitive or non-point air emissions	☐ NA			
5.2	Stack or point air emissions	☐ NA			
5.3	Discharges to receiving streams or water bodies (enter one name per box)				
5.3.1	Stream or Water Body Name				
5.3.2	Stream or Water Body Name				
5.3.3	Stream or Water Body Name				
5.4	Underground injections on-site	☐ NA			
5.5	Releases to land on-site				
5.5.1	Landfill	☐ NA			
5.5.2	Land treatment/ application farming	☐ NA			
5.5.3	Surface impoundment	☐ NA			
5.5.4	Other disposal	☐ NA			

☐ Check here only if additional Section 5.3 information is provided on page 5 of this form.

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
Toxic Chemical, Category, or Generic Name

SECTION 5.3 ADDITIONAL INFORMATION ON RELEASES OF THE TOXIC CHEMICAL TO THE ENVIRONMENT ON-SITE

5.3	Discharges to receiving streams or water bodies (enter one name per box)	A. Total Release (pounds/year) (enter range code from instructions or estimate)	B. Basis of Estimate (enter code)	C. % From Stormwater
5.3.__	Stream or Water Body Name			
5.3.__	Stream or Water Body Name			
5.3.__	Stream or Water Body Name			

SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS

6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTW)

6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers (pounds/year) (enter range code or estimate)	6.1.A.2 Basis of Estimate (enter code)

6.1.B POTW Name and Location Information

6.1.B.__ POTW Name		6.1.B.__ POTW Name	
Street Address		Street Address	
City	County	City	County
State	Zip Code	State	Zip Code

If additional pages of Part II, Sections 5.3 and/or 6.1 are attached, indicate the total number of pages in this box [ ] and indicate which Part II, Sections 5.3/6.1 page this is, here. [ ]
(example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
Toxic Chemical, Category, or Generic Name

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.___ Off-site EPA Identification Number (RCRA ID No.)

Off-Site Location Name

Street Address

City | County

State | Zip Code | Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS

6.2.___ Off-site EPA Identification Number (RCRA ID No.)

Off-Site Location Name

Street Address

City | County

State | Zip Code | Is location under control of reporting facility or parent company? ☐ Yes ☐ No

A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)
1.	1.	1. M
2.	2.	2. M
3.	3.	3. M
4.	4.	4. M

If additional pages of Part II, Section 6.2 are attached, indicate the total number of pages in this box ☐ and indicate which Part II, Section 6.2 page this is, here. ☐ (example: 1, 2, 3, etc.)

Range Codes: A = 1 - 10 pounds; B = 11 - 499 pounds; C = 500 - 999 pounds.

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EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
Toxic Chemical, Category, or Generic Name

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ **Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.**

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b 1 2 3 4 5 6 7 8	7A.1c	7A.1d %	7A.1e Yes ☐ No ☐
7A.2a	7A.2b 1 2 3 4 5 6 7 8	7A.2c	7A.2d %	7A.2e Yes ☐ No ☐
7A.3a	7A.3b 1 2 3 4 5 6 7 8	7A.3c	7A.3d %	7A.3e Yes ☐ No ☐
7A.4a	7A.4b 1 2 3 4 5 6 7 8	7A.4c	7A.4d %	7A.4e Yes ☐ No ☐
7A.5a	7A.5b 1 2 3 4 5 6 7 8	7A.5c	7A.5d %	7A.5e Yes ☐ No ☐

If additional copies of page 7 are attached, indicate the total number of pages in this box ☐ and indicate which page 7 this is, here. ☐ (example: 1, 2, 3, etc.)

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Please do not copy double-sided!

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United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
Toxic Chemical, Category, or Generic Name

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

☐ **Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.**

Energy Recovery Methods [enter 3-character code(s)]

1 ☐ 2 ☐ 3 ☐ 4 ☐

SECTION 7C. ON-SITE RECYCLING PROCESSES

☐ **Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.**

Recycling Methods [enter 3-character code(s)]

1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐

6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐

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EPA
United States Environmental Protection Agency

EPA FORM R

PART II. CHEMICAL-SPECIFIC INFORMATION (CONTINUED)

TRI FACILITY ID NUMBER
Chemical, Category, or Generic Name

SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

All quantity estimates can be reported using up to two significant figures.		Column A 1992 (pounds/year)	Column B 1993 (pounds/year)	Column C 1994 (pounds/year)	Column D 1995 (pounds/year)
8.1	Quantity released *				
8.2	Quantity used for energy recovery on-site				
8.3	Quantity used for energy recovery off-site				
8.4	Quantity recycled on-site				
8.5	Quantity recycled off-site				
8.6	Quantity treated on-site				
8.7	Quantity treated off-site				
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)				
8.9	Production ratio or activity index				

8.10	Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.			
	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)		
8.10.1		a.	b.	c.
8.10.2		a.	b.	c.
8.10.3		a.	b.	c.
8.10.4		a.	b.	c.

8.11	Is additional optional information on source reduction, recycling, or pollution control activities included with this report? (Check one box)	YES ☐	NO ☐

* Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment." Do not include any quantity treated on-site or off-site.

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Please do not copy double-sided!

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A. General Information

Submission of EPA Form R, the Toxic Chemical Release Inventory (TRI) Reporting Form, is required by section 313 of the Emergency Planning and Community Right-to-Know Act (EPCRA, or Title III of the Superfund Amendments and Reauthorization Act of 1986), Public Law 99-499. The information contained in Form R constitutes a "report," and the submission of a report to the appropriate authorities constitutes "reporting."

Reporting is required to provide the public with information on the releases of listed toxic chemicals in their communities and to provide EPA with release information to assist the Agency in determining the need for future regulations. Facilities must report the quantities of both routine and accidental releases of listed toxic chemicals, as well as the maximum amount of the listed toxic chemical on-site during the calendar year and the amount contained in wastes transferred off-site.

The Pollution Prevention Act, passed into law in October, 1990 (Pub. L. 101-508), added reporting requirements to Form R. These requirements affect all facilities required to submit Form R under section 313 of EPCRA. The data was required beginning with reports for calendar year 1991.

A completed Form R must be submitted for each toxic chemical manufactured, processed, or otherwise used at each covered facility as described in the reporting rule in 40 CFR Part 372 (originally published February 16, 1988, in the Federal Register). These instructions supplement and elaborate on the requirements in the reporting rule. Together with the reporting rule, they constitute the reporting requirements. All references in these instructions are to sections in the reporting rule unless otherwise indicated.

A.1 How to Assemble a Complete Report

The Toxic Chemical Release Reporting Form, EPA Form R, consists of two parts:

- Part I, Facility Identification Information (pages 1 and 2); and
- Part II, Chemical-Specific Information (pages 3-9).

Most of the information required in Part I of Form R can be completed, photocopied, and attached to each chemical-specific report. However, Part I of each Form R submitted must have an original signature on the certification statement and the trade secret designation must be entered as appropriate. Part II must be completed separately for each toxic chemical or chemical category. Because a complete Form R consists of at least 9 unique pages, any submissions containing less than 9 unique pages is not a valid submission.

A complete report for any listed toxic chemical that is not claimed as a trade secret consists of the following completed parts:

- Part I with an original signature on the certification statement (Section 2); and
- Part II (Section 8 is now mandatory).

Staple all 9 pages of each report together. If you check yes on Part II, Section 8.11, you may attach additional information on pollution prevention activities at your facility.

A.2 Trade Secret Claims

For any toxic chemical whose identity is claimed as a trade secret, you must submit to EPA two versions of the substantiation form as prescribed in 40 CFR Part 350, published July 29, 1988, in the Federal Register (53 FR 28772) as well as two versions of Form R. One set of forms, the "unsanitized" version, should provide the actual identity of the toxic chemical. The other set of forms, the "sanitized" version, should provide only a generic identity of the toxic chemical. If EPA deems the trade secret substantiation form valid, only the sanitized set of forms will be made available to the public.

Use the order form in this document to obtain copies of the rule and substantiation form. Further explanation of the trade secret provisions is provided in Part I, Sections 2.1 and 2.2, and Part II, Section 1.3, of the instructions.

In summary, a complete report to EPA for a toxic chemical claimed as a trade secret must include all of the following:

- A completed "unsanitized" version of a Form R report including the toxic chemical identity (staple the pages together);

- A sanitized version of a completed Form R report in which the toxic chemical identity items (Part II, Sections 1.1 and 1.2) have been left blank but in which a generic chemical name has been supplied (Part II, Section 1 . 3) (staple the pages together);

- A completed "unsanitized" version of a trade secret substantiation form (staple the pages together); and

- A sanitized version of a completed trade secret substantiation form (staple the pages together).

Securely fasten all four reports together.

Some states also require submission of both sanitized and unsanitized reports for toxic chemicals whose identity is claimed as a trade secret. Others require only a sanitized version. Facilities may jeopardize the trade secret status of a toxic chemical by submitting an unsanitized version of Form R to a state agency or Indian tribe that does not require unsanitized forms. You may identify an individual State's submission requirements by contacting the appropriate state-designated Section 313 contact (see Appendix F).

A.3 Recordkeeping

Sound recordkeeping practices are essential for accurate and efficient TRI reporting. It is in the facility's interest, as well as EPA's, to maintain records properly.

Facilities must keep a copy of each Form R report filed for at least three years from the date of submission. These reports will be of use in subsequent years when completing future Form R reports.

Facilities must also maintain those documents, calculations, worksheets, and other forms upon which they relied to gather information for prior Form R reports. In the event of a problem with data elements on a facility's Form R, EPA may request documentation from the facility that supports the information reported. In the future, EPA may conduct data quality reviews of past Form R submissions. An essential component of this process would be to review a facility's records for accuracy and reliability.

A partial list of records, organized by year, that a facility should maintain include:

- Previous years' Form Rs;
- Section 313 Reporting Threshold Worksheets;
- Engineering calculations and other notes;
- Purchase records from suppliers;
- Inventory data;
- EPA (NPDES) permits;
- EPCRA Section 312, Tier II Reports;
- Monitoring records;
- Flowmeter data;
- RCRA Hazardous Waste Generator's Report;
- Pretreatment reports filed by the facility with the local government;
- Invoices from waste management companies;
- Manufacturer's estimates of treatment efficiencies;
- RCRA Manifests; and
- Process diagrams that indicate emissions and releases.

A.4 When the Report Must be Submitted

The report for any calendar year must be submitted on or before July 1 of the following year (e.g., the report for calendar year 1993, January-December, must be submitted on or before July 1, 1994).

Voluntary Revision of a Previous Submission

Voluntary revisions must be submitted on a Form R identical to the version originally submitted to EPA for that reporting year. The Emergency Planning and Community Right-to-Know Information Hotline can help you identify the version of Form R used for each reporting year.

For the 1991 reporting year and beyond, enter "X" in the space marked "Enter 'X' here if this is a revision" on page 1 of the form if you are making a voluntary revision to a previous Form R submission. If you have obtained the Document Control Number (DCN) of the original submission from EPA, enter that number in red ink in any available space on page 1 of the form. Enter the revised data to the Form R and circle all changes from the original submission in red ink. Sign the certification statement and provide a current date.

For reporting years prior to 1991, there are two options for making voluntary revisions. The first is to submit a photocopy of the original Form R submission (from your file), with corrections made in red ink. Write the words "VOLUNTARY REVISION," and the Document Control Number (DCN), if available, on page 1 of the Form R, and re-sign and re-date the certification statement on page 1.

The second is to obtain a blank Form R for the reporting year affected by the correction(s). Complete all data elements on this Form, but circle with red ink those data elements that you have changed. A cover letter should be included to clarify exactly which voluntary revisions you have made.

Send the entire completed or revised Form R report to EPA and the appropriate state agency (or the designated official of an Indian tribe). Submissions for the next calendar year are not considered revisions of a previous years data.

A.5 Where to Send the Form R

Form R submission must be sent to both EPA and the State (or the designated official of an Indian tribe). If a Form R is not received by both EPA and the State (or the designated official of an Indian tribe), the submitter is considered out of compliance and subject to enforcement action.

Send reports to EPA by regular or certified mail to:

EPCRA Reporting Center
P.O. Box 3348
Merrifield, VA 22116-3348
Attn: Toxic Chemical Release Inventory

Overnight mail and hand-delivered submissions only should be addressed to:

EPCRA Reporting Center.
c/o Computer Based Systems Inc.
4301 N. Fairfax Dr.
6th Floor, Suite 650
Arlington, VA 22203

In addition, you must also send a copy of the report to the State in which the facility is located. ("State" also includes: the District of Columbia, the Commonwealth of Puerto Rico, Guam, American Samoa, the U.S. Virgin Islands, the Northern Mariana Islands, and any other territory or possession over which the U.S. has jurisdiction.) Refer to Appendix F for the appropriate State submission addresses.

Facilities located on Indian land should send a copy to the Chief Executive Officer of the applicable Indian tribe. Some tribes have entered into a cooperative agreement with States; in this case, Form R submissions should be sent to the entity designated in the cooperative agreement.

Submission of section 313 reports in magnetic media and computer-generated facsimile formats has been approved by EPA. EPA has developed a package called the "Toxic Chemical Release Inventory Reporting System." The easy-to-use diskette comes with complete instructions for its use. It also provides prompts and messages to help you report according to EPA instructions. For copies of the diskette you may call the EPCRA Hotline.

Many firms are offering computer software to assist facilities in producing magnetic media submissions or computer-generated facsimiles of Form R reports. To ensure accuracy, EPA will only accept magnetic media submissions and computer-generated facsimiles that meet basic specifications established by EPA. To determine if software offered by a firm meets these specifications, EPA reviews and approves all software upon request. Call the Emergency Planning and Community Right-to-Know Information Hotline to identify the software that has been approved by EPA for the current reporting year.

It should be noted, however, that some States may accept only hard copies of Form R. If this is the case, a magnetic media or computer-generated facsimile may be unacceptable.

A.6 How to Obtain Forms and Other Information

A copy of Form R is included in this booklet. Remove this form and produce as many photocopies as needed. Related guidance documents may be obtained from:

U.S. EPA
P.O. Box 42419
Cincinnati, OH 45242

See Appendix I for the document request form and more information on available documents.

Questions about completing Form R may be directed to the Emergency Planning and Community Right-to-Know Information Hotline at the following address or telephone numbers.

Emergency Planning and Community
Right-to-Know Information Hotline
U.S. Environmental Protection Agency
401 M Street, S.W. (5101)
Washington, DC 20460

(800) 535-0202 or (703) 412-9877; TDD # (800) 553-7672
from 8:30 am - 7:30 pm Eastern Time
(Mon-Fri, except Federal Holidays.)

EPA Regional Staff may also be of assistance. Refer to Appendix G for a list of EPA Regional Offices.

A.7 Who Must Submit this Form

Section 313 of EPCRA requires that reports be filed by owners and operators of facilities that meet all three of the following criteria:

- The facility has 10 or more full-time employees; and
- The facility is included in Standard Industrial Classification (SIC) Codes 20 through 39; and
- The facility manufactures (defined to include importing), processes, or otherwise uses any listed toxic chemical in quantities equal to or greater than the established threshold in the course of a calendar year.

B. How To Determine If Your Facility Must Submit EPA Form R

(See Figure 1 for more information.)

B.1 Full-Time Employee Determination

A "full-time employee," for purposes of section 313 reporting, is defined as 2,000 work hours per year. This definition is dependent only upon the number of hours worked by all employees for the facility during the calendar year and not the number of persons working. To determine the number of full-time employees working for your facility, add up the hours worked by all employees during the calendar year, including contract employees and sales and support staff working for the facility, and divide the total by 2,000 hours. In other words, if the total number of hours worked by all employees is 20,000 hours or more, your facility meets the ten employee threshold.

Examples include:

- A facility consists of 11 employees who each worked 1500 hours for the facility in a calendar year. Consequently, the total number of hours worked by all employees for the facility during the calendar year is 16,500 hours. The number of full-time employees for this facility is equal to 16,500 hours divided by 2,000 hours per full-time employee, or 8.3 full-time employees. Therefore, even though 11 persons worked for this facility during the calendar year, the number of hours worked is equivalent to 8.3 full-time employees. This facility does not meet the employee criteria and is not subject to section 313 reporting.

- Another facility consists of 6 workers and 3 sales staff. The 6 workers each worked 2,000 hours for the facility in the calendar year. The sales staff also each worked 2,000 hours in the calendar year although they may have been on the road half of the year. In addition, 5 contract employees were hired for a period during which each worked 400 hours for the facility. The total number of hours is equal to the time worked by the workers at the facility (12,000 hours), plus the time worked by the sales staff for the facility (6,000 hours), plus the time worked by the contract employees at the facility (2,000 hours), or 20,000 hours. Dividing the 20,000 hours by 2,000 yields 10 full-time employees. This facility has met the full-time employee criteria and may be subject to reporting if the other criteria are met.

B.2 Primary SIC Code Determination

Standard Industrial Classification (SIC) codes 20-39 are covered by the rule and are listed in Table I. The first two digits of a 4-digit SIC code define a major business sector, while the last two digits denote a facility's specialty within the major sector. If you are not familiar with the SIC codes that apply to your facility, contact your trade association, Chamber of Commerce, or legal counsel. For a detailed description of 4-digit SIC codes, refer to the "Standard Industrial Classification Manual 1987." Clothbound editions are available in most major libraries or may be ordered through the National Technical Information Service, 5285 Port Royal Road, Springfield, VA, 22161, (703) 487-4650. The access number for the clothbound manual is PB87-100012, and the price is $30.00.

Section 313 requires that reports be filed by "facilities," which are defined as "all buildings, equipment, structures, and other stationary items which are located on a single site or on contiguous or adjacent sites and which are owned or operated by the same person." The SIC code system, however, classifies businesses not as "facilities," but as "establishments," which are defined as "distinct and separate economic activities [that] are performed at a single physical location."

Guidelines for using these definitions to determine primary SIC codes for facilities are presented in the following subsections.

B.2.a Multi-Establishment Facilities

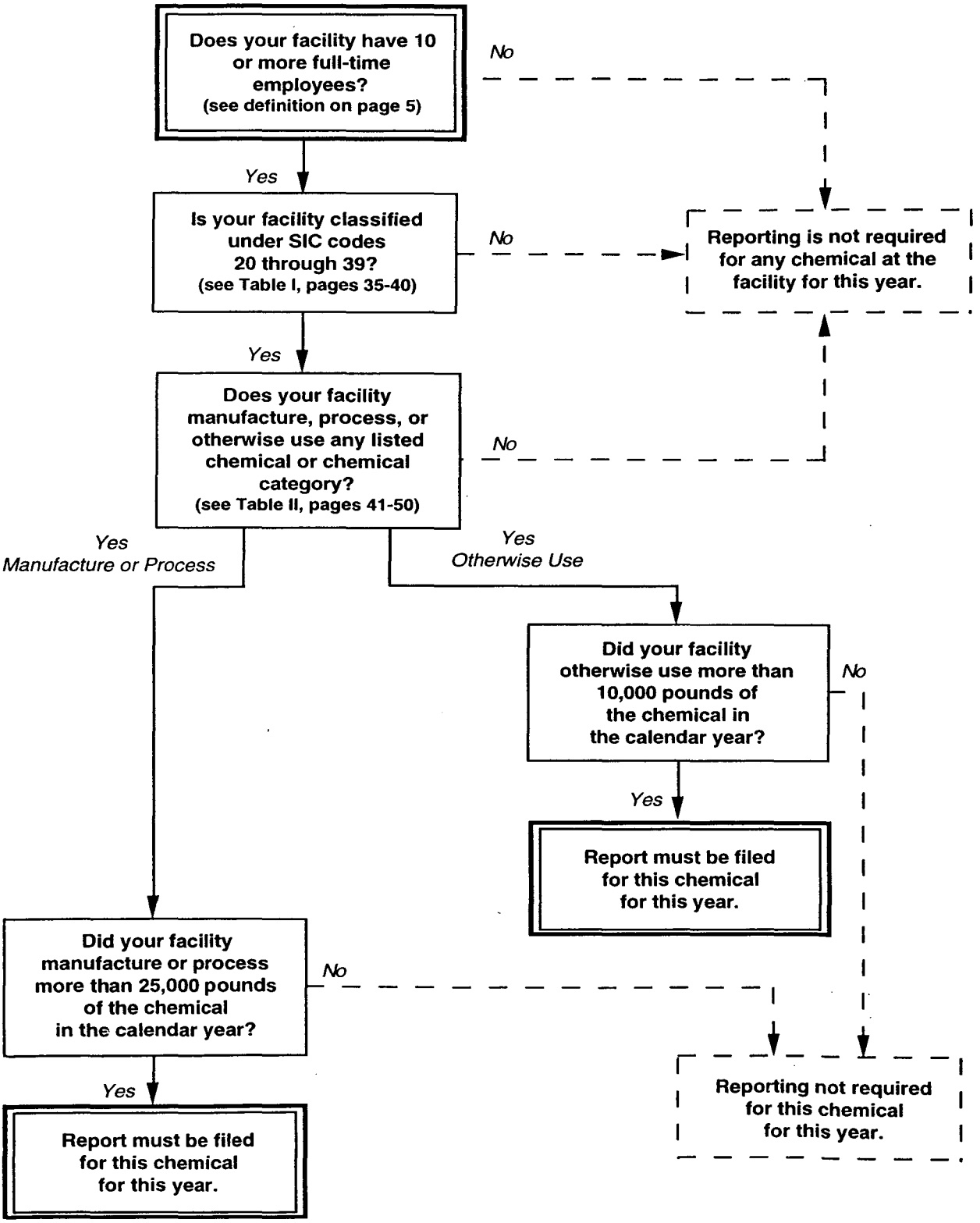
Your facility may include multiple establishments that have different SIC codes. If so, calculate the value of the products produced or shipped from each establishment within the facility and then use the following rule to determine if your facility meets the SIC code criterion:

- If the total value of the products shipped from or produced at establishments with primary SIC codes between 20 and 39 is greater than 50 percent of the value of the entire facility's products and services, the entire facility meets the SIC code criterion.

- If any one establishment with a primary SIC code between 20 and 39 produces or ships products whose value exceeds the value of products and services produced or shipped by any other establishment within the facility, the facility also meets the SIC code criterion.

Figure 1

Determining Applicability of Section 313 Requirements



The value of production attributable to a particular establishment may be isolated by subtracting the value of products obtained from other establishments within the same facility that are incorporated into its final products. This procedure eliminates the potential for "double counting" production in situations where establishments are engaged in sequential production activities at a single facility.

Examples include:

- One establishment in a gold mining facility is engaged primarily in the exploration of gold deposits, developing mines, and mining gold. This establishment deploys several means to mine the gold, including crushing, grinding, gravity concentration, froth flotation, amalgamation, cyanidation, and the production of bullion at the mine and mill sites (these processes are classified under SIC code 1041). All of the ore discovered through this establishment is delivered to a second establishment which is primarily engaged in rolling, drawing, and extruding the gold for sale and distribution. The smeltering establishment in the facility is classified under SIC code 3339. The facility could calculate the value of production for each establishment separately (both SIC code 1041 and 3339 having separate values). Alternatively, the facility could determine the value of the smelter operation by subtracting the value of the ore produced from the value of entire facility's production (Gross value of facility - SIC code 1041 value = Value for SIC code 3999).

- A food processing establishment in a facility processes crops grown at the facility in a separate establishment. The facility could base the value of the products of each establishment on the total production value of each establishment. Alternatively, the facility could first determine the value of the crops grown at the agricultural establishment, and then calculate the contribution of the food processing establishment by subtracting the crop value from the total value of the product shipped from the processing establishment. (Value of product shipped from processing - crop value = value of processing establishment)

A covered multi-establishment facility must make toxic chemical threshold determinations and, if required, must report all relevant information about releases, source reduction, recycling, and waste treatment associated with a listed toxic chemical for the entire facility, even from establishments that are not in SIC codes 20-39. EPA realizes, however, that certain establishments in a multi-establishment facility can be, for all practical purposes, separate business units. Therefore, individual establishments may report releases separately, provided that the total releases for the whole facility is represented by the sum of releases reported by the separate establishments.

B.2.b Auxiliary Facilities

An auxiliary facility is one that supports another facility's activities (e.g., research and development laboratories, warehouses, storage facilities, and waste-treatment facilities). An auxiliary facility can assume the SIC code of another covered facility if its primary function is to service that other covered facility's operations. Thus, a separate warehouse facility (i.e., one not located within the physical boundaries of a covered facility) may become a covered facility because it services a facility in SIC codes 20-39. Auxiliary facilities that are in SIC codes 20-39 are required to report if they meet the employee criterion and reporting thresholds for manufacture, process, or otherwise use. Auxiliary establishments that are part of a multi-establishment facility must be factored into threshold determinations for the facility as a whole.

B.2.c Facility-Related Exemptions

Laboratories: Listed toxic chemicals that are manufactured, processed, or otherwise used in laboratory activities at a covered facility under the direct supervision of a technically qualified individual do not have to be considered for threshold and release calculations. However, pilot plant scale and specialty chemical production do not qualify for this laboratory activities exemption.

Property Owners: You are not required to report if you merely own real estate on which a facility covered by this rule is located; that is, you have no other business interest in the operation of that facility (e.g., your company owns an industrial park). The operator of that facility, however, is subject to reporting requirements.

B.3 Activity Determination

B.3.a Definitions of "Manufacture," "Process," and "Otherwise Use"

Manufacture: The term "manufacture" means to produce, prepare, compound, or import a listed toxic chemical. (See Part II, Section 3.1 of these instructions for further clarification.)

Import is defined as causing the toxic chemical to be imported into the customs territory of the United States. If you order a listed toxic chemical (or a mixture containing the chemical) from a foreign supplier, then you have imported the chemical when that shipment arrives at your facility directly from a source outside of the United States. By ordering the chemical, you have "caused it to be imported," even though you may have used an import brokerage firm as an agent to obtain the toxic chemical.

The term manufacture also includes coincidental production of a toxic chemical (e.g., as a byproduct or impurity) as a result of the manufacture, processing, otherwise use, or treatment of other chemical substances. In the case of coincidental production of an impurity (i.e., a toxic chemical that remains in the product that is distributed in commerce), the de minimis limitation, discussed in Section B.4.b of these instructions, applies. The de minimis limitation does not apply to byproducts (e.g., a toxic chemical that is separated from a process stream and further processed or disposed). Certain listed toxic chemicals may be manufactured as a result of wastewater treatment or other treatment processes. For example, neutralization of acid wastewater can result in the coincidental manufacture of ammonium nitrate (solution).

Example 1: Coincidental Manufacture

Your company, a nitric acid manufacturer, uses ammonia in a waste treatment system to neutralize an acidic wastewater stream containing nitric acid. The reaction of the ammonia and nitric acid produces an ammonium nitrate solution. Ammonium nitrate solution is a listed toxic chemical, as are nitric acid and ammonia. Your facility thus otherwise uses ammonia as a reactant and manufactures ammonium nitrate solution as a byproduct. If the ammonium nitrate solution is produced in a quantity that exceeds the threshold (e.g., 25,000 pounds for the reporting year), the facility must report for the ammonium nitrate solution. If more than 10,000 pounds of ammonia is added to the wastewater treatment system, then the facility must report for ammonia.

Process: The term "process" means the preparation of a listed toxic chemical, after its manufacture, for distribution in commerce. Processing is usually the intentional incorporation of a toxic chemical into a product (see Part II, Section 3.2 of these instructions for further clarification). Processing includes preparation of the toxic chemical in the same physical state or chemical form as that received by your facility, or preparation that produces a change in physical state or chemical form. The term also applies to the processing of a mixture or other trade name product (see Section B.4.b of these instructions) that contains a listed toxic chemical as one component.

Example 2: Typical Process and Manufacture Activities

- Your company receives toluene, a listed toxic chemical, from another facility, and reacts the toluene with air to form benzoic acid. Your company processes toluene and manufactures benzoic acid. Benzoic acid, however, is not a listed toxic chemical and thus does not trigger reporting requirements.
- Your facility combines toluene purchased from a supplier with various materials to form paint. Your facility processes toluene.
- Your company receives a nickel compound (nickel compound is a listed toxic chemical category) as a bulk solid and performs various size-reduction operations (e.g., grinding) before packaging the compound in 50 pound bags. Your company processes the nickel compound.
- Your company receives a prepared mixture of resin and chopped fiber to be used in the injection molding of plastic products. The resin contains a listed toxic chemical that becomes incorporated into the plastic. Your facility processes the toxic chemical.

Example 3: Otherwise Use

When your facility cleans equipment with toluene, you are otherwise using toluene. Your facility also separates two components of a mixture by dissolving one component in toluene, and subsequently recovers the toluene from the process for reuse or disposal. Your facility otherwise uses toluene.

Otherwise Use: The term "otherwise use" encompasses any activity involving a listed toxic chemical at a facility that does not fall under the definitions of "manufacture" or "process." A chemical that is otherwise used by a facility is not intentionally incorporated into a product distributed in commerce (see Part II, Section 3.3 of these Instructions for further clarification).

B.3.b Activity Exemptions

Use Exemptions. Certain uses of listed toxic chemicals are specifically exempted:

- use as a structural component of the facility;
- use in routine janitorial or facility grounds maintenance;
- personal uses by employees or other persons;
- use of products containing toxic chemicals for the purpose of maintaining motor vehicles operated by the facility; or
- use of toxic chemicals contained in intake water (used for processing or non-contact cooling) or in intake air (used either as compressed air or for combustion).

Article Exemptions. Quantities of a listed toxic chemical contained in an article do not have to be factored into threshold or release determinations when that article is processed or otherwise used at your facility. An article is defined as a manufactured item that is formed to a specific shape or design during manufacture, that has end-use functions dependent in whole or in part upon its shape or design during end-use, and that does not release a toxic chemical under normal conditions of the processing or otherwise use of that item at the facility.

If the processing or otherwise use of similar articles results in a total release of less than 0.5 pounds of a toxic chemical in a calendar year to any environmental media, EPA will allow this release quantity to be rounded to zero, and the manufactured items remain exempt as articles. EPA requires facilities to round off and report all estimates to the nearest whole number. The 0.5-pound limit does not apply to each individual article, but applies to the sum of all releases from processing or otherwise use of like articles.

The article exemption applies to the normal processing or otherwise use of an article. It does not apply to the manufacture of an article. Toxic chemicals processed into articles produced at a facility must be factored into threshold and release determinations.

A closed item containing toxic chemicals (e.g., a transformer containing PCBs) that does not release the toxic chemicals during normal use is considered an article if a facility uses the item as intended and the toxic chemicals are not released. If a facility services the closed item (e.g., a transformer) by replacing the toxic chemicals, the toxic chemicals added during the reporting year must be counted in threshold and release calculations.

Example 4: Article Exemption

- Lead that is incorporated into a lead acid battery is processed to manufacture the battery, and therefore must be counted toward threshold and release determinations. However, the use of the lead acid battery elsewhere in the facility does not have to be counted. Disposal of the battery after its use does not constitute a "release;" thus, the battery remains an article.
- Metal rods that are extruded into wire are not articles because their form changes during processing.
- If an item used in the facility is fragmented, the item is still an article if those fragments being discarded remain identifiable as the article (e.g., recognizable pieces of a cylinder, pieces of wire). For instance, an 8-foot piece of wire is broken into two 4-foot pieces of wire, without releasing any toxic chemicals. Each 4-foot piece is identifiable as a piece of wire; therefore, the article status for these pieces of wire remains intact.
- Toxic chemicals received in the form of pellets are not articles because the pellet form is simply a convenient form for further processing of the material.

When the processing or otherwise use of an item generates fumes, dust, filings, or grindings, the article exemption is not applicable. The toxic chemical(s) in the item must be counted toward the appropriate threshold determination, and the fumes, dust, filings, and grindings must be reported as releases or wastes. Scrap pieces that are recognizable as an article do not constitute a release.

B.3.c Activity Qualifiers

Table II contains the list of individual toxic chemicals and categories of chemicals subject to 1993 calendar year reporting. Some of the toxic chemicals listed in Table II have parenthetic qualifiers listed next to them. A toxic chemical that is listed without a qualifier is subject to reporting in all forms in which it is manufactured, processed, and otherwise used.

Fume or dust. Three of the metals on the list (aluminum, vanadium, and zinc) contain the qualifier "fume or dust." Fume or dust refers to dry forms of these metals but does not refer to "wet" forms such as solutions or slurries. As explained in Section B.3a of these instructions, the term manufacture includes the generation of a toxic chemical as a byproduct or impurity. In such cases, a facility should determine if, for example, it generated more than 25,000 pounds of aluminum fume or dust in 1993 as a result of its activities. If so, the facility must report that it manufactures "aluminum (fume or dust)." Similarly, there may be certain technologies in which one of these metals is processed in the form of a fume or dust to make other toxic chemicals or other products for distribution in commerce. In reporting releases, the facility would only report releases of the fume or dust.

EPA considers dusts to consist of solid particles generated by any mechanical processing of materials including crushing, grinding, rapid impact, handling, detonation, and decrepitation of organic and inorganic materials such as rock, ore, and metal. Dusts do not tend to flocculate, except under electrostatic forces. A fume is an airborne dispersion consisting of small solid particles created by condensation from a gaseous state, in distinction to a gas or vapor. Fumes arise from the heating of solids such as lead. The condensation is often accompanied by a chemical reaction, such as oxidation. Fumes flocculate and sometimes coalesce.

Manufacturing qualifiers. Two of the entries to the section 313 toxic chemical list contain a qualifier relating to manufacture. For isopropyl alcohol, the qualifier is "manufacturing — strong acid process." For saccharin, the qualifier simply is "manufacturing." For isopropyl alcohol, the qualifier means that only facilities manufacturing isopropyl alcohol by the strong acid process are required to report. In the case of saccharin, only manufacturers of the toxic chemical are subject to the reporting requirements. A facility that processes or otherwise uses either toxic chemical would not be required to report for those toxic chemicals. In both cases, supplier notification does not apply because only manufacturers, not users, of the toxic chemical must report.

Solutions. Two substances on the list, ammonium nitrate and ammonium sulfate, are qualified by the term "solution," which refers to the physical state of these toxic chemicals. Solid, molten, and pelletized forms of these toxic chemicals are exempt from threshold and release determinations. Only facilities that manufacture, process, or otherwise use these toxic chemicals in the form of a solution are required to report. Supplier notification applies only if the toxic chemical is distributed as a solution.

Phosphorus (yellow or white). The listing for phosphorus is qualified by the term "yellow or white." This means that only manufacturing, processing, or otherwise use of phosphorus in the yellow or white chemical form triggers reporting. Conversely, manufacturing, processing, or otherwise use of "black" or "red" phosphorus does not trigger reporting. Supplier notification also applies only to distribution of yellow or white phosphorus.

Asbestos (friable). The listing for asbestos is qualified by the term "friable," referring to the physical characteristic of being able to be crumbled, pulverized, or reducible to a powder with hand pressure. Only manufacturing, processing, or otherwise use of asbestos in the friable form triggers reporting. Supplier notification applies only to distribution of mixtures or trade name products containing friable asbestos.

Aluminum Oxide (fibrous forms). The listing for aluminum oxide is qualified by the term "fibrous forms." Fibrous refers to a man-made form of aluminum oxide that is processed to produce strands or filaments which can be cut to various lengths depending on the application. Only manufacturing, processing, or otherwise use of aluminum oxide in the fibrous form triggers reporting. Supplier notification applies only to distribution of mixtures or trade name products containing fibrous forms of aluminum oxide.

B.4 Threshold Determination

Section 313 reporting is required if threshold quantities are exceeded. Separate thresholds apply to the amount of the toxic chemical that is manufactured, processed, or otherwise used.

You must submit a report for any listed toxic chemical that is manufactured or processed at your facility in excess of the following threshold:

- 25,000 pounds during the course of a calendar year.

You must submit a report if the quantity of a listed toxic chemical that is otherwise used at your facility exceeds:

- 10,000 pounds during the course of a calendar year.

B.4.a How to Determine If Your Facility Has Exceeded Thresholds

To determine whether your facility has exceeded a section 313 reporting threshold, compare quantities of listed toxic chemicals that you manufacture, process, or otherwise use to the respective thresholds for those activities. A worksheet is provided in Figure 2 to assist facilities in determining whether they exceed any of the reporting thresholds. This worksheet also provides a format for maintaining reporting facility records. Use of this worksheet is not required and the completed worksheet(s) should not accompany Form R reports submitted to EPA and the State.

Complete a separate worksheet for each section 313 toxic chemical or chemical category. Base your threshold determination for listed toxic chemicals with qualifiers only on the quantity of the toxic chemical satisfying the qualifier.

Use of the worksheet is divided into three steps:

Step 1 allows you to record the gross amount of the toxic chemical or chemical category involved in activities throughout the facility. Pure forms as well as the amounts of the toxic chemical or chemical category present in mixtures or trade name products must be considered. The types of activity (i.e., manufacturing, processing, or otherwise using) for which the toxic chemical is used must be identified because separate thresholds apply to each of these activities. A record of the information source(s) used should be kept. Possible information sources include purchase records, inventory data, and calculations by a process engineer. The data collected in Step 1 will be totalled for each activity to identify the overall amount of the toxic chemical or chemical category manufactured (including imported), processed, or otherwise used.

Step 2 allows you to identify uses of the toxic chemical or chemical category that were included in Step 1 but are exempt under section 313. Do not include in Step 2 exempt forms of the toxic chemical not included in the calculations in Step 1. For example, if freon contained in the building's air conditioners was not reported in Step 1 , you would not include the amount as exempt in Step 2. Step 2 is intended for use when one form or use of the toxic chemical is exempt while other forms require reporting. Note the type of exemption for future reference. Also identify, if applicable, the fraction or percentage of the toxic chemical present that is exempt. Add the amounts in each activity to obtain a subtotal for exempted amounts of the toxic chemical or chemical categories at the facility.

Step 3 involves subtracting the result of Step 2 from the results of Step 1 for each activity. Compare this net sum to the applicable activity threshold. If the threshold is met or exceeded for any of the three activities, a facility must submit a Form R for that toxic chemical or chemical category. This worksheet should be retained in either case to document your determination for reporting or not reporting, but should not be submitted with the report. Do not sum quantities of the toxic chemical that are manufactured, processed, and otherwise used at your facility, because each of these activities requires a separate threshold determination. For example, if in a calendar year you processed 20,000 pounds of a chemical and you otherwise used 6,000 pounds of that same toxic chemical, your facility has not met or exceeded any applicable threshold and thus is not required to report for that chemical.

You must submit a report if you exceed any threshold for any listed toxic chemical or chemical category. For example, if your facility processes 22,000 pounds of a listed toxic chemical and also otherwise uses 16,000 pounds of that same toxic chemical, it has exceeded the otherwise used threshold (10,000 pounds) and your facility must report even though it did not exceed the process threshold. However, in preparing your reports, you must consider all non-exempted activities and all releases of the toxic chemical from your facility, not just releases from the otherwise use activity.

Figure 2

OPTIONAL SECTION 313 REPORTING THRESHOLD WORKSHET

Facility Name: _____ **Date Worksheet Prepared:** _____

Toxic Chemical or Chemical Category: _____ **Prepared By:** _____

Reporting Year: _____

Step 1. Identify amounts of the toxic chemical manufactured, processed, or otherwise used.

Mixture Name or Other Identifier	Information Source	Percent by Weight	Total Weight (in lbs)	Amount of the Listed Toxic Chemical by Activity (in lbs.):		
				Manufactured	Processed	Otherwise Used
1.						
2.						
3.						
4.						
5.						
6.						
7.						
Subtotal:				(A) _____ lbs.	(B) _____ lbs.	(C) _____ lbs.

Step 2. Identify exempt forms of the toxic chemical that have been included in Step 1.

Mixture Name as Listed Above	Applicable Exemption	Note Fraction or Percent Exempt (if Applicable)	Exempt Amount of the Toxic Chemical from Above (in lbs.):		
			Manufactured	Processed	Otherwise Used
1.					
2.					
3.					
4.					
5. 6.					
7.					
Subtotal:			(A_1) _____ lbs.	(B_1) _____ lbs.	(C_1) _____ lbs.

Step 3. Calculate the amount subject to threshold: ($A - A_1$) _____ lbs. ($B - B_1$) _____ lbs. ($C - C_1$) _____ lbs.

Compare to thresholds for section 313 reporting. 25,000 lbs. 25,000 lbs. 10,000 lbs.

If any threshold is met, reporting is required for all activities. Do not submit this worksheet with Form R. Retain for your records.

Also note that threshold determinations are based upon the actual amounts of a toxic chemical manufactured, processed, or otherwise used over the course of the calendar year. The threshold determination may not relate to the amount of a toxic chemical brought on-site during the calendar year. For example, if a stockpile of 100,000 pounds of a toxic chemical is present on-site but only 20,000 pounds is applied to a process, only the 20,000 pounds processed is counted toward a threshold determination, not the entire 100,000 pounds of the stockpile.

Threshold Determinations for On-Site Reuse/ Recycle Operations.

Threshold determinations of listed toxic chemicals that are recycled or reused at the facility are based only on the amount of the toxic chemical that is added during the year, not the total volume in the system. For example, a facility operates a refrigeration unit that contains 15,000 pounds of ammonia at the beginning of the year. The system is charged with 2,000 pounds of ammonia during the year. The facility has therefore "otherwise used" only 2,000 pounds of the covered toxic chemical and is not required to report (unless there are other "otherwise use" activities of ammonia which, when taken together, exceed the reporting threshold). If, however, the whole refrigeration unit was recharged with 15,000 pounds of ammonia during the year, the facility would exceed the otherwise use threshold, and be required to report.

This exemption does not apply to toxic chemicals "recycled" off-site and returned to a facility. Such toxic chemicals returned to a facility are treated as the equivalent of newly purchased material for purposes of section 313 threshold determinations.

Threshold Determinations for Chemical Categories.

A number of chemical compound categories are subject to reporting. See Table II for a listing of these toxic chemical categories. When reporting for one of these toxic chemical categories, all individual members of a category that are manufactured, processed, or otherwise used must be counted. However, threshold determinations must be made separately for each of the three activities. Do not include in these threshold determinations for a category any chemicals that are also specifically listed section 313 toxic chemicals (see Table II) or specific toxic chemicals that have been deleted from the category (e.g., three compounds deleted from copper compound category — see the introduction to these instructions). Specifically listed toxic chemicals are subject to their own, individual threshold determination.

Threshold determinations for metal-containing compounds present a special case. If, for example, your facility processes several different lead compounds, base your threshold determination on the total weight of all lead compounds processed. However, if your facility processes both the "parent" metal (lead) as well as one or more lead compounds, you must make threshold determinations for both because they are separately listed toxic chemicals. If your facility exceeds thresholds for both the parent metal and compounds of that same metal, EPA allows you to file one combined report (e.g., one report for lead compounds, including lead) because the release information you will report in connection with metal compounds will be the total pounds of the parent metal released.

One other case involving metal compounds should be noted. Some metal compounds may contain more than one listed metal. For example, lead chromate is both a lead compound and a chromium compound. In such cases, if applicable thresholds are exceeded, you are required to file two separate reports, one for lead compounds and one for chromium compounds. Apply the total weight of the lead chromate to the threshold determinations for both lead compounds and chromium compounds. However, only the amount of each parent metal released (not the amount of the compound) would be reported on the appropriate sections of both Form Rs.

B.4.b Mixtures and Trade Name Products

Toxic chemicals contained in mixtures and trade name products must be factored into threshold and release determinations.

If your facility processed or otherwise used mixtures or trade name products during the calendar year, you are required to use the best information available to determine whether the components of a mixture are above the de minimis concentration and, therefore, must be included in threshold and release determinations. If you know that a mixture or trade name product contains a specific toxic chemical, combine the amount of the toxic chemical in the mixture or trade name product with other amounts of the same toxic chemical processed or otherwise used at your facility for threshold and release determinations. If you know that a mixture contains a toxic chemical but no concentration information is provided by the supplier, you do not have to consider the amount of the toxic chemical present in that mixture for purposes of threshold and release determinations.

Example 5: Mixture and Trade Name Products

Scenario #1: Your facility uses 12,000 pounds of an industrial solvent (Solvent X) for equipment cleaning. The Material Safety Data Sheet (MSDS) for the solvent indicates that it contains at least 50 percent methyl ethyl ketone (MEK), a listed toxic chemical; however, it also states that the solvent contains 20 percent non-hazardous surfactants. This is the only MEK-containing chemical used at the facility.

Follow these steps to determine if the quantity of the toxic chemical in solvent X exceeds the threshold for otherwise use.

1) Determine a reasonable maximum concentration for the toxic chemical by subtracting out the non-hazardous surfactants (i.e., 100%-20% = 80%).

2) Determine the midpoint between the known minimum (50%) and the reasonable maximum calculated above (i.e., (80%-50%)/2 + 50% = 65%).

3) Multiply total weight of Solvent X otherwise used by 65 percent.

   12,000 pounds x 0.65 = 7,800 pounds

4) Because the total amount of MEK otherwise used at the facility was less than the 10,000 pound otherwise use threshold, the facility is not required to file a Form R for MEK.

Scenario #2: Your facility otherwise used 15,000 pounds of Solvent Y to clean printed circuit boards. The MSDS for the solvent lists only that Solvent Y contains at least 80% of a listed toxic chemical which is only identified as chlorinated hydrocarbons.

Follow these steps to determine if the quantity of the toxic chemical in solvent exceeds the threshold for otherwise use.

1) Because the specific chemical is unknown, the Form R will be filed for "chlorinated hydrocarbons." This name will be entered into Part II, Section 2.1, "Mixture Component Identity." (Note: Because your supplier is claiming the toxic chemical identity a trade secret, you do not have to file substantiation forms.)

2) The upper bound limit is assumed to be 100 percent and the lower bound limit is known to be 80 percent. Using this information, the specific concentration is estimated to be 90 percent (i.e., the mid-point between upper and lower limits).

   (1.0 + 0.80) / 2 = 0.90

3) The total weight of Solvent Y is multiplied by 90 percent when calculating for thresholds.

   15,000 x 0.90 = 13,500

4) Because the total amount of chlorinated hydrocarbons exceeds the 10,000 pound otherwise used threshold, you must file a Form R for this chemical.

Observe the following guidelines in estimating concentrations of toxic chemicals in mixtures when only limited information is available:

- If you know the lower and upper bound concentrations of a toxic chemical in a mixture, use the midpoint of these two concentrations for threshold determinations.
- If you know only the lower bound concentration, you should subtract out the percentages of any other known components to determine a reasonable upper bound concentration, and then determine a midpoint.
- If you have no information other than the lower bound concentration, calculate a midpoint assuming an upper bound concentration of 100%.
- If you only know the upper bound concentration, you must use it for threshold determinations.
- In cases where you only have a concentration range available, you should use the midpoint of the range extremes.

De Minimis Exemption. A listed toxic chemical does not have to be considered if it is present in a mixture at a concentration below a specified de minimis level. The de minimis level is 1.0%, or 0.1% if the toxic chemical meets the OSHA carcinogen standard. See Table II for the de minimis value associated with each listed toxic chemical. For mixtures that contain more than one member of a listed toxic chemical category, the de minimis level applies to the aggregate concentration of all such members and not to each individually. EPA included the de minimis exemption in the rule as a burden-reducing step, primarily because facilities are not likely to have information on the presence of a toxic chemical in a mixture or trade name product beyond that available in the product's MSDS. The de minimis levels are consistent with OSHA requirements for development of MSDS information concerning composition.

For threshold determinations, the de minimis exemption applies to:

- A listed toxic chemical in a mixture or trade name product received by the facility.
- A listed toxic chemical manufactured during a process where the toxic chemical remains in a mixture or trade name product distributed by the facility.

The de minimis exemption does not apply to:

- A toxic chemical manufactured at the facility that does not remain in a product distributed by the facility. A threshold determination must be made on the annual quantity of the toxic chemical manufactured regardless of the concentration. For example, quantities of formaldehyde created as a result of waste treatment must be applied toward the threshold for "manufacture" of this toxic chemical, regardless of the concentration of this toxic chemical in the waste.

In general, when the de minimis exemption applies to threshold determinations and the concentration of the toxic chemical in the mixture is below the de minimis limitation, then you are not required to report releases associated with the processing or otherwise use of the toxic chemical in that mixture. Note that it is possible to meet the threshold for a toxic chemical on a facility-wide basis, but not be required to calculate releases from a particular process because that process involves only mixtures containing the toxic chemical below the de minimis level.

Application of the de minimis exemption to process streams must also be reviewed. Mixtures containing toxic chemicals can be added to a process or generated within a process. A facility is required to consider and report releases from the process once the de minimis concentration level has been exceeded. All releases of the toxic chemical from the process which occur after the de minimis exemption has been exceeded are then subject to reporting, regardless of whether or not the toxic chemical concentration later falls to a level below the de minimis exemption.

Supplier Notification. Beginning in 1989, suppliers of facilities in SIC codes 20-39 are required to develop and distribute a notice if the mixtures or trade name products they manufacture or process, and subsequently distribute, contain listed toxic chemicals. These notices are distributed to other companies in SIC codes 20-39 or to companies that sell or otherwise distribute the product to facilities in SIC codes 20-39. If a MSDS is not required for the mixture or trade name product, the notification must be in written form (i.e., letter). Otherwise, the notice must be incorporated into or attached to the MSDS for that

product. The supplier notification requirement began with the first shipment of a product in 1989 and must accompany the first shipment each year thereafter. In addition, a new or revised notice must be sent if a change occurs in the product which affects the weight percent of a listed toxic chemical or if it is discovered that a previous notice did not properly identify the toxic chemicals or the percentage by weight. For more information on supplier notification, see Appendix D.

If listed toxic chemical concentrations are equal to or above the de minimis cut-off level, your supplier must identify the specific components as they appear in Table II and provide their percentage composition by weight in the mixture or product. If your supplier maintains that the identity of a toxic chemical is a trade secret, a generic identity that is structurally descriptive must be supplied on the notice. A maximum concentration level must be provided if your supplier contends that chemical composition information is a trade secret. In either case, you do not need to make a trade secret claim on behalf of your supplier (unless you consider your use of the proprietary mixture a trade secret). On Form R, identify the toxic chemical you are reporting according to its generic name provided in the notification. (See the instructions for Part II, Section 2 for more information.) If the listed toxic chemical is present below the de minimis level, no notification is required.

C. Instructions for Completing EPA Form R

The following are specific instructions for completing each part of EPA Form R. The number designations of the parts and sections of these instructions correspond to those in Form R unless otherwise indicated.

For all parts of Form R:

1. Type or print information on the form in the units and format requested. Use black ink. (Using blue ink for the certification signature is suggested as a means of indicating its originality.)

2. All information on Form R is required.

3. Do not leave items in Parts I and II on Form R blank unless specifically directed to do so; if an item does not apply to you, enter not applicable, NA, in the space provided. If your information does not fill all the spaces provided for a type of information, enter NA, in the next blank space in the sequence.

4. Report releases, off-site transfers, and recycling activities to the nearest pound. Do not report fractions of pounds.

5. Do not submit an incomplete form. The certification statement (Part I) specifies that the report is complete as submitted. See page 1 of these instructions for the definition of a complete submission.

6. When completing additional pages for Part II of the form, number the additional information sequentially from the prior sections of the form.

7. Indicate your TRI Facility Identification Number and the toxic chemical, toxic chemical category, or generically named toxic chemical on which you are reporting in the space provide in the top right corner of each page of Form R. Completion of this non-mandatory data element will greatly aid your internal recordkeeping and the quality of EPA's data entry process.

Part I. Facility Identification Information

Section 1. Reporting Year

This is the calendar year to which the reported information applies, not the year in which you are submitting the report. Information for the 1992 reporting year must be submitted on or before July 1, 1993.

Section 2. Trade Secret Information

2.1 Are you claiming the chemical identity on page 3 trade secret?

Answer this question only after you have completed the rest of the report. The specific identity of the toxic chemical being reported in Part II, Section 1, may be designated as a trade secret. If you are making a trade secret claim, mark "yes" and proceed to Section 2.2. Only check "yes" if it is your manufacturing, processing, or otherwise use of the toxic chemical whose identity is a trade secret. (See page 1 of these instructions for specific information on trade secrecy claims.) If you checked "no," proceed to Section 3; do not answer Section 2.2.

2.2 If "yes" in 2.1, is this copy sanitized or unsanitized?

Answer this question only after you have completed the rest of the report. Check "sanitized" if this copy of the report is the public version which does not contain the toxic chemical identity but does contain a generic name in its place, and you have claimed the toxic chemical identity trade secret in Part I, Section 2.1. Otherwise, check "unsanitized."

Section 3. Certification

The certification statement must be signed by the owner or operator or a senior official with management responsibility for the person (or persons) completing the form. The owner, operator, or official must certify the accuracy and completeness of the information reported on the form by signing and dating the certification statement. Each report must contain an original signature. Print or type in the space provided the name and title of the person who signs the statement. This certification statement applies to all the information supplied on the form and should be signed only after the form has been completed.

Section 4. Facility Identification

4.1 Facility Name and Location

Enter the name of your facility (plant site name or appropriate facility designation), street address, mailing address, city, county, state, and zip code in the space provided. Do not use a post office box number as the street address. The street address provided should be the location where the toxic chemicals are manufactured, processed, or otherwise used. If your mailing address and street address are the same, enter NA in the space for the mailing address.

If you have submitted a Form R for previous reporting years, a TRI Facility Identification Number has been assigned to your facility. The TRI Facility Identification Number appears (with other facility-specific information) on the peel-off mailing label on the cover of this Toxic Chemical Release Inventory Instructions for 1993. Remove the mailing label from the back of this document and apply it to the space marked "place label here" in Part I, Section 4.1 of the blank Form R.

If your mailing label is missing information required on Form R, insert that information in the appropriate box in Part I, Section 4.1. For example, if your label contains your street address and not your mailing address, enter your mailing address in the space provided.

If you do not have a mailing label or cannot locate your TRI Facility Identification Number, please contact the Emergency Planning and Community Right-to-Know Information Hotline.

Enter "NA" in the space for the TRI Facility Identification number if this is your first submission of a Form R.

4.2 Full or Partial Facility Indication

A covered facility must report all releases and source reduction and recycling activities of a listed toxic chemical if it meets a reporting threshold for that toxic chemical. However, if the facility is composed of several distinct establishments, EPA allows these establishments to submit separate reports for the toxic chemical as long as all releases of the toxic chemical from the entire facility are accounted for. Indicate in Section 4.2 whether your report is for the entire covered facility as a whole or for part of a covered facility. Check box (a) if the toxic chemical information applies to the entire covered facility. Check box (b) if the toxic chemical information applies only to part of a covered facility.

Section 313 requires reports by "facilities," which are defined as "all buildings, equipment, structures, and other stationary items which are located on a single site or on contiguous or adjacent sites and which are owned or operated by the same person."

The SIC code system defines business "establishments" as "distinct and separate economic activities [that] are performed at a single physical location." Under section 372.30(c) of the reporting rule, you may submit a separate Form R for each establishment, or for groups of establishments in your facility, provided all releases and source reduction and recycling activities involving the toxic chemical from the entire facility are reported. This allows you the option of reporting separately on the activities involving a toxic chemical at each establishment, or group of establishments (e.g., part of a covered facility), rather than submitting a single Form R for that toxic chemical for the entire facility. However, if an establishment or group of establishments does not manufacture, process, or otherwise use or release a toxic chemical, you do not have to submit a report for that establishment or group of establishments. (See also Section B.2.a of these instructions.)

4.3 Technical Contact

Enter the name and telephone number (including area code) of a technical representative whom EPA or State officials may contact for clarification of the information reported on Form R. This contact person does not have to be the same person who prepares the report or signs the certification statement and does not necessarily need to be someone at the location of the reporting facility; however, this person must be familiar with the details of the report so that he or she can answer questions about the information provided.

4.4 Public Contact

Enter the name and telephone number (including area code) of a person who can respond to questions from the public about the report. If you choose to designate the same person as both the technical and the public contact, you may enter "Same as Section 4.3" in this space. This contact person does not have to be the same person who prepares the report or signs the certification statement and does not necessarily need to be someone at the location of the reporting facility. If this space is left blank, the technical contact will be listed as the public contact in the TRI database.

4.5 Standard Industrial Classification (SIC) Code

Enter the appropriate 4-digit primary Standard Industrial Classification (SIC) code for your facility (Table I lists the SIC codes within the 20-39 range). If the report covers more than one establishment, enter the primary 4-digit SIC code for each establishment starting with the primary SIC code for the entire facility. You are required to enter SIC codes only for those establishments within the facility that fall within SIC codes 20 to 39. If you do not know your SIC code, check with your financial office or contact your local Chamber of Commerce or State Department of Labor.

4.6 Latitude and Longitude

Enter the latitudinal and longitudinal coordinates of your facility. Sources of these data include EPA permits (e.g., NPDES permits), county property records, facility blueprints, and site plans. Instructions on how to determine these coordinates can be found in Appendix E. Enter only numerical data. Do not preface numbers with letters such as N or W to denote the hemisphere.

Latitude and longitude coordinates of your facility are very important for pinpointing the location of reporting facilities and are required elements on the Form R. EPA encourages facilities to make the best possible measurements when determining latitude and longitude. As with any other data field, missing, suspect, or incorrect data may generate a Notice of Technical Error to be issued to the facility. (See Appendix C: Common Errors in Completing Form R Reports).

4.7 Dun and Bradstreet Number

Enter the 9-digit number assigned by Dun and Bradstreet (D & B) for your facility or each establishment within your facility. These numbers code the facility for financial purposes. This number may be available from your facility's treasurer or financial officer. You can also obtain the numbers from your local Dun and Bradstreet office (check the telephone book White Pages). If a facility does not subscribe to the D & B service, a "support number" can be obtained from the Dun & Bradstreet center located in Allentown, Pennsylvania, at (215) 882-7748 (8:30 am to 8:00 pm, Eastern Time). If none of your establishments has been assigned a D & B number, enter not applicable, NA, in box (a). If only some of your establishments have been assigned Dun and Bradstreet numbers, enter those numbers in Part I, Section 4.7.

4.8 EPA Identification Number

The EPA I.D. Number is a 12-character number assigned to facilities covered by hazardous waste regulations under the Resource Conservation and Recovery Act (RCRA). Facilities not covered by RCRA are not likely to have an assigned I.D. Number. If your facility is not required to have an I.D. Number, enter not applicable, NA, in box (a). If your facility has been assigned EPA Identification Numbers, you must enter those numbers in the spaces provided in Section 4.8.

4.9 NPDES Permit Number

Enter the numbers of any permits your facility holds under the National Pollutant Discharge Elimination System (NPDES) even if the permit(s) do not pertain to the toxic chemical being reported. This 9-character permit number is assigned to your facility by EPA or the State under the authority of the Clean Water Act. If your facility does not have a permit, enter not applicable, NA, in Section 4.9a.

4.10 Underground Injection Well Code (UIC) Identification Number

If your facility has a permit to inject a waste containing the toxic chemical into Class 1 deep wells, enter the 12-digit Underground Injection Well Code (UIC) identification number assigned by EPA or by the State under the authority of the Safe Drinking Water Act. If your facility does not hold such a permit(s), enter not applicable, NA, in Section 4.10a. You are only required to provide the UIC number for wells that receive the toxic chemical being reported.

Section 5. Parent Company Information

You must provide information on your parent company. For purposes of Form R, a parent company is defined as the highest level company, located in the United States, that directly owns at least 50 percent of the voting stock of your company. If your facility is owned by a foreign entity, enter not applicable, NA, in this space. Corporate names should be treated as parent company names for companies with multiple facility sites. For example, the Bestchem Corporation is not owned or controlled by any other corporation but has sites throughout the country whose names begin with Bestchem. In this case, Bestchem Corporation would be listed as the parent company.

5.1 Name of Parent Company

Enter the name of the corporation or other business entity that is your ultimate US parent company. If your facility has no parent company, check the NA box.

5.2 Parent Company's Dun & Bradstreet Number

Enter the Dun and Bradstreet Number for your ultimate US parent company, if applicable. The number may be obtained from the treasurer or financial officer of the company. If your parent company does not have a Dun and Bradstreet number, check the NA box.

Part II Chemical Specific Information

In Part II, you are to report on:

- The toxic chemical being reported;
- The general uses and activities involving the toxic chemical at your facility;
- Releases of the toxic chemical from the facility to air, water, and land;
- Quantities of the toxic chemical transferred to off-site locations;
- Information for on-site and off-site waste treatment, energy recovery, disposal, and recycling of the toxic chemical; and
- Source reduction activities.

Section 1. Toxic Chemical Identity

1.1 CAS Number

Enter the Chemical Abstracts Service (CAS) registry number in Section 1.1 **exactly** as it appears in Table II for the chemical being reported. CAS numbers are cross-referenced with an alphabetical list of chemical names in Table II of these instructions. If you are reporting one of the toxic chemical **categories** in Table II (e.g., chromium compounds), enter the applicable category code in the CAS number space. Toxic chemical category codes are listed below and can also be found in Table II.

Toxic Chemical Category Codes

N010	Antimony compounds
N020	Arsenic compounds
N040	Barium compounds
N050	Berylium compounds
N078	Cadmium compounds
N084	Clorophenols
N090	Chromium compounds
N096	Cobalt compounds
N100	Copper compounds
N106	Cyanide compounds
N230	Glycol ethers
N420	Lead compounds
N450	Manganese compounds
N458	Mercury compounds
N495	Nickel compounds
N575	Polybrominated biphenyls (PBBs)
N725	Selenium compounds
N740	Silver compounds
N760	Thallium compounds
N982	Zinc compounds

If you are making a trade secret claim, you must report the CAS number or category code on your unsanitized Form R and unsanitized substantiation form. Do not include the CAS number or category code on your sanitized Form R or sanitized substantiation form.

1.2 Toxic Chemical or Chemical Category Name

Enter the name of the toxic chemical or chemical category exactly as it appears in Table II. If the toxic chemical name is followed by a synonym in parentheses, report the chemical by the name that directly follows the CAS number (i.e., not the synonym). If the listed toxic chemical identity is actually a product trade name (e.g., dicofol), the 9th *Collective Index* name is listed below it in brackets. You may report either name in this case.

Do not list the name of a chemical that does not appear in Table II, such as individual members of a reportable toxic chemical category. For example, if you use silver nitrate, **do not** report silver nitrate with its CAS number. Report this chemical as "silver compounds" with its category code, N740.

If you are making a trade secret claim, you must report the specific toxic chemical identity on your unsanitized Form R and unsanitized substantiation form. Do not report the name of the toxic chemical on your sanitized Form R or sanitized substantiation form. Include a generic name in Part II, Section 1.3 of your sanitized Form R report.

EPA requests that the toxic chemical, chemical category, or generic name also be placed in the box marked "Chemical, Category, or Generic Name" in the upper right-hand corner on all pages of Form R. While this space is not a required data element, providing this information will help you in preparing a complete Form R report.

1.3 Generic Chemical Name

Complete Section 1.3 only if you are claiming the specific toxic chemical identity of the toxic chemical as a trade secret and have marked the trade secret block in Part I, Section 2.1 on page 1 of Form R. Enter a generic chemical name that is descriptive of the chemical structure. You must limit the generic name to seventy characters (e.g., numbers, letters, spaces, punctuation) or less. Do not enter mixture names in Section 1.3; see Section 2 below.

In-house plant codes and other substitute names that are not structurally descriptive of the toxic chemical identity being withheld as a trade secret are not acceptable as a generic name. The generic name must appear on both sanitized and unsanitized Form R's, and the name must be the same as that used on your substantiation forms.

Section 2. Mixture Component Identity

Do not complete this section if you have completed Section 1 of Part II. Report the generic name provided to you by your supplier in this section if your supplier is claiming the chemical identity proprietary or trade secret. Do not answer "yes" in Part I, Section 2.1 on page 1 of the form if you complete this section. You do not need to supply trade secret substantiation forms for this toxic chemical because it is your supplier who is claiming the chemical identity a trade secret.

2.1 Generic Chemical Name Provided by Supplier

Enter the generic chemical name in this section only if the following three conditions apply:

1. You determine that the mixture contains a listed toxic chemical but the only identity you have for that chemical is a generic name;

2. You know either the specific concentration of that toxic chemical component or a maximum or average concentration level; and

3. You multiply the concentration level by the total annual amount of the whole mixture processed or otherwise used and determine that you meet the process or otherwise use threshold for that single, generically identified mixture component.

Example 6: Mixture Containing Unidentified Toxic Chemical

Your facility uses 20,000 pounds of a solvent that your supplier has told you contains 80 percent "chlorinated aromatic," their generic name for a toxic chemical subject to reporting under section 313. You therefore know that you have used 16,000 pounds of some listed toxic chemical which exceeds the "otherwise use" threshold. You would file a Form R and enter the name "chlorinated aromatic" in the space provided in Part II, Section 2.

Section 3. Activities and Uses of the Toxic Chemical at the Facility

Indicate whether the toxic chemical is manufactured (including imported), processed, or otherwise used at the facility and the general nature of such activities and uses at the facility during the calendar year. Report activities that take place only at your facility, not activities that take place at other facilities involving your products. You must check all the boxes in this section that apply. If you are a manufacturer of the toxic chemical, you must check (a) and/or (b), and at least one of (c), (d), (e), or (f) in Section 3.1. Refer to the definitions of "manufacture," "process," and "otherwise use" in the general information section of these instructions or Part 40, Section 372.3 of the *Code of Federal Regulations* for additional explanations.

3.1 Manufacture the Toxic Chemical

Persons who manufacture (including import) the toxic chemical must check at least one of the following:

a. *Produce* - the toxic chemical is produced at the facility.

b. *Import* - the toxic chemical is imported by the facility into the Customs Territory of the United States. (See Section B.3.a of these instructions for further clarification of import.)

And check at least one of the following:

c. *For on-site use/processing* - the toxic chemical is produced or imported and then further processed or otherwise used at the same facility. If you check this block, you must also check at least one item in Part II, Section 3.2 or 3.3.

d. *For sale/distribution* - the toxic chemical is produced or imported specifically for sale or distribution outside the manufacturing facility.

e. *As a byproduct* - the toxic chemical is produced coincidentally during the production, processing, otherwise use, or disposal of another chemical substance or mixture and, following its production, is separated from that other chemical substance or mixture. Toxic chemicals produced and released as a result of waste treatment or disposal are also considered byproducts.

f. *As an impurity* - the toxic chemical is produced coincidentally as a result of the manufacture, processing, or otherwise use of another chemical but is not separated and remains primarily in the mixture or product with that other chemical.

3.2 Process the Toxic Chemical (incorporative activities)

a. *As a reactant* - A natural or synthetic toxic chemical used in chemical reactions for the manufacture of another chemical substance or of a product. Includes, but is not limited to, feedstocks, raw materials, intermediates, and initiators.

b. *As a formulation component* - A toxic chemical added to a product (or product mixture) prior to further distribution of the product that acts as a performance enhancer during use of the product. Examples of toxic chemicals used in this capacity include, but are not limited to, additives, dyes, reaction diluents, initiators, solvents, inhibitors, emulsifiers, surfactants, lubricants, flame retardants, and rheological modifiers.

c. *As an article component* - A toxic chemical that becomes an integral component of an article distributed for industrial, trade, or consumer use. One example is the pigment components of paint applied to a chair that is sold.

d. *Repackaging* - Processing or preparation of a toxic chemical (or product mixture) for distribution in commerce in a different form, state, or quantity. This includes, but is not limited to, the transfer of material from a bulk container, such as a tank truck to smaller containers such as cans or bottles.

3.3 Otherwise Use the Toxic Chemical (non-incorporative activities)

a. *As a chemical processing aid* - A toxic chemical that is added to a reaction mixture to aid in the manufacture or synthesis of another chemical substance but is not intended to remain in or become part of the product or product mixture. Examples of such toxic chemicals include, but are not limited to, process solvents, catalysts, inhibitors, initiators, reaction terminators, and solution buffers.

b. *As a manufacturing aid* - A toxic chemical that aids the manufacturing process but does not become part of the resulting product and is not added to the reaction mixture during the manufacture or synthesis of another chemical substance. Examples include, but are not limited to, process lubricants, metalworking fluids, coolants, refrigerants, and hydraulic fluids.

c. *Ancillary or other use* - A toxic chemical that is used at a facility for purposes other than aiding chemical processing or manufacturing as described above. Examples include, but are not limited to, cleaners, degreasers, lubricants, fuels, and toxic chemicals used for treating wastes.

Example 7: Activities and Uses of Toxic Chemicals

In the example below, it is assumed that the threshold quantities for manufacture, process, or otherwise use (25,000 pounds, 25,000 pounds, and 10,000 pounds, respectively, for calendar year 1991) have been exceeded and the reporting of listed toxic chemicals is therefore required.

Your facility manufactures sulfuric acid. Fifty percent is sold as a product. The remaining 50 percent is reacted with naphthalene, forming phthalic acid and also producing sulfur dioxide fumes.

- Your company manufactures sulfuric acid, a listed toxic chemical, both for sale/distribution as a commercial product and for on-site use/processing as a feedstock in the phthalic acid production process. Because the sulfuric acid is a reactant, it is also processed. See Figure 3 for how this information would be reported in Part II, Section 3 of Form R.

- Your facility also processes naphthalene, as a reactant to produce phthalic acid, a chemical not on the section 313 list.

Figure 3

SECTION 1. TOXIC CHEMICAL IDENTITY	(Important: DO NOT complete this section if you complete Section 2 below.)
1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)
	7664-93-9
1.2	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)
	Sulfuric Acid
1.3	Generic Chemical Name (Important: Complete **only** if Part I, Section 2.1 is checked "yes." Generic Name must be structurally descriptive.)

SECTION 2. MIXTURE COMPONENT IDENTITY	(Important: DO NOT complete this section if you complete Section 1 above.)
2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, letters, spaces, and punctuation.)

SECTION 3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT THE FACILITY (Important: Check all that apply.)			
3.1	**Manufacture the toxic chemical:**	a. ☑ Produce b. ☐ Import	If produce or import: c. ☑ For on-site use/processing d. ☐ For sale/distribution e. ☐ As a byproduct f. ☐ As an impurity
3.2	**Process the toxic chemical:**	a. ☐ As a reactant b. ☐ As a formulation component	c. ☐ As an article component d. ☐ Repackaging
3.3	**Otherwise use the toxic chemical:**	a. ☑ As a chemical processing aid b. ☐ As a manufacturing aid	c. ☐ Ancillary or other use

Section 4. Maximum Amount of the Toxic Chemical On-Site at Any Time During the Calendar Year

For data element 4.1 of Part II, insert the code (see below) that indicates the maximum quantity of the toxic chemical (e.g., in storage tanks, process vessels, on-site shipping containers) at your facility at any time during the calendar year. If the toxic chemical was present at several locations within your facility, use the maximum **total** amount present at the entire facility at any one time.

Weight Range in Pounds

Range Code	From...	To....
01	0	99
02	100	999
03	1,000	9,999
04	10,000	99,999
05	100,000	999,999
06	1,000,000	9,999,999
07	10,000,000	49,999,999
08	50,000,000	99,999,999
09	100,000,000	499,999,999
10	500,000,000	999,999,999
11	1 billion	more than 1 billion

If the toxic chemical present at your facility was part of a mixture or trade name product, determine the maximum quantity of the toxic chemical present at the facility by calculating the weight percent of the toxic chemical only.

Do not include the weight of the entire mixture or trade name product. This data may be found in the Tier II form your facility may have prepared under Section 312 of EPCRA. See Part 40, Section 372.30(b) of the *Code of Federal Regulations* for further information on how to calculate the weight of the toxic chemical in the mixture or trade name product. For toxic chemical categories (e.g., nickel compounds), include all chemical compounds in the category when calculating the maximum amount, using the entire weight of each compound.

Section 5. Releases of the Toxic Chemical to the Environment On-Site

In Section 5, you must account for the total aggregate releases of the toxic chemical to the environment from your facility for the calendar year.

Do not enter the values in Section 5 in gallons, tons, liters, or any measure other than pounds. You must also enter the values as whole numbers. Numbers following a decimal point are not acceptable.

Releases to the environment include emissions to the air, discharges to surface waters, and on-site releases to land and underground injection wells. If you have no releases to a particular media (e.g., stack air), you must check the "NA" box or enter zero; **do not** leave any part of Section 5 blank. Check the box on the last line of this section if you use the additional space for Section 5.3 on page 5 of the Form.

You are not required to count, as a release, quantities of a toxic chemical that are lost due to natural weathering or corrosion, normal/natural degradation of a product, or normal migration of a toxic chemical from a product. For example, amounts of a listed toxic chemical that migrate from plastic products in storage do not have to be counted in estimates of releases of that toxic chemical from the facility. Also, amounts of listed metal compounds (e.g., copper compounds) that are lost due to normal corrosion of process equipment do not have to be considered as releases of copper compounds from the facility.

All releases of the toxic chemical to the air must be classified as either a point or non-point emission, and included in the total quantity reported for these releases in Sections 5.1 and 5.2. Instructions for columns A, B, and C follow the discussions of Sections 5.1 through 5.5.

5.1 Fugitive or Non-Point Air Emissions

Report the total of all releases of the toxic chemical to the air that **are not** released through stacks, vents, ducts, pipes, or any other confined air stream. You must include (1) fugitive equipment leaks from valves, pump seals, flanges, compressors, sampling connections, open-ended lines, etc.; (2) evaporative losses from surface impoundments and spills; (3) releases from building ventilation systems; and (4) any other fugitive or non-point air emissions. Engineering estimates and mass balance calculations (using purchase records, inventories, engineering knowledge or process specifications of the quantity of the toxic chemical entering product, hazardous waste manifests, or monitoring records) may be useful in estimating fugitive emissions.

5.2 Stack or Point Air Emissions

Report the total of all releases of the toxic chemical to the air that occur through stacks, vents, ducts, pipes, or other confined air streams. You must include storage tank emissions. Air releases from air pollution control equipment would generally fall in this category. Monitoring data, engineering estimates, and mass balance calculations may help you to complete this section.

5.3 Discharges to Receiving Streams or Water Bodies

In Section 5.3 you are to enter the name(s) of the stream(s) or water body(ies) to which your facility directly discharges the toxic chemical on which you are reporting. A total of three spaces are provided; however, other streams or water bodies to which the toxic chemical is discharged can be reported in the additional spaces for Section 5.3 found on page 5 of Form R. Enter the name of each receiving stream or surface water body to which the toxic chemical being reported is directly discharged. Report the name of the receiving stream or water body as it appears on the NPDES permit for the facility. If the stream is not covered by a permit, enter the name of the off-site stream or water body by which it is publicly known. Do not list a series of streams through which the toxic chemical flows. Be sure to include the receiving stream(s) or water body(ies) that receive stormwater runoff from your facility. Do not enter names of streams to which off-site treatment plants discharge. Enter "NA" in Section 5.3.1. if you do not discharge the listed toxic chemical to surface water bodies.

Enter the total annual amount of the toxic chemical released from all discharge points at the facility to each receiving stream or water body. Include process outfalls such as pipes and open trenches, releases from on-site wastewater treatment systems, and the contribution from stormwater runoff, if applicable (see instructions for column C below). Do not include discharges to a POTW or other off-site wastewater treatment facilities in this section. These off-site transfers must be reported in Part II, Section 6 of Form R.

Wastewater analyses and flowmeter data may provide the quantities you will need to complete this section.

Discharges of listed acids (e.g., hydrogen fluoride; hydrogen chloride; nitric acid; phosphoric acid; and sulfuric acid) may be reported as zero if the discharges have been neutralized to pH 6 or above. If wastewater containing a listed mineral acid is discharged below pH 6, then releases of the mineral acid must be reported. In this case, pH measurements may be used to estimate the amount of mineral acid released.

If you must report more than three discharges to receiving streams or water bodies, check the box at the bottom of page 4 and enter the additional information on the following page, in Section 5.3, Additional Information on Releases of the Toxic Chemical to the Environment On-Site. In Section 5.3 on page 5, blanks in the data elements are provided so you may continue the numeration you began on page 4.

5.4 Underground Injection On-Site

Enter the total annual amount of the toxic chemical that was injected into all wells, including Class I wells, at the facility. Chemical analyses, injection rate meters, and RCRA Hazardous Waste Generators Reports are good sources for obtaining data that will be useful in completing this section. Check the Not Applicable "NA" box in Section 5.4 if you do not inject the reported toxic chemical into underground wells.

5.5 Releases to Land On-Site

Four predefined subcategories for reporting quantities released to land within the boundaries of the facility are provided. Do not report land disposal at off-site locations in this section. Accident histories and spill records may be useful (e.g., release notification reports required under Section 304 of EPCRA and accident histories required under Section 112(r)(7)(B)(ii) of the Clean Air Act).

5.5.1 Landfill — Typically, the ultimate disposal method for solid wastes is landfilling. Leaks from landfills need not be reported as a release because the amount of the toxic chemical in the landfill has already been reported as a release.

5.5.2 Land treatment/application farming — Land treatment is a disposal method in which a waste containing a listed toxic chemical is applied onto or incorporated into soil. While this disposal method is considered a release to land, any volatilization of listed toxic chemicals into the air occurring during the disposal operation must be included in the total fugitive air releases reported in Part II, Section 5.1 of Form R.

5.5.3 Surface impoundment — A surface impoundment is a natural topographic depression, man-made excavation, or diked area formed primarily of earthen materials

(although some may be lined with man-made materials), which is designed to hold an accumulation of liquid wastes or wastes containing free liquids. Examples of surface impoundments are holding, settling, storage, and elevation pits; ponds; and lagoons. If the pit, pond, or lagoon is intended for storage or holding without discharge, it would be considered to be a surface impoundment used as a final disposal method.

Quantities of the toxic chemical released to surface impoundments that are used merely as part of a wastewater treatment process generally must not be reported in this section. However, if the impoundment accumulates sludges containing the toxic chemical, you must include an estimate in this section unless the sludges are removed and otherwise disposed (in which case they should be reported under the appropriate section of the form). For the purposes of this reporting, storage tanks are not considered to be a type of disposal and are not to be reported in this section of Form R.

5.5.4 Other disposal — Includes any amount of a listed toxic chemical released to land that does not fit the categories of landfills, land treatment, or surface impoundment. This other disposal would include any spills or leaks of listed toxic chemicals to land. For example, 2,000 pounds of benzene leaks from a underground pipeline into the land at a facility. Because the pipe was only a few feet from the surface at the erupt point, 30 percent of the benzene evaporates into the air. The 600 pounds released to the air would be reported as a fugitive air release (Part II, Section 5.1) and the remaining 1,400 pounds would be reported as a release to land, other disposal (Part II, Section 5.5.4).

5.Column A Total Release

Only on-site releases of the toxic chemical to the environment for the calendar year are to be reported in this section of Form R. The total releases from your facility **do not** include transfers or shipments of the toxic chemical from your facility for sale or distribution in commerce, or of wastes to other facilities for waste treatment, recycling, disposal, or energy recovery (see Part II, Section 6 of these Instructions). Both routine releases, such as fugitive air emissions, and accidental or non-routine releases, such as chemical spills, must be included in your estimate of the quantity released. EPA requires no more than two significant digits when reporting releases (e.g., 7,521 pounds would be reported as 7,500 pounds).

Releases of Less Than 1,000 Pounds. For total annual releases or off-site transfers of a toxic chemical from the facility of less than 1,000 pounds, the amount may be reported either as an estimate or by using the range codes that have been developed. The reporting range codes to be used are:

Code	Range (pounds)
A	1-10
B	11-499
C	500-999

Do not enter a range code and an estimate in the same box in column A. Total annual releases or off-site transfers of a toxic chemical from the facility of less than 1 pound may be reported in one of several ways. You should round the value to the nearest pound. If the estimate is 0.5 pounds or greater, you should either enter the range code "A" for "1-10" or enter "1" in column A. If the release is less than 0.5 pounds, you may round to zero and enter "0" in column A.

Note that total annual releases of less than 0.5 pounds from the processing or otherwise use of an article maintain the article status of that item. Thus, if the only releases you have are from processing an article, and such releases are less than 0.5 pounds per year, you are not required to submit a report for that toxic chemical. The 0.5-pound release determination does not apply to just a single article. It applies to the cumulative releases from the processing or otherwise use of the same type of article (e.g., sheet metal or plastic film) that occurs over the course of the calendar year.

Zero Releases. If you have no releases of a toxic chemical to a particular medium, report either NA, not applicable, or 0, as appropriate. Report NA only when there is no possibility a release could have occurred to a specific media or off-site location. If a release to a specific media or off-site location could have occurred, but either did not occur or the annual aggregate release was less than 0.5 pounds, report zero. However, if you report zero releases, a basis of estimate must be provided in column B.

For example, if hydrochloric acid is involved in the facility's processing activities but the facility neutralizes the wastes to a pH of 6 or above, then the facility reports a 0 release for the toxic chemical. If the facility has no underground injection well, "NA" would be written in Part I, Section 4.10 and checked in Part II, Section 5.4 of Form R. Also, if the facility does not landfill the acidic waste, NA would be checked in Part II, Section 5.5.1 of Form R.

Releases of 1,000 Pounds or More. For releases to any medium that amount to 1,000 pounds or more for the year, you must provide an estimate in pounds per year in column A. Any estimate provided in column A should be reported to no more than two significant figures. This estimate should be in whole numbers. Do not use decimal points.

Calculating Releases. To provide the release information required in column A in this section, you must use all readily available data (including relevant monitoring data and emissions measurements) collected at your facility to meet other regulatory requirements or as part of routine plant operations, to the extent you have such data for the toxic chemical.

When relevant monitoring data or emission measurements are not readily available, reasonable estimates of the amounts released must be made using published emission factors, material balance calculations, or engineering calculations. You may not use emission factors or calculations to estimate releases if more accurate data are available.

No additional monitoring or measurement of the quantities or concentrations of any toxic chemical released into the environment, or of the frequency of such releases, beyond that which is required under other provisions of law or regulation or as part of routine plant operations, is required for the purpose of completing Form R.

You must estimate, as accurately as possible, the quantity (in pounds) of the toxic chemical or chemical category that is released annually to each environmental medium. Include only the quantity of the toxic chemical in this estimate. If the toxic chemical present at your facility was part of a mixture or trade name product, calculate only the releases of the toxic chemical, not the other components of the mixture or trade name product. If you are only able to estimate the releases of the mixture or trade name product as a whole, you must assume that the release of the toxic chemical is proportional to its concentration in the mixture or trade name product. See Part 40, Section 372.30(b) of the *Code of Federal Regulations* for further information on how to calculate the concentration and weight of the toxic chemical in the mixture or trade name product.

If you are reporting a toxic chemical category listed in Table II of these instructions rather than a specific toxic chemical, you must combine the release data for all chemicals in the listed toxic chemical category (e.g., all glycol ethers or all chlorophenols) and report the aggregate amount for that toxic chemical category. Do not report releases of each individual toxic chemical in that category separately. For example, if your facility releases 3,000 pounds per year of 2-chlorophenol, 4,000 pounds per year of 3-chlorophenol, and 4,000 pounds per year of 4-chlorophenol to air as fugitive emissions, you should report that your facility releases 11,000 pounds per year of chlorophenols to air as fugitive emissions in Part II, Section 5.1.

For listed toxic chemicals with the qualifier "solution," such as ammonium nitrate, at concentrations of 1 percent (or 0.1 percent in the case of a carcinogen) or greater, the chemical concentrations must be factored into threshold and release calculations because threshold and release amounts relate to the amount of toxic chemical in solution, not the amount of solution.

For metal compound categories (e.g., chromium compounds), report releases of only the parent metal. For example, a user of various inorganic chromium salts would report the total chromium released regardless of the chemical form (e.g., as the original salts, chromium ion, oxide) and exclude any contribution to mass made by other species in the molecule.

5.Column B Basis of Estimate

For each release estimate, you are required to indicate the principal method used to determine the amount of release reported. You will enter a letter code that identifies the method that applies to the largest portion of the total estimated release quantity.

The codes are as follows:

M- Estimate is based on monitoring data or measurements for the toxic chemical as transferred to an off-site facility.

C- Estimate is based on mass balance calculations, such as calculation of the amount of the toxic chemical in wastes entering and leaving process equipment.

E- Estimate is based on published emission factors, such as those relating release quantity to throughput or equipment type (e.g., air emission factors).

Example 8: Calculating Releases and Transfers

Your facility disposes of 14,000 pounds of lead chromate (PbCrO4.PbO) in an on-site landfill and transfers 16,000 pounds of lead selenite (PbSeO4) to an off-site land disposal facility. You would therefore be submitting three separate reports on the following: lead compounds, selenium compounds, and chromium compounds. However, the quantities you would be reporting would be the pounds of "parent" metal being released or transferred off-site. All quantities are based on mass balance calculations (See Section 5.B for information on Basis of Estimate and Section 6.C for waste treatment or disposal codes and information on transfers of toxic chemicals in wastes). You would calculate releases of lead, chromium, and selenium by first determining the percentage by weight of these metals in the materials you use as follows:

Lead Chromate (PbCrO4.PbO) -	Molecular weight	=	546.37
Lead 2 Pb -	Molecular weight	=	207.2 x 2 = 414.4
Chromium 1 Cr -	Molecular weight	=	51.996

Lead chromate is therefore (% by weight)

(414.4/546.37) = 75.85% lead and
(51.996/546.37) = 9.52% chromium

Lead Selenite (PbSeO4)	Molecular weight	=	350.17
Lead 1 Pb	Molecular weight	=	207.2
Selenium 1 Se	Molecular weight	=	78.96

Lead selenite is therefore (% by weight)

(207.2/350.17) = 59.17% lead and
(78.96/350.17) = 22.55% selenium.

The total pounds of lead, chromium, and selenium released or transferred from your facility are as follows:

Lead

Release:0.7585 x 14,000 = 10,619 pounds from lead chromate (round to 11,000 pounds)

Transfer: 0.5917 x 16,000 = 9,467 pounds from lead selenite (round to 9,500 pounds)

Chromium

Release:0.0952 x 14,000 = 1,333 pounds from lead chromate (round to 1,300 pounds)

Selenium

Transfer: 0.2255 x 16,000 = 3,608 pounds of selenium from lead round to 3,600 pounds)

O- Estimate is based on other approaches such as engineering calculations (e.g., estimating volatilization using published mathematical formulas) or best engineering judgment. This would include applying an estimated removal efficiency to a treatment, even if the composition of the waste before treatment was fully identified through monitoring data.

For example, if 40 percent of stack emissions of the reported toxic chemical were derived using monitoring data, 30 percent by mass balance, and 30 percent by emission factors, you would enter the code letter "M" for monitoring.

If the monitoring data, mass balance, or emission factor used to estimate the release is not specific to the toxic chemical being reported, the form should identify the estimate as based on engineering calculations or best engineering judgment.

If a mass balance calculation yields the flow rate of a waste, but the quantity of reported toxic chemical in the waste is based on solubility data, report "O" because "engineering calculations" were used as the basis of estimate of the quantity of the toxic chemical in the waste.

If the concentration of the toxic chemical in the waste was measured by monitoring equipment and the flow rate of the waste was determined by mass balance, then the primary basis of the estimate is "monitoring" (M). Even though a mass balance calculation also contributed to the estimate, "monitoring" should be indicated because monitoring data was used to estimate the concentration of the waste.

Mass balance (C) should only be indicated if it is **directly** used to calculate the mass (weight) of toxic chemical released. Monitoring data should be indicated as the basis of estimate **only** if the toxic chemical concentration is measured in the waste being released into the environment. Monitoring data should **not** be indicated, for example, if the monitoring data relates to a concentration of the toxic chemical in other process streams within the facility.

It is important to realize that the accuracy and proficiency of release estimation will improve over time. However, submitters are not required to use new emission factors or estimation techniques to revise previous Form R submissions.

5.Column C Percent From Stormwater

This column relates only to Section 5.3 — discharges to receiving streams or water bodies. If your facility has monitoring data on the amount of the toxic chemical in stormwater runoff (including unchanneled runoff), you must include that quantity of the toxic chemical in your water release in column A **and** indicate the percentage of the total quantity (by weight) of the toxic chemical contributed by stormwater in column C (Section 5.3C).

If your facility has monitoring data on the toxic chemical and an estimate of flow rate, you must use this data to determine the percent stormwater.

If you have monitored stormwater but did not detect the toxic chemical, enter zero (0) in column C. If your facility has no stormwater monitoring data for the chemical, enter not applicable, "NA," in this space on the form.

If your facility does not have periodic measurements of stormwater releases of the toxic chemical, but has submitted chemical-specific monitoring data in permit applications, then these data must be used to calculate the percent contribution from stormwater. Rates of flow can be estimated by multiplying the annual amount of rainfall by the land area of the facility and then multiplying that figure by the runoff coefficient. The runoff coefficient represents the fraction of rainfall that does not seep into the ground but runs off as stormwater. The runoff coefficient is directly related to how the land in the drainage area is used. (See table below.)

Description of Land Area	Runoff Coefficient
Business	
Downtown areas	0.70-0.95
Neighborhood areas	0.50-0.70
Industrial	
Light areas	0.50-0.80
Heavy areas	0.60-0.90
Railroad yard areas	0.20-0.40
Unimproved areas	0.10-0.30
Streets	
Asphaltic	0.70-0.95
Concrete	0.80-0.95
Brick	0.70-0.85
Drives and walks	0.70-0.85
Roofs	0.75-0.95
Lawns: Sandy Soil	
Flat, 2%	0.05-0.10
Average, 2-7%	0.10-0.15
Steep, 7%	0.15-0.20

Example 9: Releases from Stormwater

Your stormwater monitoring data shows that the average concentration of zinc in the stormwater runoff from your facility from a biocide containing a zinc compound is 1.4 milligrams per liter, and the total annual stormwater discharge from the facility is 7.527 million gallons. The total amount of zinc discharged to surface water through the plant wastewater discharge (non-stormwater) is 250 pounds per year. The total amount of zinc discharged with stormwater is:

(7,527,000 gallons stormwater) x (3.785 liters/gallon) = 28,489,695 liters stormwater

(28,489,695 liters stormwater) x (1.4 mg. zinc/liter) = 39,885.6 grams zinc = 88 pounds zinc

The total amount of zinc discharged from all sources of your facility is:

250 pounds zinc from wastewater discharge
+ 88 pounds zinc from stormwater runoff
338 pounds zinc total water discharge

Round to 340 pounds of zinc on Form R.

The percentage of zinc discharged through stormwater is:

88/338 x 100 = 26%

Lawns: Heavy Soil	
Flat, 2%	0.13-0.17
Average, 2-7%	0.18-0.22
Steep, 7%	0.25-0.35

Choose the most appropriate runoff coefficient for your site or calculate a weighted-average coefficient, which takes into account different types of land use at your facility:

Weighted-average runoff coefficient =
(Area 1 % of total)(C1) + (Area 2 % of total)(C2) +
(Area 3 % of total)(C3) + ... + (Area i % of total)(Ci)

where Ci = runoff coefficient for a specific land use of Area i.

Section 6 Transfers of the Toxic Chemical in Wastes to Off-Site Locations

You must report in this section the total annual quantity of the toxic chemical in wastes sent to any off-site facility for the purposes of waste treatment, disposal, recycling, or energy recovery. **Note that beginning with reporting year 1991, off-site transfers for the purposes of recycling and energy recovery are required to be reported.** Report the total amount of the toxic chemical transferred off-site after any on-site waste treatment, recycling, or removal is completed. Report zero for transfers of listed mineral acids if they have been neutralized to a pH of 6 or above prior to discharge to a Publicly Owned Treatment Works (POTW).

If you do not discharge wastewater containing the reported toxic chemical to a POTW, enter not applicable, NA, in the box for the POTW's name in Section 6.1.B._. If you do not ship or transfer wastes containing the reported toxic chemical to other off-site locations, enter not applicable, NA, in the box for the off-site location's EPA Identification Number in Section 6.2._.

Important: Beginning with the 1991 reporting year, you must number the boxes for reporting the information for each POTW or other off-site location in Sections 6.1 and 6.2. In the upper left hand corner of each box, the section number is either 6.1.B._ or 6.2._.

If you report a transfer of the listed toxic chemical to one or more POTW, number the boxes in Section 6.1.B as 6.1.B.1, 6.1.B.2, etc. If you transfer the listed toxic chemical to more than two POTWs, photocopy page 5 of Form R as many times as necessary and then number the boxes consecutively for each POTW. At the bottom of page 5 you will find instructions for indicating the total number of page 5s that you are submitting as part of Form R, as well as indicating the sequence of those pages. For

Example 10: Stormwater Runoff

Your facility is located in a semi-arid region of the United States which has an annual precipitation (including snowfall) of 12 inches of rain. (Snowfall should be converted to the equivalent inches of rain; assume one foot of snow is equivalent to one inch of rain.) The total area covered by your facility is 42 acres (about 170,000 square meters or 1,829,520 square feet). The area of your facility is 50 percent unimproved area, 10 percent asphaltic streets, and 40 percent concrete pavement.

The total stormwater runoff from your facility is therefore calculated as follows:

Land Use	% Total Area	Runoff Coefficient
Unimproved area	50	0.20
Asphaltic streets	10	0.85
Concrete pavement	40	0.90

Weighted-average runoff coefficient = (50%) x (0.20) + (10%) x (0.85) + (40%) x (0.90) = 0.545

(Rainfall) x (land area) x (conversion factor) x (runoff coefficient) = stormwater runoff

(1 foot) x (1,829,520 ft^2) x (7.48 gal/ft^3) x (0.545) = 7,458,221 gallons/year

Total stormwater runoff = 7.45 million gallons/year

example, your facility transfers the reported toxic chemical in wastewaters to three POTWs. You would photocopy page 5 once, indicate at the bottom of each page 5 that there are a total of two page 5s and then indicate the first and second page 5. The boxes for the two POTWs on the first page 5 would be numbered 6.1.B.1 and 6.1.B.2, while the box for the third POTW on the second page 5 would be numbered 6.1.B.3.

If you report a transfer of the listed toxic chemical to one or more other off-site locations, number the boxes in Section 6.2 as 6.2.1, 6.2.2, etc. If you transfer the listed toxic chemical to more than two other off-site locations, photocopy page 6 of Form R as many times as necessary and then number the boxes consecutively for each off-site location. At the bottom of page 6 you will find instructions for indicating the total number of page 6s that you are submitting as part of Form R as well as indicating the sequence of those pages. For example, your facility transfers the reported toxic chemical to three other off-site locations. You would photocopy page 6 once, indicate at the bottom of each page 6 that there are a total of two page 6s and then indicate the first and second page 6. The boxes for the two off-site locations on the first page 6 would be numbered 6.2.1 and 6.2.2, while the box for the third off-site location on the second page 6 would be numbered 6.2.3.

6.1 Discharges to Publicly Owned Treatment Works (POTW)

In Section 6.1.A, estimate the quantity of the reported toxic chemical transferred to all POTWs and the basis upon which the estimate was made. In Section 6.1.B, enter the name and address for each POTW to which your facility discharges wastewater containing the reported toxic chemical.

If you do not discharge wastewater containing the reported toxic chemical to a POTW, enter not applicable, NA, in the box for the POTW's name in Section 6.1.B._.

6.1.A.1 Total Transfers

Enter the total amount, in pounds, of the reported toxic chemical that is contained in the wastewaters transferred to all POTWs. Do not enter the total poundage of the wastewaters. If the total amount transferred is less than 1,000 pounds, you may report a range by entering the appropriate range code. The following reporting range codes are to be used:

Code	Reporting Range (in pounds)
A	1-10
B	11-499
C	500-99

6.1.A.2 Basis of Estimate

You must identify the basis for your estimate of the total quantity of the reported toxic chemical in the wastewaters transferred to all POTWs. Enter one of the following letter codes that applies to the method by which the largest percentage of the estimate was derived.

M- Estimate is based on monitoring data or measurements for the toxic chemical as transferred to an off-site facility.

C - Estimate is based on mass balance calculations, such as calculation of the amount of the toxic chemical in streams entering and leaving process equipment.

E - Estimate is based on published emission factors, such as those relating release quantity to throughput or equipment type (e.g., air emission factors).

O - Estimate is based on other approaches such as engineering calculations (e.g., estimating volatilization using published mathematical formulas) or best engineering judgment. This would include applying an estimated removal efficiency to a waste stream, even if the composition of the stream before treatment was fully identified through monitoring data.

If you transfer a toxic chemical to more than one POTW, you should report the basis of estimate that was used to determine the largest percentage of the toxic chemical that was transferred.

6.2 Transfers to Other Off-Site Locations

In Section 6.2, enter the EPA Identification Number, name, and address for each off-site location to which your facility ships or transfers wastes containing the reported toxic chemical for the purposes of waste treatment, disposal, recycling, or energy recovery. Also estimate the quantity of the reported toxic chemical transferred and the basis upon which the estimate was made. If appropriate, you must report multiple activities (up to four) for each off-site location. For example, if your facility sends a reported toxic chemical in wastes to an off-site location where some of the toxic chemical is to be recycled while the remainder of the quantity transferred is to be treated, you must report both the waste treatment and recycle activities, along with the quantity associated with each activity.

If you do not ship or transfer wastes containing the reported toxic chemical to other off-site locations, enter not applicable, NA, in the box for the off-site location's EPA Identification Number in Section 6.2._. The EPA Identification Number (defined in 40 CFR 260.10 and therefore commonly referred to as the RCRA ID Number) may be found on the Uniform Hazardous Waste Manifest, which is required by RCRA regulations. If you ship or transfer wastes containing a toxic chemical and the off-site location does not have an EPA Identification Number (e.g., it does not accept RCRA hazardous wastes or the wastes in question are not classified as hazardous), enter NA in the box for the off-site location EPA Identification Number. If you ship or transfer the reported toxic chemical in wastes to another country, enter the Federal Information Processing Standards (FIPS) code for that country in the county field of the address for the off-site facility. The most commonly used FIPS codes are listed below.

The following is an abridged list of countires to which a U.S. facility might ship a listed toxic chemical. For a complete listing of FIPS codes, consult your local library.

Country	Code
Argentina	AR
Belgium	BE
Bolivia	BL
Brazil	BR
Canada	CA
Chile	CI
Columbia	CO
Costa Rica	CS
Cuba	CU
Ecuador	EC
El Salvador	ES
France	FR
Guatemala	GT
Honduras	HO
Ireland	EI
Italy	IT
Mexico	MX
Nicaragua	NU
Panama	PM
Paraguay	PA
Peru	PE

Country	Code
Portugal	PO
Spain	SP
Switzerland	SZ
United Kingdom	UK
Uruguay	UY
Venezuela	VE

You must distinguish between incineration, which is always considered waste treatment, and combustion where energy is actually recovered. When the reported toxic chemical has a significant heat of combustion value, and is transferred to an off-site location for combustion in an industrial kiln, furnace, or boiler, report the quantity as used for the purposes of energy recovery. However, toxic chemicals with little or no heat of combustion value (e.g., metals, chlorofluorocarbons) must be reported as treated.

6.2 column A Total Transfers

For each off-site location, enter the total amount, in pounds, of the toxic chemical that is contained in the waste transferred to that location. Do not enter the total poundage of the waste. If the total amount transferred is less than 1,000 pounds, you may report a range by entering the appropriate range code. The following reporting range codes are to be used:

Code	Reporting Range (in pounds)
A	1-10
B	11-499
C	500-999

If you transfer the toxic chemical in wastes to an off-site facility for distinct and multiple purposes, you must report those activities (up to four) for each off-site location, along with the quantity of the reported toxic chemical associated with each activity. For example, your facility transfers a total of 15,000 pounds of toluene to an off-site location that will use 5,000 pounds for the purposes of energy recovery, enter 7,500 pounds into a recovery process, and dispose of the remaining 2,500 pounds. These quantities and the associated activity codes must be reported separately in Section 6.2. (See Figure 4 for a hypothetical Section 6.2 completed for two off-site locations, one of which receives the transfer of 15,000 pounds of toluene as detailed.) If more than four activities are performed on distinct quantities at the off-site location, list the predominant four activities but still report all quantities sent to the off-site location.

Do not double or multiple count amounts transferred off-site. For example, when a reported toxic chemical is sent to an off-site facility for sequential activities and the specific quantities associated with each activity are unknown, report only a single quantity (the total quantity transferred to the off-site location) along with a single activity code. In such a case, report the activity applied to the majority of the reported toxic chemical sent off-site, not the ultimate disposition of the toxic chemical. For example, when a toxic chemical is first treated and then recovered with the majority of the toxic chemical being treated and only a fraction subsequently recovered, report the appropriate waste treatment activity along with the quantity.

6.2 column B Basis of Estimate

You must identify the basis for your estimates of the quantities of the reported toxic chemical in wastes transferred to each off-site location. Enter one of the following letter codes that applies to the method by which the largest percentage of the estimate was derived.

M - Estimate is based on monitoring data or measurements for the toxic chemical as transferred to an off-site facility.

C - Estimate is based on mass balance calculations, such as calculation of the amount of the toxic chemical in wastes entering and leaving process equipment.

E - Estimate is based on published emission factors, such as those relating release quantity to throughput or equipment type (e.g., air emission factors).

O - Estimate is based on other approaches such as engineering calculations (e.g., estimating volatilization using published mathematical formulas) or best engineering judgment. This would include applying an estimated removal efficiency to a treatment, even if the composition of the waste before treatment was fully identified through monitoring data.

6.2 column C Type of Waste Treatment/Disposal/ Recycling/Energy Recovery

Enter one of the following codes to identify the type of waste treatment, disposal, recycling or energy recovery methods used by the off-site location for the reported toxic chemical. You must use more than one line and code

Figure 4
Hypothetical Section 6.2 Completed for Two Off-site Locations

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS			
6.2. 1 Off-site EPA Identification Number (RCRA ID No.)	COD566162461		
Off-Site Location Name	Acme Waste Services		
Street Address	5 Market Street		
City	Releaseville	County	Hill
State CO	Zip Code 80461	Is location under control of reporting facility or parent company?	☐ Yes ☒ No
A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)	
1. 5,000	1. O	1. M56	
2. 7,500	2. C	2. M20	
3. 2,500	3. O	3. M72	
4. NA	4.	4. M	

This off-site location receives a transfer of 15,000 pounds of toluene (as discussed earlier) and will combust 5,000 pounds for the purposes of energy recovery, enter 7,500 pounds into a recovery process, and dispose of the remaining 2,500 pounds.

SECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS			
6.2. 2 Off-site EPA Identification Number (RCRA ID No.)	COD617725432		
Off-Site Location Name	Combustion, Inc.		
Street Address	25 Facility Road		
City	Dumfry	County	Burns
State CO	Zip Code 80500	Is location under control of reporting facility or parent company?	☐ Yes ☒ No
A. Total Transfers (pounds/year) (enter range code or estimate)	B. Basis of Estimate (enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)	
1. 12,500	1. O	1. M54	
2. NA	2.	2. M	
3.	3.	3. M	
4.	4.	4. M	

This off-site location receives a transfer of 12,500 pounds of tetrachloroethylene (perchloroethylene) that is part of a waste that is combusted for the purposes of energy recovery in an industrial furnace. Note that the perchloroethylene is reported using code M54 to indicate that it is combusted in an energy recovery unit but it does not contribute to the heating value of the waste.

for a single location when distinct quantities of the reported toxic chemical are subject to different waste treatment, disposal, recycling, or energy recovery methods. You may have this information in your invoices from the waste service(s) or broker(s) receiving your wastes for the purposes of waste treatment, disposal, recycling, or energy recovery.

You must distinguish between incineration, which is waste treatment, and legitimate energy recovery. In order for you to claim that a reported toxic chemical sent off-site is used for the purposes of energy recovery and not for waste treatment, the toxic chemical must have a heating value high enough to sustain combustion and must be combusted in an energy recovery unit such as an industrial boiler, furnace, or kiln. In a situation where the reported toxic chemical is in a waste that is combusted in an energy recovery unit, but the toxic chemical does not have a heating value high enough to sustain combustion, use code M54, Incineration/Insignificant Fuel Value, to indicate that the toxic chemical was incinerated in an energy recovery unit but did not contribute to the heating value of the waste (see Figure 4 for an example).

Applicable codes for Part II, Section 6.2, column C are:

Disposal
M10 Storage Only
M71 Underground Injection
M72 Landfill/Disposal Surface Impoundment
M73 Land Treatment
M79 Other Land Disposal
M90 Other Off-Site Management
M94 Transfer to Waste Broker—Disposal
M99 Unknown

Recycling
M20 Solvents/Organics Recovery
M24 Metals Recovery
M26 Other Reuse or Recovery
M28 Acid Regeneration
M93 Transfer to Waste Broker—Recycling

Waste Treatment
M40 Solidification/Stabilization
M50 Incineration/Thermal Treatment
M54 Incineration/Insignificant Fuel Value
M61 Wastewater Treatment (Excluding POTW)
M69 Other Waste Treatment
M95 Transfer to Waste Broker—Waste Treatment

Energy Recovery
M56 Energy Recovery
M92 Transfer to Waste Broker—Energy Recovery

Section 7 On-Site Waste Treatment, Energy Recovery and Recycling Methods

You must report in this section the methods of waste treatment, energy recovery, and recycling applied to the reported toxic chemical in wastes on-site. There are three separate sections for reporting such activities.

Section 7A On-Site Waste Treatment Methods and Efficiency

In Section 7A, you must provide the following information if you treat the reported toxic chemical on-site:

(a) the general waste stream types containing the toxic chemical being reported;
(b) the waste treatment method(s) or sequence used on all waste streams containing the toxic chemical;
(c) the range of concentration of the toxic chemical in the influent to the waste treatment method;
(d) the efficiency of each waste treatment method or waste treatment sequence in removing the toxic chemical; and
(e) whether the waste treatment efficiency figure was based on actual operating data.

Use a separate line in Section 7A for each general waste stream type. Report only information about treatment of waste streams at your facility, not information about off-site waste treatment.

If you do not perform on-site treatment of waste streams containing the reported toxic chemical, check the Not Applicable (NA) box at the top of Section 7A.

7A column a General Waste Stream

For each waste treatment method, indicate the type of waste stream containing the toxic chemical that is treated. Enter the letter code that corresponds to the general waste stream type:

A Gaseous (gases, vapors, airborne particulates)
W Wastewater (aqueous waste)
L Liquid waste streams (non-aqueous waste)
S Solid waste streams (including sludges and slurries)

If a waste is a mixture of water and organic liquid and the organic content is less than 50 percent, report it as a wastewater (W). Slurries and sludges containing water must be reported as solid waste if they contain appreciable amounts of dissolved solids, or solids that may settle, such that the viscosity or density of the waste is considerably different from that of process wastewater.

7A column b Waste Treatment Method(s) Sequence

Enter the appropriate code from the list below for each on-site waste treatment method used on a waste stream containing the toxic chemical, regardless of whether the waste treatment method actually removes the specific toxic chemical being reported. Waste treatment methods must be reported for each type of waste stream being treated (i.e., gaseous waste streams, aqueous waste streams, liquid non-aqueous waste streams, and solids). Except for the air emission treatment codes, the waste treatment codes are not restricted to any medium.

Waste streams containing the toxic chemical may have a single source or may be aggregates of many sources. For example, process water from several pieces of equipment at your facility may be combined prior to waste treatment. Report waste treatment methods that apply to the aggregate waste stream, as well as waste treatment methods that apply to individual waste streams. If your facility treats various wastewater streams containing the toxic chemical in different ways, the different waste treatment methods must be listed separately.

If your facility has several pieces of equipment performing a similar service in a waste treatment sequence, you may combine the reporting for such equipment. It is not necessary to enter four codes to cover four scrubber units, for example, if all four are treating waste streams of similar character (e.g., sulfuric acid mist emissions), have similar influent concentrations, and have similar removal efficiencies. If, however, any of these parameters differs from one unit to the next, each scrubber must be listed separately.

If your facility performs more than eight sequential waste treatment methods on a single general waste stream, continue listing the methods in the next row and renumber appropriately those waste treatment method code boxes you used to continue the sequence. For example, if the general waste stream in box 7A.1a had nine treatment methods applied to it, the ninth method would be indicated in the first method box for row 7A.2a. The numeral "1" would be crossed out, and a "9" would be inserted. Treatment applied to any other general waste stream types would then be listed in the next empty row. In the scenario above, for instance, the second general waste stream would be reported in row 7A.3a. See Figure 5 below for an example of a hypothetical Section 7A completed for a nine-step waste treatment process and a single waste treatment method.

If you need additional space to report under Section 7A, photocopy page 7 of Form R as many times as necessary. At the bottom of page 7 you will find instructions for indicating the total number of page 7s that you are submitting as part of Form R, as well as instructions for indicating the sequence of those pages.

Waste Treatment Codes

Air Emissions Treatment (applicable to gaseous waste streams only)

A01	Flare
A02	Condenser
A03	Scrubber
A04	Absorber
A05	Electrostatic Precipitator
A06	Mechanical Separation
A07	Other Air Emission Treatment

Biological Treatment

B11	Biological Treatment — Aerobic
B21	Biological Treatment — Anaerobic
B31	Biological Treatment — Facultative
B99	Biological Treatment — Other

Chemical Treatment

C01	Chemical Precipitation — Lime or Sodium Hydroxide
C02	Chemical Precipitation — Sulfide
C09	Chemical Precipitation — Other
C11	Neutralization
C21	Chromium Reduction
C31	Complexed Metals Treatment (other than pH Adjustment)
C41	Cyanide Oxidation — Alkaline Chlorination
C42	Cyanide Oxidation — Electrochemical
C43	Cyanide Oxidation — Other
C44	General Oxidation (including Disinfection) — Chlorination
C45	General Oxidation (including Disinfection) — Ozonation

Figure 5
Hypothetical Section 7A

SECTION 7A. ON-SITE WASTE TREATMENT METHODS AND EFFICIENCY

☐ **Not Applicable (NA) - Check here if no on-site waste treatment is applied to any waste stream containing the toxic chemical or chemical category.**

a. General Waste Stream (enter code)	b. Waste Treatment Method(s) Sequence [enter 3-character code(s)]	c. Range of Influent Concentration	d. Waste Treatment Efficiency Estimate	e. Based on Operating Data?
7A.1a	7A.1b 1 P12 2 P18	7A.1c	7A.1d	7A.1e
W	3 P17 4 P61 5 P42 6 P21 7 B21 8 P11	NA	%	Yes ☐ No ☐
7A.2a	7A.2b 9 C44 2 NA	7A.2c	7A.2d	7A.2e
	3 4 5 6 7 8	1	99 %	Yes X No ☐
7A.3a	7A.3b 1 A01 2 NA	7A.3c	7A.3d	7A.3e
A	3 4 5 6 7 8	1	91 %	Yes X No ☐

C46 General Oxidation (including Disinfection) — Other
C99 Other Chemical Treatment

Incineration/Thermal Treatment

F01 Liquid Injection
F11 Rotary Kiln with Liquid Injection Unit
F19 Other Rotary Kiln
F31 Two Stage
F41 Fixed Hearth
F42 Multiple Hearth
F51 Fluidized Bed
F61 Infra-Red
F71 Fume/Vapor
F81 Pyrolytic Destructor
F82 Wet Air Oxidation
F83 Thermal Drying/Dewatering
F99 Other Incineration/Thermal Treatment

Physical Treatment

P01 Equalization
P09 Other Blending
P11 Settling/Clarification
P12 Filtration
P13 Sludge Dewatering (non-thermal)
P14 Air Flotation
P15 Oil Skimming
P16 Emulsion Breaking — Thermal
P17 Emulsion Breaking — Chemical
P18 Emulsion Breaking — Other
P19 Other Liquid Phase Separation
P21 Adsorption — Carbon
P22 Adsorption — Ion Exchange (other than for recovery/reuse)
P23 Adsorption — Resin
P29 Adsorption — Other
P31 Reverse Osmosis (other than for recovery/reuse)
P41 Stripping — Air
P42 Stripping — Steam
P49 Stripping — Other
P51 Acid Leaching (other than for recovery/reuse)
P61 Solvent Extraction (other than recovery/reuse)
P99 Other Physical Treatment

Solidification/Stabilization

G01 Cement Processes (including Silicates)
G09 Other Pozzolonic Processes (including Silicates)
G11 Asphaltic Processes
G21 Thermoplastic Techniques
G99 Other Solidification Processes

7A column c Range of Influent Concentration

The form requires an indication of the range of concentration of the toxic chemical in the waste stream (i.e., the influent) as it typically enters the waste treatment step or sequence. The concentration is based on the amount or mass of the toxic chemical in the waste stream as compared to the total amount or mass of the waste stream. Enter in the space provided one of the following code numbers corresponding to the concentration of the toxic chemical in the influent:

1 = Greater than 1 percent
2 = 100 parts per million (0.01 percent) to 1 percent (10,000 parts per million)
3 = 1 part per million to 100 parts per million
4 = 1 part per billion to 1 part per million
5 = Less than 1 part per billion

Note: Parts per million (ppm) is:

- milligrams/kilogram (mass/mass) for solids and liquids;
- cubic centimeters/cubic meter (volume/volume) for gases;
- milligrams/liter for solutions or dispersions of the chemical in water; and
- milligrams of chemical/kilogram of air for particulates in air.

If you have particulate concentrations (at standard temperature and pressure) as grains/cubic foot of air, multiply by 1766.6 to convert to parts per million; if in milligrams/cubic meter, multiply by 0.773 to obtain parts per million. These conversion factors are for standard conditions of 0°C (32°F) and 760 mmHg atmospheric pressure.

7A column d Waste Treatment Efficiency Estimate

In the space provided, enter the number indicating the percentage of the toxic chemical removed from the waste stream through destruction, biological degradation, chemical conversion, or physical removal. The waste treatment efficiency (expressed as percent removal) represents the percentage of the toxic chemical destroyed or removed (based on amount or mass), not merely changes in volume or concentration of the toxic chemical in the waste stream. The efficiency, which can reflect the overall removal from sequential treatment methods applied to the general waste stream, refers only to the percent destruction, degradation, conversion, or removal of the listed toxic chemical from the waste stream, not the percent conversion or removal of other constituents in the waste stream. The efficiency also does not refer to the general efficiency of the treatment method for any waste stream. For some waste treatment methods, the percent removal will represent removal by several mechanisms, as in an aeration basin, where a toxic chemical may evaporate, be biodegraded, or be physically removed from the sludge.

Percent removal can be calculated as follows:

$$\frac{(I - E)}{I} \times 100, \text{ where}$$

I = amount of the toxic chemical in the influent waste stream (entering the waste treatment step or sequence) and
E = amount of the toxic chemical in the effluent waste stream (exiting the waste treatment step or sequence).

Calculate the amount of the toxic chemical in the influent waste stream by multiplying the concentration (by weight) of the toxic chemical in the waste stream by the total amount or weight of the waste stream. In most cases, the percent removal compares the treated effluent to the influent for the particular type of waste stream. For solidification of wastewater, the waste treatment efficiency can be reported as 100 percent if no volatile toxic chemicals were removed with the water or evaporated into the air. Percent removal does not apply to incineration because the waste stream, such as wastewater or liquids, may not exist in a comparable form after waste treatment and the purpose of incineration as a waste treatment is to destroy the toxic chemical by converting it to carbon dioxide and water. In cases where the toxic chemical is incinerated, the percent efficiency must be based on the amount of the toxic chemical destroyed or combusted, except for metals or metal compounds. In the cases where a metal or metal compound is incinerated, the efficiency is always zero for the parent metal.

Similarly, an efficiency of zero must be reported for any waste treatment method(s) (e.g., evaporation) that does not destroy, chemically convert, or physically remove the toxic chemical from the waste stream.

For metal compounds, the calculation of the reportable concentration and waste treatment efficiency must be based on the weight of the parent metal, not on the weight of the metal compounds. Metals are not destroyed, only physically removed or chemically converted from one form into another. The waste treatment efficiency reported must represent only physical removal of the parent metal from the waste stream (except for incineration), not the percent chemical conversion of the metal compound. If a listed waste treatment method converts but does not remove a metal (e.g., chromium reduction), the method must be reported with a waste treatment efficiency of zero.

Listed toxic chemicals that are strong mineral acids neutralized to a pH of 6 or above are considered treated at a 100 percent efficiency.

All data available at your facility must be used to calculate waste treatment efficiency and influent toxic chemical concentration. If data are lacking, estimates must be made using best engineering judgment or other methods.

7A column e Based on Operating Data?

This column requires you to indicate "Yes" or "No" to whether the waste treatment efficiency estimate is based on actual operating data. For example, you would check "Yes" if the estimate is based on monitoring of influent and effluent wastes under typical operating conditions.

If the efficiency estimate is based on published data for similar processes or on equipment supplier's literature, or if you otherwise estimated either the influent or effluent waste comparison or the flow rate, check "No."

Section 7B On-Site Energy Recovery Processes

In Section 7B, you must indicate the on-site energy recovery methods used on the reported toxic chemical. If you do not perform on-site energy recovery for the reported toxic chemical, check the Not Applicable (NA) box at the top of Section 7B.

Example 11: Reporting On-Site Energy Recovery

One waste stream generated by your facility contains, among other chemicals, toluene and cadmium. Threshold quantities are exceeded for both of these toxic chemicals, and you would, therefore, submit two separate Form R reports. This waste stream is sent to an on-site industrial furnace which uses the heat generated in a thermal hydrocarbon cracking process at your facility. Because toluene has a significant heat value (17,440 BTU/pound) and the energy is recovered in an industrial furnace, the code "U02" would be reported in Section 7B for the Form R submitted for toluene.

However, as cadmium is a non-combustible metal and therefore does not contribute any heat value for energy recovery purposes, the combustion of cadmium in the industrial furnace is considered waste treatment, not energy recovery. You would report cadmium as entering a waste treatment step (i.e., incineration), in Section 7A, column b.

Only listed toxic chemicals that have a significant heating value and are combusted in an energy recovery unit such as an industrial furnace, kiln, or boiler, can be reported as combusted for energy recovery in this section. If a reported toxic chemical is incinerated on-site but does not contribute energy to the process (e.g., metals and chlorofluorocarbons), it must be considered waste treated on-site and reported in Section 7A. Energy recovery may take place only in one of the types of energy recovery equipment listed below.

Energy Recovery Codes

U01	Industrial Kiln
U02	Industrial Furnace
U03	Industrial Boiler
U09	Other Energy Recovery Methods

If your facility uses more than one on-site energy recovery method for the reported toxic chemical, list the methods used in descending order (greatest to least) based on the amount of the toxic chemical entering such methods.

Section 7C On-Site Recycling Processes

In Section 7C, you must report the recycling methods used on the listed toxic chemical. If you do not conduct any on-site recycling of the reported toxic chemical, check the Not Applicable (NA) box at the top of Section 7C.

In this section, use the codes below to report only the recycling methods in place at your facility that are applied to the listed toxic chemical. Do not list any off-site recycling activities (Information about off-site recycling must be reported in Part II, Section 6, "Transfers of the Toxic Chemical in Wastes to Off-Site Locations,").

On-Site Recycling Codes

R11	Solvents/Organics Recovery — Batch Still Distillation
R12	Solvents/Organics Recovery — Thin-Film Evaporation
R13	Solvents/Organics Recovery — Fractionation
R14	Solvents/Organics Recovery — Solvent Extraction
R19	Solvents/Organics Recovery — Other
R21	Metals Recovery — Electrolytic
R22	Metals Recovery — Ion Exchange
R23	Metals Recovery — Acid Leaching
R24	Metals Recovery — Reverse Osmosis
R26	Metals Recovery — Solvent Extraction
R27	Metals Recovery — High Temperature
R28	Metals Recovery — Retorting
R29	Metals Recovery — Secondary Smelting
R30	Metals Recovery — Other
R40	Acid Regeneration
R99	Other Reuse or Recovery

If your facility uses more than one on-site recycling method for a toxic chemical, enter the codes in the space provided in descending order (greatest to least) of the volume of the reported toxic chemical recovered by each process. If your facility uses more than ten separate methods for recycling the reported toxic chemical on-site, then list the ten activities that recover the greatest amount of the toxic chemical (again, in descending order).

Section 8 Source Reduction and Recycling Activities

This Section includes the data elements mandated by section 6607 of the Pollution Prevention Act of 1990 (PPA). Section 8 is a required section of Form R and must be completed.

In Section 8, you must provide information about source reduction and recycling activities related to the toxic chemical for which releases are being reported. For all appropriate questions, report only the quantity, in pounds, of the reported toxic chemical. Do not include the weight of water, soil, or other waste constituents. When reporting on a metal compound, report only the amount of the parent metal as you do when estimating release amounts. All amounts must be reported in whole numbers and up to two significant figures can be provided.

Section 8.1 through 8.9 must be completed for each toxic chemical. Section 8.10 must be completed only if a source reduction activity was newly implemented specifically (in whole or in part) for the reported toxic chemical during the reporting year. Section 8.11 allows you to indicate if you have attached additional optional information on source reduction, recycling, or pollution control activities implemented at any time at your facility.

Sections 8.1 through 8.7 require reporting of quantities for the current reporting year, the prior year, and quantities anticipated in both the first year immediately following the reporting year and the second year following the reporting year (future estimates).

Column A: 1992 (Prior Year)

Quantities for Sections 8.1 through 8.7 must be reported for the year immediately preceding the reporting year in column A. For reports due July 1, 1994, the prior year is 1992. Information available at the facility that may be used to estimate the prior year's quantities include the prior year's Form R submission, supporting documentation, and recycling, energy recovery, or treatment operating logs or invoices.

Column B: 1993 (Reporting Year)

Quantities for Sections 8.1 through 8.7 must be reported for the current reporting year in column B.

Columns C and D: 1994 and 1995 (Following Year and Second Year)

Quantities for Sections 8.1 through 8.7 must be estimated for 1994 and 1995. EPA expects reasonable future quantity estimates using a logical basis. Information available at the facility to estimate quantities of the chemical expected during these years include planned source reduction activities, market projections, expected contracts, anticipated new product lines, company growth projections, and production capacity figures. Not applicable, "NA", may not be entered for these data elements. Respondents should take into account protections available for trade secrets as provided in EPCRA Section 322 (42 USC 11042).

Relationship to Other Laws

The reporting categories for quantities recycled, treated, used for energy recovery, and disposed apply to completing Section 8 of Form R as well as to the rest of Form R. These categories are to be used only for TRI reporting. They are not intended for use in determining, under the Resource Conservation and Recovery Act (RCRA) Subtitle C regulations, whether a secondary material is a waste when recycled. These definitions also do not apply

Example 12: Reporting Future Estimates

A pharmaceutical manufacturing facility uses a listed toxic chemical in the manufacture of a prescription drug. During the reporting year (1993), the company received approval from the Food and Drug Administration to begin marketing their product as an over-the-counter drug beginning in 1994. This approval is publicly known and does not constitute confidential business information. As a result of this expanded market, the company estimates that sales and subsequent production of this drug will increase their use of the reported toxic chemical by 30 percent per year for the two years following the reporting year. The facility treats the toxic chemical on-site and the quantity treated is directly proportional to production activity. The facility thus estimates the total quantity of the reported toxic chemical treated for the following year (1994) by adding 30 percent to the amount in column B (the amount for the current reporting year). The second year (1995) figure can be calculated by adding an additional 30 percent to the amount reported in Column C (the amount for the following year (1994) projection).

to the information that may be submitted in the Biennial Report required under RCRA. In addition, these definitions do not imply any future redefinition of RCRA terms and do not affect EPA's RCRA authority or authority under any other statute administered by EPA.

Differences in terminology and reporting requirements for toxic chemicals reported on Form R and for hazardous wastes regulated under RCRA occur because EPCRA and the PPA focus on specific chemicals, while the RCRA regulations and the Biennial Report focus on wastes, including mixtures. For example, a RCRA hazardous waste containing a section 313 toxic chemical is recycled to recover certain constituents of that waste, but not the toxic chemical reported under EPCRA section 313. The toxic chemical simply passes through the recycling process and remains in the residual from the recycling process. While the waste may be considered recycled under RCRA, the toxic chemical constituent would be considered to be treated for TRI purposes.

Quantities Reportable in Sections 8.1 - 8.7

8.1 Report releases pursuant to EPCRA Section 329(8) including "any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing [on-site or off-site] into the environment (including the abandonment of barrels, containers, and other closed receptacles)." Do not include any quantity treated on-site or off-site.

8.2 - 8.3 A toxic chemical or a mixture containing a toxic chemical that is used for energy recovery on-site or is sent off-site for energy recovery, unless it is a commercially available fuel. For the purposes of reporting on Form R, reportable on-site and off-site energy recovery is the combustion of a residual material containing a TRI toxic chemical when:

(a) The combustion unit is integrated into an energy recovery system (i.e., industrial furnaces, industrial kilns, and boilers); and

(b) The toxic chemical is combustible and has a heating value high enough to sustain combustion.

8.4 - 8.5 A toxic chemical or a mixture containing a toxic chemical that is recycled on-site or is sent off-site for recycling.

8.6 - 8.7 A toxic chemical or a mixture containing a toxic chemical that is treated on-site or is sent to a POTW or other off-site location for waste treatment.

A toxic chemical or a toxic chemical in a mixture that is a waste under RCRA must be reported in Sections 8.1 through 8.7.

Avoid Double-Counting in Sections 8.1 Through 8.8

Section 8 of Form R uses data collected to complete Part II, Sections 5 through 7. For this reason, Section 8 should be completed last.

Do not double- or multiple-count quantities in Sections 8.1 through 8.7. The quantities reported in each of those sections must be mutually exclusive. Do not multiple-count quantities entering sequential reportable activities. For example, 5,000 pounds of toxic chemical enters a treatment operation. Three thousand pounds of the toxic chemical exits the treatment operation and then enters a recycling operation. Five hundred pounds of the toxic chemical is in residues from the recycling operation which is subsequently sent off-site for disposal. These quantities would be reported as follows in Section 8:

Section 8.1:	500 pounds disposed
Section 8.4:	2,500 pounds recycled
Section 8.6:	2,000 pounds treated (5,000 that initially entered - 3,000 that subsequently entered recycling)

To report that 5,000 pounds were treated, 3,000 pounds were recycled, and that 500 pounds were sent off-site for disposal would result in over-counting the quantities of toxic chemical recycled, treated, and disposed by 3,500 pounds.

Do not include in Sections 8.1 through 8.7 any quantities of the toxic chemical released into the environment due to remedial actions; catastrophic events such as earthquakes, fires, or floods; or unanticipated one-time events not associated with the production process such as tank ruptures or reactor explosions. These quantities should be reported in Section 8.8 only. For example, 10,000 pounds of diaminoanisole sulfate is released due to a catastrophic event and is subsequently treated off-site. The 10,000 pounds is reported in Section 8.8, but the amount subsequently treated off-site is not reported in Section 8.7.

8.8 Quantity Released to the Environment as a Result of Remedial Actions, Catastrophic Events, or One-Time Events Not Associated with Production Processes.

In Section 8.8, enter the total quantity of toxic chemical released directly into the environment or sent off-site for recycling, waste treatment, energy recovery, or disposal during the reporting year due to any of the following events:

(1) remedial actions,
(2) catastrophic events such as earthquakes, fires, or floods; or
(3) one-time events not associated with normal or routine production processes.

These quantities should not be included in Sections 8.1 through 8.7. The amount of toxic chemical released into the environment during remediation or transferred off-site is to be reported in Part II, Sections 5 and 6 as appropriate.

The purpose of this section is to separate quantities recycled, used for energy recovery, treated, or disposed that are associated with normal or routine production operations from those that are not. While all quantities released, recycled, treated, or disposed may ultimately be preventable, this section separates the quantities that are more likely to be reduced or eliminated by process-oriented source reduction activities from those releases that are largely unpredictable and are less amenable to such source reduction activities. For example, spills that occur as a routine part of production operations and could be reduced or eliminated by improved handling, loading, or unloading procedures are included in the quantities reported in Section 8.1 through 8.7 as appropriate. A total loss of containment resulting from a tank rupture caused by a tornado would be included in the quantity reported in Section 8.8.

Similarly, the amount of a toxic chemical spilled or cleaned up from normal operations during the reporting year would be included in the quantities reported in Sections 8.1 through 8.7. However, the quantity of the reported toxic chemical generated from a remedial action (e.g., RCRA corrective action) to clean up the environmental contamination resulting from past practices should be reported in Section 8.8 because they cannot currently be addressed by source reduction methods. A remedial action for purposes of Section 8.8 is a waste cleanup (including RCRA and CERCLA operations) within the facility boundary. Most remedial activities involve collecting and treating contaminated material.

Also, releases caused by catastrophic events are to be incorporated into the quantity reported in Section 8.8. Such releases may be caused by natural disasters (e.g., hurricanes and earthquakes) or by large scale accidents (e.g., fires and explosions). These amounts are not included in the quantity reported in Sections 8.1 through 8.7 because such releases are generally unanticipated and cannot be addressed by routine process-oriented accident prevention techniques.

Example 13: Quantity Released to the Environment as a Result of Remedial Actions, Catastrophic Events, or One-Time Events Not Associated with Production Processes.

A chemical manufacturer produces a toxic chemical in a reactor that operates at low pressure. The reactants and the toxic chemical product are piped in and out of the reactor at monitored and controlled temperatures. During normal operations, small amounts of fugitive emissions occur from the valves and flanges in the pipelines.

Due to a malfunction in the control panel (which is state-of-the-art and undergoes routine inspection and maintenance), the temperature and pressure in the reactor increase, the reactor ruptures, and the toxic chemical is released. Because the malfunction could not be anticipated and, therefore, could not be reasonably addressed by specific source reduction activities, the amount released is included in Section 8.8. In this case, much of the toxic chemical is released as a liquid and pools on the ground. It is estimated that 1,000 pounds of the toxic chemical pooled on the ground and was subsequently collected and sent off-site for treatment. In addition, it is estimated that another 200 pounds of the toxic chemical vaporized directly to the air from the rupture. The total amount reported in Section 8.8 is the 1,000 pounds that pooled on the ground (and subsequently sent off-site), plus the 200 pounds that vaporized into the air, a total of 1,200 pounds. The quantity sent off-site must also be reported in Section 6 (but not in Section 8.7) and the quantity that vaporized must be reported as a fugitive emission in Section 5 (but not in Section 8.1).

By checking your documentation for calculating estimates made for Part II, Section 5, "Releases of the Toxic Chemical to the Environment," you may be able to identify release amounts from the above sources. Emergency notifications under CERCLA and EPCRA as well as accident histories required under the Clean Air Act may provide useful information. You should also check facility incident reports and maintenance records to identify one-time or catastrophic events.

Note that while the information reported in Section 8.8 represents only remedial, catastrophic, or one-time events not associated with production processes, Section 5 of Form R (releases to the environment) and Section 6 (off-site transfers), must include all releases and transfers as appropriate, regardless of whether they arise from catastrophic, remedial, or routine process operations.

8.9 Production Ratio or Activity Index

For Section 8.9, you must provide a ratio of reporting year production to prior year production, or provide an "activity index" based on a variable other than production that is the primary influence on the quantity of the reported toxic chemical recycled, used for energy recovery, treated, or disposed. The ratio or index must be reported to the nearest tenths or hundredths place (e.g., one or two digits to the right of the decimal point). If the manufacture or use of the reported toxic chemical began during the current reporting year, enter not applicable, "NA," as the production ratio or activity index.

It is important to realize that if your facility reports more than one reported toxic chemical, the production ratio or activity index may vary for different chemicals. For facilities that manufacture reported toxic chemicals, the quantities of the toxic chemical(s) produced in the current and prior years provide a good basis for the ratio because that is the primary business activity associated with the reported toxic chemical(s). In most cases, the production ratio or activity index must be based on some variable of production or activity rather than on toxic chemical or material usage. Indices based on toxic chemical or material usage may reflect the effect of source reduction activities rather than changes in business activity. Toxic chemical or material usage is therefore not a basis to be used for the production ratio or activity index where the toxic chemical is "otherwise-used" (i.e., non-incorporative activities such as extraction solvents, metal degreasers, etc.).

Example 14: Determining a Production Ratio

Your facility's only use of toluene is as a paint carrier for a painting operation. You painted 12,000 refrigerators in the current reporting year and 10,000 refrigerators during the preceding year. The production ratio for toluene in this case is 1.2 (12,000/10,000) because the number of refrigerators produced is the primary factor determining the quantity of toluene to be reported in Sections 8.1 through 8.7.

A facility manufactures inorganic pigments, including titanium dioxide. Hydrochloric acid is produced as a waste byproduct during the production process. An appropriate production ratio for hydrochloric acid is the annual titanium dioxide production, not the amount of byproduct generated. If the facility produced 20,000 pounds of titanium dioxide during the reporting year and 26,000 pounds in the preceding year, the production ratio would be 0.77 (20,000/26,000).

While several methods are available to the facility for determining this data element, the production ratio or activity index must be based on the variable that most directly affects the quantities of the toxic chemical recycled, used for energy recovery, treated, or disposed. Examples of methods available include:

(1) Amount of toxic chemical manufactured in 1993 divided by the amount of toxic chemical manufactured in 1992; or

(2) Amount of product produced in 1993 divided by the amount of product produced in 1992.

Example 15: Determining an Activity Index

Your facility manufactures organic dyes in a batch process. Different colors of dyes are manufactured, and between color changes, all equipment must be thoroughly cleaned with solvent containing glycol ethers to reduce color carryover. During the preceding year, the facility produced 2,000 pounds of yellow dye in January, 9,000 pounds of green dye for February through September, 2,000 pounds of red dye in November, and another 2,000 pounds of yellow dye in December. This adds up to a total of 15,000 pounds and four color changeovers. During the reporting year, the facility produced 10,000 pounds of green dye during the first half of the year and 10,000 pounds of red dye in the second half. If your facility uses glycol ethers in this cleaning process only, an activity index of 0.5 (based on two color changeovers for the reporting year divided by four changeovers for the preceding year) is more appropriate than a production ratio of 1.33 (based on 20,000 pounds of dye produced in the current year divided by 15,000 pounds in the preceding year). In this case, an activity index, rather than a production ratio, better reflects the factors that influence the amount of solvent recycled, used for energy recovery, treated, or disposed.

A facility that manufactures thermoplastic composite parts for aircraft uses acetone as a wipe solvent to clean molds. The solvent is stored in 55-gallon drums and is transferred to 1-gallon dispensers. The molds are cleaned on an as-needed basis that is not necessarily a function of the parts production rate. Operators cleaned 5,200 molds during the reporting year, but only cleaned 2,000 molds in the previous year. An activity index of 2.6 (5,200/2,000) represents the activities involving acetone usage in the facility. If the molds were cleaned after 1,000 parts were manufactured, a production ratio would equal the activity index and either could be used as the basis for the index.

A facility manufactures surgical instruments and cleans the metal parts with 1,1,1-trichloroethane in a vapor degreaser. The degreasing unit is operated in a batch mode and the metal parts are cleaned according to an irregular schedule. The activity index can be based upon the total time the metal parts are in the degreasing operation. If the degreasing unit operated 3,900 hours during the reporting year and 3,000 hours the prior year, the activity index is 1.3 (3,900/3,000).

A pharmaceutical plant uses hydrochloric acid to regenerate deionization units that supply deionized water to several operations in the facility. During the reporting year, the facility noted that the units were recharged once per week. Records for the prior year indicate that the units were recharged four times per week. Provided that the reduction in recharges per week is not part of a planned source reduction program, an index of 0.25 (1/4) represents the activities that were the primary influence on the amount of hydrochloric acid recycled, used for energy recovery, treated, or disposed.

Example 16: "NA" is Entered as the Production Ratio or Activity Index

Your facility began production of a microwidget during this reporting year. Perchloroethylene is used as a cleaning solvent for this operation and this is the only use of the toxic chemical in your facility. You would enter not applicable, "NA," in Section 8.9 because you have no basis of comparison in the prior year for the purposes of developing the activity index.

Example 17: Determining the Production Ratio Based on a Weighted Average

At many facilities, a reported toxic chemical is used in more than one production process. In these cases, a production ratio or activity index can be estimated by weighting the production ratio for each process based on the respective contribution of each process to the quantity of the reported toxic chemical recycled, used for energy recovery, treated, or disposed.

Your facility paints bicycles with paint containing toluene. Sixteen thousand bicycles were produced in the reporting year and 14,500 were produced in the prior year. There were no significant design modifications that changed the total surface area to be painted for each bike. The bicycle production ratio is 1.1 (16,000/14,5000). You estimate 12,500 pounds of toluene treated, recycled, used for energy recovery, or disposed as a result of bicycle production. Your facility also uses toluene as a solvent in a glue that is used to make components and add-on equipment for the bicycles. Thirteen thousand components were manufactured in the reporting year as compared to 15,000 during the prior year. The production ratio for the components using toluene is 0.87 (13,000/15,000). You estimate 1,000 pounds of toluene treated, recycled, used for energy recovery, or disposed as a result of components production. A production ratio can be calculated by weighting each of the production ratios based on the relative contribution each has to the quantities of toluene treated, recycled, used for energy recovery, or disposed during the reporting year (13,500 pounds). The production ratio is calculated as follows:

$$\text{Production ratio} = (12{,}500/13{,}500 \times 1.1) + (1{,}000/13{,}500 \times 0.87) = 1.08$$

8.10 Did Your Facility Engage in any Source Reduction Activities for this Chemical during the Reporting Year?

If your facility engaged in any source reduction activity for the reported toxic chemical during the reporting year, report the activity that was implemented and the method used to identify the opportunity for the activity implemented. If your facility did not engage in any source reduction activity for the reported toxic chemical, enter not applicable, "NA," in Section 8.10.1 and answer Section 8.11.

Source reduction means any practice which:

- Reduces the amount of any hazardous substance, pollutant, or contaminant entering any waste stream or otherwise released into the environment (including fugitive emissions) prior to recycling, treatment, or disposal; and
- Reduces the hazards to public health and the environment associated with the release of such substances, pollutants, or contaminants.

The term includes equipment or technology modifications, process or procedure modifications, reformulation or redesign of products, substitution of raw materials, and improvements in housekeeping, maintenance, training, or inventory control.

The term source reduction does not include any practice which alters the physical, chemical, or biological characteristics or the volume of a hazardous substance, pollutant, or contaminant through a process or activity which itself is not integral to and necessary for the production of a product or the providing of a service.

Source reduction activities do not include recycling, treating, using for energy recovery, or disposing of a toxic chemical. Report in this section only the source reduction activities implemented to reduce or eliminate the quantities reported in Sections 8.1 through 8.7 — the focus of the section is only those activities that are applied to reduce routine or reasonably anticipated releases and quantities of the reported toxic chemical recycled, treated, used for energy recovery, or disposed. Do not report in this section any activities taken to reduce or eliminate the quantities reported in Section 8.8.

Example 18: Source Reduction

A facility assembles and paints furniture. Both the glue used to assemble the furniture and the paints contain listed toxic chemicals. By examining the gluing process, the facility discovered that a new drum of glue is opened at the beginning of each shift, whether the old drum is empty or not. By adding a mechanism that prevents the drum from being changed before it is empty, the need for disposal of the glue is eliminated at the source. As a result, this activity is considered source reduction. The painting process at this facility generates a solvent waste which is collected and recovered. The recovered solvent is used to clean the painting equipment. The recycling activity does not reduce the amount of toxic chemical recycled, and therefore is not considered a source reduction activity.

Source Reduction Activities

You must enter in the first column of Section 8.10, "Source Reduction Activities," the appropriate code(s) indicating the type of actions taken to reduce the amount of the reported toxic chemical released (as reported in Section 8.1), used for energy recovery (as reported in Section 8.2), recycled (as reported in Section 8.4-8.5), or treated (as reported in Section 8.6-8.7). The list of codes below includes many, but not all, of the codes provided in the RCRA biennial report. Remember that source reduction activities include only those actions or techniques that reduce or eliminate the amounts of the toxic chemical reported in Section 8.1 through 8.7. Actions taken to recycle, treat, or dispose of the toxic chemical are not considered source reduction activities.

Source Reduction Activity Codes:

Good Operating Practices

W13 Improved maintenance scheduling, recordkeeping, or procedures
W14 Changed production schedule to minimize equipment and feedstock changeovers
W19 Other changes in operating practices

Inventory Control

W21 Instituted procedures to ensure that materials do not stay in inventory beyond shelf-life
W22 Began to test outdated material — continue to use if still effective
W23 Eliminated shelf-life requirements for stable materials
W24 Instituted better labelling procedures
W25 Instituted clearinghouse to exchange materials that would otherwise be discarded
W29 Other changes in inventory control

Spill and Leak Prevention

W31 Improved storage or stacking procedures
W32 Improved procedures for loading, unloading, and transfer operations
W33 Installed overflow alarms or automatic shut-off valves
W35 Installed vapor recovery systems
W36 Implemented inspection or monitoring program of potential spill or leak sources
W39 Other spill and leak prevention

Raw Material Modifications

W41 Increased purity of raw materials
W42 Substituted raw materials
W49 Other raw material modifications

Process Modifications

W51 Instituted recirculation within a process
W52 Modified equipment, layout, or piping
W53 Use of a different process catalyst
W54 Instituted better controls on operating bulk containers to minimize discarding of empty containers
W55 Changed from small volume containers to bulk containers to minimize discarding of empty containers
W58 Other process modifications

Cleaning and Degreasing

W59 Modified stripping/cleaning equipment
W60 Changed to mechanical stripping/cleaning devices (from solvents or other materials)
W61 Changed to aqueous cleaners (from solvents or other materials)

W63 Modified containment procedures for cleaning units
W64 Improved draining procedures
W65 Redesigned parts racks to reduce dragout
W66 Modified or installed rinse systems
W67 Improved rinse equipment design
W68 Improved rinse equipment operation
W71 Other cleaning and degreasing modifications

Surface Preparation and Finishing

W72 Modified spray systems or equipment
W73 Substituted coating materials used
W74 Improved application techniques
W75 Changed from spray to other system
W78 Other surface preparation and finishing modifications

Product Modifications

W81 Changed product specifications
W82 Modified design or composition of product
W83 Modified packaging
W89 Other product modifications

In columns **a** through **c** of Section 8.10, the "Methods to Identify Activity", you must enter one or more of the following code(s) that correspond to those internal and external method(s) or information sources you used to identify the possibility for a source reduction activity implementation at your facility. If more than three methods were used to identify the source reduction activity, enter only the three codes that contributed most to the decision to implement the activity.

Methods to Identify Activity

T01 Internal pollution prevention opportunity audit(s)
T02 External pollution prevention opportunity audit(s)
T03 Materials balance audits
T04 Participative team management
T05 Employee recommendation (independent of a formal company program)
T06 Employee recommendation (under a formal company program)
T07 State government technical assistance program
T08 Federal government technical assistance program
T09 Trade association/industry technical assistance program
T10 Vendor assistance
T11 Other

8.11 Is Additional Information on Source Reduction, Recycling, or Pollution Control Activities Included with this Report?

Check "Yes" for this data element if you have attached to this report any additional optional information on source reduction, recycling, or pollution control activities you have implemented in the reporting year or in prior years for the reported toxic chemical. If you are not including additional information, check "No."

If you submit additional optional information, try to limit this information to one page that summarizes the source reduction, recycling, or pollution control activities. If there is a contact person at the facility, other than the technical or public contact provided in Part I, Section 4, the summary page should include that person's name and telephone number for individuals who wish to obtain further information about those activities. Also submit a copy of this additional information to the appropriate state agency as part of the Form R submittal to that agency.

TABLE I. SIC CODES 20-39

20 Food and Kindred Products

2011 Meat packing plants
2013 Sausages and other prepared meat products
2015 Poultry slaughtering and processing
2021 Creamery butter
2022 Natural, processed, and imitation cheese
2023 Dry, condensed, and evaporated dairy products
2024 Ice cream and frozen desserts
2026 Fluid milk
2032 Canned specialties
2033 Canned fruits, vegetables, preserves, jams, and jellies
2034 Dried and dehydrated fruits, vegetables, and soup mixes
2035 Pickled fruits and vegetables, vegetable sauces and seasonings, and salad dressings
2037 Frozen fruits, fruit juices, and vegetables
2038 Frozen specialties, n.e.c.*
2041 Flour and other grain mill products
2043 Cereal breakfast foods
2044 Rice milling
2045 Prepared flour mixes and doughs
2046 Wet corn milling
2047 Dog and cat food
2048 Prepared feeds and feed ingredients for animals and fowls, except dogs and cats
2051 Bread and other bakery products, except cookies and crackers
2052 Cookies and crackers
2053 Frozen bakery products, except bread
2061 Cane sugar, except refining
2062 Cane sugar refining
2063 Beet sugar
2064 Candy and other confectionery products
2066 Chocolate and cocoa products
2067 Chewing gum
2068 Salted and roasted nuts and seeds
2074 Cottonseed oil mills
2075 Soybean oil mills
2076 Vegetable oil mills, n.e.c.*
2077 Animal and marine fats and oils
2079 Shortening, table oils, margarine, and other edible fats and oils, n.e.c.*
2082 Malt beverages
2083 Malt
2084 Wines, brandy, and brandy spirits
2085 Distilled and blended liquors
2086 Bottled and canned soft drinks and carbonated waters
2087 Flavoring extracts and flavoring syrups, n.e.c.*
2091 Canned and cured fish and seafoods
2092 Prepared fresh or frozen fish and seafoods
2095 Roasted coffee
2096 Potato chips, corn chips, and similar snacks
2097 Manufactured ice
2098 Macaroni, spaghetti, vermicelli, and noodles
2099 Food preparations, n.e.c.*

21 Tobacco Products

2111 Cigarettes
2121 Cigars
2131 Chewing and smoking tobacco and snuff
2141 Tobacco stemming and redrying

22 Textile Mill Products

2211 Broadwoven fabric mills, cotton
2221 Broadwoven fabric mills, manmade fiber, and silk
2231 Broadwoven fabric mills, wool (including dyeing and finishing)
2241 Narrow fabric and other smallwares mills: cotton, wool, silk, and manmade fiber
2251 Women's full length and knee length hosiery, except socks
2252 Hosiery, n.e.c.*
2253 Knit outerwear mills
2254 Knit underwear and nightwear mills
2257 Weft knit fabric mills
2258 Lace and warp knit fabric mills
2259 Knitting mills, n.e.c.*
2261 Finishers of broadwoven fabrics of cotton
2262 Finishers of broadwoven fabrics of manmade fiber and silk
2269 Finishers of textiles, n.e.c.*
2273 Carpets and rugs
2281 Yarn spinning mills
2282 Yarn texturizing, throwing, twisting, and winding mills
2284 Thread mills
2295 Coated fabrics, not rubberized
2296 Tire cord and fabrics
2297 Nonwoven fabrics
2298 Cordage and twine
2299 Textile goods, n.e.c.*

*"Not elsewhere classified" indicated by "*n.e.c.*"

23 Apparel and Other Finished Products made from Fabrics and Other Similar Materials

2311 Men's and boys' suits, coats, and overcoats
2321 Men's and boys' shirts, except work shirts
2322 Men's and boys' underwear and nightwear
2323 Men's and boys' neckwear
2325 Men's and boys' separate trousers and slacks
2326 Men's and boys' work clothing
2329 Men's and boys' clothing, n.e.c.*
2331 Women's, misses', and juniors' blouses and shirts
2335 Women's, misses', and juniors' dresses
2337 Women's, misses', and juniors' suits, skirts, and coats
2339 Women's, misses', and juniors', outerwear, n.e.c.*
2341 Women's, misses', children's, and infants' underwear and nightwear
2342 Brassieres, girdles, and allied garments
2353 Hats, caps, and millinery
2361 Girls', children's and infants' dresses, blouses, and shirts
2369 Girls', children's and infants' outerwear, n.e.c.*
2371 Fur goods
2381 Dress and work gloves, except knit and all leather
2384 Robes and dressing gowns
2385 Waterproof outerwear
2386 Leather and sheep lined clothing
2387 Apparel belts
2389 Apparel and accessories, n.e.c.*
2391 Curtains and draperies
2392 Housefurnishings, except curtains and draperies
2393 Textile bags
2394 Canvas and related products
2395 Pleating, decorative and novelty stitching, and tucking for the trade
2396 Automotive trimmings, apparel findings, and related products
2397 Schiffli machine embroideries
2399 Fabricated textile products, n.e.c.*

24 Lumber and Wood Products, Except Furniture

2411 Logging
2421 Sawmills and planing mills, general
2426 Hardwood dimension and flooring mills
2429 Special product sawmills, n.e.c.*
2431 Millwork
2434 Wood kitchen cabinets
2435 Hardwood veneer and plywood
2436 Softwood veneer and plywood
2439 Structural wood members, n.e.c.*
2441 Nailed and lock corner wood boxes and shook
2448 Wood pallets and skids
2449 Wood containers, n.e.c.*
2451 Mobile homes
2452 Prefabricated wood buildings and components
2491 Wood preserving
2493 Reconstituted wood products
2499 Wood products, n.e.c.*

25 Furniture and Fixtures

2511 Wood household furniture, except upholstered
2512 Wood household furniture, upholstered
2514 Metal household furniture
2515 Mattresses, foundations, and convertible beds
2517 Wood television, radio, phonograph, and sewing machine cabinets
2519 Household furniture, n.e.c.*
2521 Wood office furniture
2522 Office furniture, except wood
2531 Public building and related furniture
2541 Wood office and store fixtures, partitions, shelving, and lockers
2542 Office and store fixtures, partitions, shelving, and lockers, except wood
2591 Drapery hardware and window blinds and shades
2599 Furniture and fixtures, n.e.c.*

26 Paper and Allied Products

2611 Pulp mills
2621 Paper mills
2631 Paperboard mills
2652 Setup paperboard boxes
2653 Corrugated and solid fiber boxes
2655 Fiber cans, tubes, drums, and similar products
2656 Sanitary food containers, except folding
2657 Folding paperboard boxes, including sanitary
2671 Packaging paper and plastics film, coated and laminated
2672 Coated and laminated paper, n.e.c.*
2673 Plastics, foil, and coated paper bags
2674 Uncoated paper and multiwall bags
2675 Die-cut paper and paperboard and cardboard
2676 Sanitary paper products
2677 Envelopes
2678 Stationery tablets, and related products
2679 Converted paper and paperboard products, n.e.c.*

*"Not elsewhere classified" indicated as "*n.e.c.*"

27 Printing, Publishing, and Allied Industries

2711 Newspapers: publishing, or publishing and printing
2721 Periodicals: publishing, or publishing and printing
2731 Books: publishing, or publishing and printing
2732 Book printing
2741 Miscellaneous publishing
2752 Commercial printing, lithographic
2754 Commercial printing, gravure
2759 Commercial printing, n.e.c.*
2761 Manifold business forms
2771 Greeting cards
2782 Blankbooks, looseleaf binders and devices
2789 Bookbinding and related work
2791 Typesetting
2796 Platemaking and related services

28 Chemicals and Allied Products

2812 Alkalies and chlorine
2813 Industrial gases
2816 Inorganic pigments
2819 Industrial inorganic chemicals, n.e.c.*
2821 Plastics materials, synthetic resins, and non-vulcanizable elastomers
2822 Synthetic rubber (vulcanizable elastomers)
2823 Cellulosic manmade fibers
2824 Manmade organic fibers, except cellulosic
2833 Medicinal chemicals and botanical products
2834 Pharmaceutical preparations
2835 In vitro and in vivo diagnostic substances
2836 Biological products, except diagnostic substances
2841 Soap and other detergents, except specialty cleaners
2842 Specialty cleaning, polishing, and sanitation preparations
2843 Surface active agents, finishing agents, sulfonated oils, and assistants
2844 Perfumes, cosmetics, and other toilet preparations
2851 Paints, varnishes, lacquers, enamels, and allied products
2861 Gum and wood chemicals
2865 Cyclic organic crudes and intermediates, and organic dyes and pigments
2869 Industrial organic chemicals, n.e.c.*
2873 Nitrogenous fertilizers
2874 Phosphatic fertilizers
2875 Fertilizers, mixing only
2879 Pesticides and agricultural chemicals, n.e.c.*
2891 Adhesives and sealants
2892 Explosives
2893 Printing ink
2895 Carbon black
2899 Chemicals and chemical preparations, n.e.c.*

29 Petroleum Refining and Related Industries

2911 Petroleum refining
2951 Asphalt paving mixtures and blocks
2952 Asphalt felts and coatings
2992 Lubricating oils and greases
2999 Products of petroleum and coal, n.e.c.*

30 Rubber and Miscellaneous Plastics Products

3011 Tires and inner tubes
3021 Rubber and plastics footwear
3052 Rubber and plastics hose and belting
3053 Gaskets, packing, and sealing devices
3061 Molded, extruded, and lathecut mechanical rubber products
3069 Fabricated rubber products, n.e.c.*
3081 Unsupported plastics film and sheet
3082 Unsupported plastics profile shapes
3083 Laminated plastics plate, sheet, and profile shapes
3084 Plastics pipe
3085 Plastics bottles
3086 Plastics foam products
3087 Custom compounding of purchased plastics resins
3088 Plastics plumbing fixtures
3089 Plastics products, n.e.c.*

31 Leather and Leather Products

3111 Leather tanning and finishing
3131 Boot and shoe cut stock and findings
3142 House slippers
3143 Men's footwear, except athletic
3144 Women's footwear, except athletic
3149 Footwear, except rubber, n.e.c.*
3151 Leather gloves and mittens
3161 Luggage
3171 Women's handbags and purses
3172 Personal leather goods, except women's handbags and purses
3199 Leather goods, n.e.c.*

*"Not elsewhere classified" indicated by "*n.e.c.*"

32 Stone, Clay, Glass and Concrete Products

3211 Flat glass
3221 Glass containers
3229 Pressed and blown glass and glassware, n.e.c.*
3231 Glass products, made of purchased glass
3241 Cement, hydraulic
3251 Brick and structural clay tile
3253 Ceramic wall and floor tile
3255 Clay refractories
3259 Structural clay products, n.e.c.*
3261 Vitreous china plumbing fixtures and china and earthenware fittings and bathroom accessories
3262 Vitreous china table and kitchen articles
3263 Fine earthenware (whiteware) table and kitchen articles
3264 Porcelain electrical supplies
3269 Pottery products, n.e.c.*
3271 Concrete block and brick
3272 Concrete products, except block and brick
3273 Ready mixed concrete
3274 Lime
3275 Gypsum products
3281 Cut stone and stone products
3291 Abrasive products
3292 Asbestos products
3295 Minerals and earths, ground or otherwise treated
3296 Mineral wool
3297 Nonclay refractories
3299 Nonmetallic mineral products, n.e.c.*

33 Primary Metal Industries

3312 Steel works, blast furnaces (including coke ovens), and rolling mills
3313 Electrometallurgical products, except steel
3315 Steel wiredrawing and steel nails and spikes
3316 Cold-rolled steel sheet, strip, and bars
3317 Steel pipe and tubes
3321 Gray and ductile iron foundries
3322 Malleable iron foundries
3324 Steel investment foundries
3325 Steel foundries, n.e.c.*
3331 Primary smelting and refining of copper
3334 Primary production of aluminum
3339 Primary smelting and refining of nonferrous metals, except copper and aluminum
3341 Secondary smelting and refining of nonferrous metals
3351 Rolling, drawing, and extruding of copper
3353 Aluminum sheet, plate, and foil
3354 Aluminum extruded products
3355 Aluminum rolling and drawing, n.e.c.*
3356 Rolling, drawing, and extruding of nonferrous metals, except copper and aluminum
3357 Drawing and insulating of nonferrous wire
3363 Aluminum die-castings
3364 Nonferrous die-castings, except aluminum
3365 Aluminum foundries
3366 Copper foundries
3369 Nonferrous foundries, except aluminum and copper
3398 Metal heat treating
3399 Primary metal products, n.e.c.*

34 Fabricated Metal Products, except Machinery and Transportation Equipment

3411 Metal cans
3412 Metal shipping barrels, drums, kegs, and pails
3421 Cutlery
3423 Hand and edge tools, except machine tools and handsaws
3425 Handsaws and saw blades
3429 Hardware, n.e.c.*
3431 Enameled iron and metal sanitary ware
3432 Plumbing fixture fittings and trim
3433 Heating equipment, except electric and warm air furnaces
3441 Fabricated structural metal
3442 Metal doors, sash, frames, molding, and trim
3443 Fabricated plate work (boiler shops)
3444 Sheet metal work
3446 Architectural and ornamental metal work
3448 Prefabricated metal buildings and components
3449 Miscellaneous structural metal work
3451 Screw machine products
3452 Bolts, nuts, screws, rivets, and washers
3462 Iron and steel forgings
3463 Nonferrous forgings
3465 Automotive stampings
3468 Crowns and closures
3469 Metal stampings, n.e.c.*
3471 Electroplating, plating, polishing, anodizing, and coloring
3479 Coating, engraving and allied services, n.e.c.*
3482 Small arms ammunition
3483 Ammunition, except for small arms
3484 Small arms
3489 Ordnance and accessories, n.e.c.*
3491 Industrial valves
3492 Fluid power valves and hose fittings
3493 Steel springs, except wire
3494 Valves and pipe fittings, n.e.c.*

*"Not elsewhere classified" indicated as "*n.e.c.*"

3495 Wire springs
3496 Miscellaneous fabricated wire products
3497 Metal foil and leaf
3498 Fabricated pipe and pipe fittings
3499 Fabricated metal products, n.e.c.*

35 Industrial and Commercial Machinery and Computer Equipment

3511 Steam, gas and hydraulic turbines, and turbine generator set units
3519 Internal combustion engines, n.e.c.*
3523 Farm machinery and equipment
3524 Lawn and garden tractors and home lawn and garden equipment
3531 Construction machinery and equipment
3532 Mining machinery and equipment, except oil and gas field machinery and equipment
3533 Oil and gas field machinery and equipment
3534 Elevators and moving stairways
3535 Conveyors and conveying equipment
3536 Overhead traveling cranes, hoists, and monorail systems
3537 Industrial trucks, tractors, trailers, and stackers
3541 Machine tools, metal cutting types
3542 Machine tools, metal forming types
3543 Industrial patterns
3544 Special dies and tools, die sets, jigs and fixtures, and industrial molds
3545 Cutting tools, machine tool accessories, and machinists' measuring devices
3546 Power driven handtools
3547 Rolling mill machinery and equipment
3548 Electric and gas welding and soldering equipment
3549 Metalworking machinery, n.e.c.*
3552 Textile machinery
3553 Woodworking machinery
3554 Paper industries machinery
3555 Printing trades machinery and equipment
3556 Food products machinery
3559 Special industry machinery, n.e.c.*
3561 Pumps and pumping equipment
3562 Ball and roller bearings
3563 Air and gas compressors
3564 Industrial and commercial fans and blowers and air purification equipment
3565 Packaging equipment
3566 Speed changers, industrial high speed drives, and gears
3567 Industrial process furnaces and ovens
3568 Mechanical power transmission equipment, n.e.c.*
3569 General industrial machinery and equipment, n.e.c.*
3571 Electronic computers
3572 Computer storage devices
3575 Computer terminals
3577 Computer peripheral equipment, n.e.c.*
3578 Calculating and accounting machines, except electronic computers
3579 Office machines, n.e.c.*
3581 Automatic vending machines
3582 Commercial laundry, drycleaning, and pressing machines
3585 Air conditioning and warm air heating equipment and commercial and industrial refrigeration equipment
3586 Measuring and dispensing pumps
3589 Service industry machinery, n.e.c.*
3592 Carburetors, pistons, piston rings, and valves
3593 Fluid power cylinders and actuators
3594 Fluid power pumps and motors
3596 Scales and balances, except laboratory
3599 Industrial and commercial machinery and equipment, n.e.c*

36 Electronic and Other Electrical Equipment and Components, Except Computer Equipment

3612 Power, distribution, and specialty transformers
3613 Switchgear and switchboard apparatus
3621 Motors and generators
3624 Carbon and graphite products
3625 Relays and industrial controls
3629 Electrical industrial appliances, n.e.c.*
3631 Household cooking equipment
3632 Household refrigerators and home and farm freezers
3633 Household laundry equipment
3634 Electrical housewares and fans
3635 Household vacuum cleaners
3639 Household appliances, n.e.c.*
3641 Electric lampbulbs and tubes
3643 Current carrying wiring devices
3644 Noncurrent carrying wiring devices
3645 Residential electric lighting fixtures
3646 Commercial, industrial, and institutional electric lighting fixtures
3647 Vehicular lighting equipment
3648 Lighting equipment, n.e.c.*
3651 Household audio and video equipment
3652 Phonograph records and pre-recorded audio tapes and disks

*"Not elsewhere classified" indicated by "*n.e.c.*"

3661 Telephone and telegraph apparatus
3663 Radio and television broadcasting and communications equipment
3669 Communications equipment, n.e.c.*
3671 Electron tubes
3672 Printed circuit boards
3674 Semiconductors and related devices
3675 Electronic capacitors
3676 Electronic resistors
3677 Electronic coils, transformers, and other inductors
3678 Electronic connectors
3679 Electronic components, n.e.c.*
3691 Storage batteries
3692 Primary batteries, dry and wet
3694 Electric equipment for internal combustion engines
3695 Magnetic and optical recording media
3699 Electrical machinery, equipment, and supplies, n.e.c.*

37 Transportation Equipment

3711 Motor vehicles and passenger car bodies
3713 Truck and bus bodies
3714 Motor vehicle parts and accessories
3715 Truck trailers
3716 Motor homes
3721 Aircraft
3724 Aircraft engines and engine parts
3728 Aircraft parts and auxiliary equipment, n.e.c.*
3731 Ship building and repairing
3732 Boat building and repairing
3743 Railroad equipment
3751 Motorcycles, bicycles and parts
3761 Guided missiles and space vehicles
3764 Guided missile and space vehicle propulsion units and propulsion unit parts
3769 Guided missile and space vehicle parts and auxiliary equipment, n.e.c.*
3792 Travel trailers and campers
3795 Tanks and tank components
3799 Transportation equipment, n.e.c.*

38 Measuring, Analyzing, and Controlling Instruments; Photographic, Medical and Optical Goods; Watches and Clocks

3812 Search, detection, navigation, guidance, aeronautical, and nautical systems and instruments
3821 Laboratory apparatus and furniture
3822 Automatic controls for regulating residential and commercial environments and appliances
3823 Industrial instruments for measurement, display, and control of process variables; and related products
3824 Totalizing fluid meters and counting devices
3825 Instruments for measuring and testing of electricity and electrical signals
3826 Laboratory analytical instruments
3827 Optical instruments and lenses
3829 Measuring and controlling devices, n.e.c.*
3841 Surgical and medical instruments and apparatus
3842 Orthopedic, prosthetic, and surgical appliances and supplies
3843 Dental equipment and supplies
3844 X-ray apparatus and tubes and related irradiation apparatus
3845 Electromedical and electrotherapeutic apparatus
3851 Ophthalmic goods
3861 Photographic equipment and supplies
3873 Watches, clocks, clockwork operated devices, and parts

39 Miscellaneous Manufacturing Industries

3911 Jewelry, precious metal
3914 Silverware, plated ware, and stainless steel ware
3915 Jewelers' findings and materials, and lapidary work
3931 Musical instruments
3942 Dolls and stuffed toys
3944 Games, toys and children's vehicles; except dolls and bicycles
3949 Sporting and athletic goods, n.e.c.*
3951 Pens, mechanical pencils, and parts
3952 Lead pencils, crayons, and artists' materials
3953 Marking devices
3955 Carbon paper and inked ribbons
3961 Costume jewelry and costume novelties, except precious metal
3965 Fasteners, buttons, needles, and pins
3991 Brooms and brushes
3993 Signs and advertising specialties
3995 Burial caskets
3996 Linoleum, asphalted-felt-base, and other hard surface floor coverings, n.e.c.*
3999 Manufacturing industries, n.e.c.*

*"Not elsewhere classified" indicated as "*n.e.c.*"

TABLE II. SECTION 313 TOXIC CHEMICAL LIST FOR REPORTING YEAR 1993 (including Toxic Chemical Categories)

Specific toxic chemicals with CAS Number are listed in alphabetical order on this page. A list of the same chemicals in CAS Number order begins at the end of the alphabetical list of toxic chemicals. Covered toxic chemical categories follow.

Certain toxic chemicals listed in Table II have parenthetic "qualifiers." These qualifiers indicate that these toxic chemicals are subject to the section 313 reporting requirements if manufactured, processed, or otherwise used in a specific form. The following chemicals are reportable only if they are manufactured, processed, or otherwise used in the specific form(s) listed below:

Chemical	CAS Number	Qualifier
Aluminum (fume or dust)	7429-90-5	Only if it is in a fume or dust form.
Aluminum oxide (fibrous forms)	1344-28-1	Only if it is a fibrous form.
Ammonium nitrate (solution)	6484-52-2	Only if it is in a solution.
Ammonium sulfate (solution)	7783-20-2	Only if it is in a solution.
Asbestos (friable)	1332-21-4	Only if it is a friable form.
Isopropyl alcohol (manufacturing - strong acid process, no supplier notification)	67-63-0	Only if it is being manufactured by the strong acid process.
Phosphorus (yellow or white)	7723-14-0	Only if it is a yellow or white form.
Saccharin (manufacturing, no supplier notification).	81-07-2	Only if it is being manufactured.
Vanadium (fume or dust)	7440-62-2	Only if it is in a fume or dust form.
Zinc (fume or dust)	7440-66-6	Only if it is in a fume or dust form.

[Note: Chemicals may be added to or deleted from the list. The Emergency Planning and Community Right-to-Know Information Hotline, (800) 535-0202 or (703) 412-9877, will provide up-to-date information on the status of these changes. See Section B.4.b of the instructions for more information on the de minimis values listed below.]

*C.I. means "Color Index"

a. Alphabetical Chemical List

CAS Number	Toxic Chemical Name	De Minimis Concentration
75-07-0	Acetaldehyde	0.1
60-35-5	Acetamide	0.1
67-64-1	Acetone	1.0
75-05-8	Acetonitrile	1.0
53-96-3	2-Acetylaminofluorene	0.1
107-02-8	Acrolein	1.0
79-06-1	Acrylamide	0.1
79-10-7	Acrylic acid	1.0
107-13-1	Acrylonitrile	0.1
309-00-2	Aldrin {1,4:5,8-Dimethanonaphthalene, 1,2,3,4,10,10-hexachloro-1,4,4a, 5,8,8a-hexahydro-(1.alpha., 4.alpha.,4a.beta.,5.alpha., 8.alpha.,8a.beta.)-}	1.0
107-18-6	Allyl alcohol	1.0
107-05-1	Allyl chloride	1.0
7429-90-5	Aluminum (fume or dust)	1.0
1344-28-1	Aluminum oxide (fibrous forms)	0.1
117-79-3	2-Aminoanthraquinone	0.1
60-09-3	4-Aminoazobenzene	0.1
92-67-1	4-Aminobiphenyl	0.1
82-28-0	1-Amino-2-methylanthraquinone	0.1
7664-41-7	Ammonia	1.0
6484-52-2	Ammonium nitrate (solution)	1.0
7783-20-2	Ammonium sulfate (solution)	1.0
62-53-3	Aniline	1.0
90-04-0	o-Anisidine	0.1
104-94-9	p-Anisidine	1.0
134-29-2	o-Anisidine hydrochloride	0.1
120-12-7	Anthracene	1.0
7440-36-0	Antimony	1.0
7440-38-2	Arsenic	0.1
1332-21-4	Asbestos (friable)	0.1
7440-39-3	Barium	1.0
98-87-3	Benzal chloride	1.0
55-21-0	Benzamide	1.0
71-43-2	Benzene	0.1
92-87-5	Benzidine	0.1
98-07-7	Benzoic trichloride {Benzotrichloride}	0.1
98-88-4	Benzoyl chloride	1.0
94-36-0	Benzoyl peroxide	1.0
100-44-7	Benzyl chloride	1.0
7440-41-7	Beryllium	0.1

CAS Number	Toxic Chemical Name	De Minimis Concentration
92-52-4	Biphenyl	1.0
111-44-4	Bis(2-chloroethyl) ether	1.0
542-88-1	Bis(chloromethyl) ether	
0.1108-60-1	Bis(2-chloro-1-methylethyl) ether	1.0
103-23-1	Bis(2-ethylhexyl) adipate	1.0
353-59-3	Bromochlorodifluoromethane {Halon 1211}	1.0
75-25-2	Bromoform {Tribromomethane}	1.0
74-83-9	Bromomethane {Methyl bromide}	1.0
75-63-8	Bromotrifluoromethane {Halon 1301}	1.0
106-99-0	1,3-Butadiene	0.1
141-32-2	Butyl acrylate	1.0
71-36-3	n-Butyl alcohol	1.0
78-92-2	sec-Butyl alcohol	1.0
75-65-0	tert-Butyl alcohol	1.0
85-68-7	Butyl benzyl phthalate	1.0
106-88-7	1,2-Butylene oxide	1.0
123-72-8	Butyraldehyde	1.0
4680-78-8	C.I. Acid Green 3*	1.0
569-64-2	C.I. Basic Green 4*	1.0
989-38-8	C.I. Basic Red 1*	1.0
1937-37-7	C.I. Direct Black 38*	0.1
2602-46-2	C.I. Direct Blue 6*	0.1
16071-86-6	C.I. Direct Brown 95*	0.1
2832-40-8	C.I. Disperse Yellow 3*	1.0
3761-53-3	C.I. Food Red 5*	0.1
81-88-9	C.I. Food Red 15*	0.1
3118-97-6	C.I. Solvent Orange 7*	1.0
97-56-3	C.I. Solvent Yellow 3*	0.1
842-07-9	C.I. Solvent Yellow 14*	0.1
492-80-8	C.I. Solvent Yellow 34* {Aurimine}	0.1
128-66-5	C.I. Vat Yellow 4*	1.0
7440-43-9	Cadmium	0.1
156-62-7	Calcium cyanamide	1.0
133-06-2	Captan {1H-Isoindole-1,3(2H)-dione, 3a,4,7,7a-tetrahydro-2-[(trichloromethyl)thio]-}	1.0
63-25-2	Carbaryl {1-Naphthalenol, methylcarbamate}	1.0
75-15-0	Carbon disulfide	1.0
56-23-5	Carbon tetrachloride	0.1
463-58-1	Carbonyl sulfide	1.0

*C.I. means "Color Index"

CAS Number	Toxic Chemical Name	De Minimis Concentration
120-80-9	Catechol	1.0
133-90-4	Chloramben {Benzoic acid, 3-amino-2,5-dichloro-}	1.0
57-74-9	Chlordane {4,7-Methanoindan, 1,2,4,5,6,7,8,8-octachloro-2,3,3a,4,7,7a-hexahydro-}	1.0
7782-50-5	Chlorine	1.0
10049-04-4	Chlorine dioxide	1.0
79-11-8	Chloroacetic acid	1.0
532-27-4	2-Chloroacetophenone	1.0
108-90-7	Chlorobenzene	1.0
510-15-6	Chlorobenzilate {Benzeneacetic acid,4-chloro-.alpha.-(4-chlorophenyl)-.alpha.-hydroxy-,ethyl ester}	1.0
75-00-3	Chloroethane {Ethyl chloride}	1.0
67-66-3	Chloroform	0.1
74-87-3	Chloromethane {Methyl chloride}	1.0
107-30-2	Chloromethyl methyl ether	0.1
126-99-8	Chloroprene	1.0
1897-45-6	Chlorothalonil {1,3-Benzenedicarbonitrile, 2,4,5,6-tetrachloro-}	1.0
7440-47-3	Chromium	0.1
7440-48-4	Cobalt	1.0
7440-50-8	Copper	1.0
8001-58-9	Creosote	0.1
120-71-8	p-Cresidine	0.1
1319-77-3	Cresol (mixed isomers)	1.0
108-39-4	m-Cresol	1.0
95-48-7	o-Cresol	1.0
106-44-5	p-Cresol	1.0
98-82-8	Cumene	1.0
80-15-9	Cumene hydroperoxide	1.0
135-20-6	Cupferron {Benzeneamine, N-hydroxy-N-nitroso, ammonium salt}	0.1
110-82-7	Cyclohexane	1.0
94-75-7	2,4-D {Acetic acid, (2,4-dichlorophenoxy)-}	1.0
1163-19-5	Decabromodiphenyl oxide	1.0
2303-16-4	Diallate {Carbamothioic acid, bis(1-methylethyl)-, S-(2,3-dichloro-2-propenyl) ester}	1.0
615-05-4	2,4-Diaminoanisole	0.1
39156-41-7	2,4-Diaminoanisole sulfate	0.1
101-80-4	4,4'-Diaminodiphenyl ether	0.1
25376-45-8	Diaminotoluene (mixed isomers)	0.1
95-80-7	2,4-Diaminotoluene	0.1
334-88-3	Diazomethane	1.0
132-64-9	Dibenzofuran	1.0
96-12-8	1,2-Dibromo-3-chloropropane {DBCP}	0.1
106-93-4	1,2-Dibromoethane {Ethylene dibromide}	0.1
124-73-2	Dibromotetrafluoroethane {Halon 2402}	1.0
84-74-2	Dibutyl phthalate	1.0
25321-22-6	Dichlorobenzene (mixed isomers)	0.1
95-50-1	1,2-Dichlorobenzene	1.0
541-73-1	1,3-Dichlorobenzene	1.0
106-46-7	1,4-Dichlorobenzene	0.1
91-94-1	3,3'-Dichlorobenzidine	0.1
75-27-4	Dichlorobromomethane	1.0
75-71-8	Dichlorodifluoromethane (CFC-12)	1.0
107-06-2	1,2-Dichloroethane {Ethylene dichloride}	0.1
540-59-0	1,2-Dichloroethylene	1.0
75-09-2	Dichloromethane {Methylene chloride}	0.1
120-83-2	2,4-Dichlorophenol	1.0
78-87-5	1,2-Dichloropropane	1.0
78-88-6	2,3-Dichloropropene	1.0
542-75-6	1,3-Dichloropropylene	0.1
76-14-2	Dichlorotetrafluoroethane (CFC-114)	1.0
62-73-7	Dichlorvos {Phosphoric acid, 2,2-dichloroethenyl dimethyl ester}	1.0
115-32-2	Dicofol {Benzenemethanol, 4-chloro-.alpha.-(4-chlorophenyl)-.alpha.- (trichloromethyl)-}	1.0
1464-53-5	Diepoxybutane	0.1
111-42-2	Diethanolamine	1.0
117-81-7	Di-(2-ethylhexyl) phthalate {DEHP}	0.1
84-66-2	Diethyl phthalate	1.0
64-67-5	Diethyl sulfate	0.1
119-90-4	3,3'-Dimethoxybenzidine	0.1
60-11-7	4-Dimethylaminoazobenzene	0.1

*C.I. means "Color Index"

CAS Number	Toxic Chemical Name	De Minimis Concentration
119-93-7	3,3'-Dimethylbenzidine {o-Tolidine}	0.1
79-44-7	Dimethylcarbamyl chloride	0.1
57-14-7	1,1-Dimethyl hydrazine	0.1
105-67-9	2,4-Dimethylphenol	1.0
131-11-3	Dimethyl phthalate	1.0
77-78-1	Dimethyl sulfate	0.1
99-65-0	m-Dinitrobenzene	1.0
528-29-0	o-Dinitrobenzene	1.0
100-25-4	p-Dinitrobenzene	1.0
534-52-1	4,6-Dinitro-o-cresol	1.0
51-28-5	2,4-Dinitrophenol	1.0
121-14-2	2,4-Dinitrotoluene	1.0
606-20-2	2,6-Dinitrotoluene	1.0
25321-14-6	Dinitrotoluene (mixed isomers)	1.0
123-91-1	1,4-Dioxane	0.1
122-66-7	1,2-Diphenylhydrazine {Hydrazobenzene}	0.1
106-89-8	Epichlorohydrin	0.1
110-80-5	2-Ethoxyethanol	1.0
140-88-5	Ethyl acrylate	0.1
100-41-4	Ethylbenzene	1.0
541-41-3	Ethyl chloroformate	1.0
74-85-1	Ethylene	1.0
107-21-1	Ethylene glycol	1.0
151-56-4	Ethyleneimine {Aziridine}	0.1
75-21-8	Ethylene oxide	0.1
96-45-7	Ethylene thiourea	0.1
2164-17-2	Fluometuron {Urea, N,N-dimethyl-N'-[3-(trifluoromethyl)phenyl]-}	1.0
50-00-0	Formaldehyde	0.1
76-13-1	Freon 113 {Ethane, 1,1,2-trichloro-1,2,2-trifluoro-}	1.0
76-44-8	Heptachlor {1,4,5,6,7,8,8-Heptachloro-3a,4,7,7a-tetrahydro-4,7-methano-1H-indene}	1.0
118-74-1	Hexachlorobenzene	0.1
87-68-3	Hexachloro-1,3-butadiene	1.0
77-47-4	Hexachlorocyclopentadiene	1.0
67-72-1	Hexachloroethane	1.0
1335-87-1	Hexachloronaphthalene	1.0
680-31-9	Hexamethylphosphoramide	0.1
302-01-2	Hydrazine	0.1
10034-93-2	Hydrazine sulfate	0.1
7647-01-0	Hydrochloric acid	1.0
74-90-8	Hydrogen cyanide	1.0
7664-39-3	Hydrogen fluoride	1.0
123-31-9	Hydroquinone	1.0
78-84-2	Isobutyraldehyde	1.0
67-63-0	Isopropyl alcohol (manufacturing-strong acid process, no supplier notification)	0.1
80-05-7	4,4'-Isopropylidenediphenol	1.0
120-58-1	Isosafrole	1.0
7439-92-1	Lead	0.1
58-89-9	Lindane {Cyclohexane,1,2,3,4,5,6-hexachloro-,(1.alpha.,2.alpha.,3.beta.,4.alpha.,5.alpha.,6.beta.)-}	0.1
108-31-6	Maleic anhydride	1.0
12427-38-2	Maneb {Carbamodithioic acid, 1,2-ethanediylbis-,manganese complex}	1.0
7439-96-5	Manganese	1.0
7439-97-6	Mercury	1.0
67-56-1	Methanol	1.0
72-43-5	Methoxychlor {Benzene, 1,1'-(2,2,2-trichloroethylidene)bis [4-methoxy-]}	1.0
109-86-4	2-Methoxyethanol	1.0
96-33-3	Methyl acrylate	1.0
1634-04-4	Methyl tert-butyl ether	1.0
101-14-4	4,4'-Methylenebis (2-chloroaniline) {MBOCA}	0.1
101-61-1	4,4'-Methylenebis (N,N-dimethyl) benzenamine	0.1
101-68-8	Methylenebis (phenylisocyanate) {MBI}	1.0
74-95-3	Methylene bromide	1.0
101-77-9	4,4'-Methylenedianiline	0.1
78-93-3	Methyl ethyl ketone	1.0
60-34-4	Methyl hydrazine	1.0
74-88-4	Methyl iodide	0.1
108-10-1	Methyl isobutyl ketone	1.0
624-83-9	Methyl isocyanate	1.0
80-62-6	Methyl methacrylate	1.0
90-94-8	Michler's ketone	0.1
1313-27-5	Molybdenum trioxide	1.0
76-15-3	(Mono)chloropentafluoroethane {CFC-115}	1.0

*C.I. means "Color Index"

CAS Number	Toxic Chemical Name	De Minimis Concentration
505-60-2	Mustard gas {Ethane, 1,1'-thiobis[2-chloro-]}	0.1
91-20-3	Naphthalene	1.0
134-32-7	alpha-Naphthylamine	0.1
91-59-8	beta-Naphthylamine	0.1
7440-02-0	Nickel	0.1
7697-37-2	Nitric acid	1.0
139-13-9	Nitrilotriacetic acid	0.1
99-59-2	5-Nitro-o-anisidine	0.1
98-95-3	Nitrobenzene	1.0
92-93-3	4-Nitrobiphenyl	0.1
1836-75-5	Nitrofen {Benzene, 2,4-dichloro-1-(4-nitrophenoxy)-}	0.1
51-75-2	Nitrogen mustard {2-Chloro-N-(2-chloroethyl)-N-methylethanamine}	0.1
55-63-0	Nitroglycerin	1.0
88-75-5	2-Nitrophenol	1.0
100-02-7	4-Nitrophenol	1.0
79-46-9	2-Nitropropane	0.1
156-10-5	p-Nitrosodiphenylamine	1.0
121-69-7	N,N-Dimethylaniline	1.0
924-16-3	N-Nitrosodi-n-butylamine	0.1
55-18-5	N-Nitrosodiethylamine	0.1
62-75-9	N-Nitrosodimethylamine	0.1
86-30-6	N-Nitrosodiphenylamine	1.0
621-64-7	N-Nitrosodi-n-propylamine	0.1
4549-40-0	N-Nitrosomethylvinylamine	0.1
59-89-2	N-Nitrosomorpholine	0.1
759-73-9	N-Nitroso-N-ethylurea	0.1
684-93-5	N-Nitroso-N-methylurea	0.1
16543-55-8	N-Nitrosonornicotine	0.1
100-75-4	N-Nitrosopiperidine	0.1
2234-13-1	Octachloronaphthalene	1.0
20816-12-0	Osmium tetroxide	1.0
56-38-2	Parathion {Phosphorothioic acid, O, O-diethyl-O-(4-nitrophenyl) ester}	1.0
87-86-5	Pentachlorophenol {PCP}	1.0
79-21-0	Peracetic acid	1.0
108-95-2	Phenol	1.0
106-50-3	p-Phenylenediamine	1.0
90-43-7	2-Phenylphenol	1.0
75-44-5	Phosgene	1.0
7664-38-2	Phosphoric acid	1.0
7723-14-0	Phosphorus (yellow or white)	1.0
85-44-9	Phthalic anhydride	1.0
88-89-1	Picric acid	1.0
1336-36-3	Polychlorinated biphenyls {PCBs}	0.1
1120-71-4	Propane sultone	0.1
57-57-8	beta-Propiolactone	0.1
123-38-6	Propionaldehyde	1.0
114-26-1	Propoxur {Phenol, 2-(1-methylethoxy)-, methylcarbamate}	1.0
115-07-1	Propylene {Propene}	1.0
75-55-8	Propyleneimine	0.1
75-56-9	Propylene oxide	0.1
110-86-1	Pyridine	1.0
91-22-5	Quinoline	1.0
106-51-4	Quinone	1.0
82-68-8	Quintozene {Pentachloronitrobenzene}	1.0
81-07-2	Saccharin (manufacturing, no supplier notification) {1,2-Benzisothiazol-3(2H)-one, 1,1-dioxide}	0.1
94-59-7	Safrole	0.1
7782-49-2	Selenium	1.0
7440-22-4	Silver	1.0
100-42-5	Styrene	0.1
96-09-3	Styrene oxide	0.1
7664-93-9	Sulfuric acid	1.0
79-34-5	1,1,2,2-Tetrachloroethane	0.1
127-18-4	Tetrachloroethylene {Perchloroethylene}	0.1
961-11-5	Tetrachlorvinphos {Phosphoric acid, 2-chloro-1-(2,4,5-trichlorophenyl) ethenyl dimethyl ester}	1.0
7440-28-0	Thallium	1.0
62-55-5	Thioacetamide	0.1
139-65-1	4,4'-Thiodianiline	0.1
62-56-6	Thiourea	0.1
1314-20-1	Thorium dioxide	1.0
7550-45-0	Titanium tetrachloride	1.0
108-88-3	Toluene	1.0
584-84-9	Toluene-2,4-diisocyanate	0.1
91-08-7	Toluene-2,6-diisocyanate	0.1
26471-62-5	Toluenediisocyanate (mixed isomers)	0.1
95-53-4	o-Toluidine	0.1
636-21-5	o-Toluidine hydrochloride	0.1
8001-35-2	Toxaphene	0.1

*C.I. means "Color Index"

CAS Number	Toxic Chemical Name	De Minimis Concentration
68-76-8	Triaziquone {2,5-Cyclohexadiene-1,4-dione, 2,3,5-tris(1-aziridinyl)-}	0.1
52-68-6	Trichlorfon {Phosphonic acid,(2,2,2-trichloro-1-hydroxyethyl)-,dimethyl ester}	1.0
120-82-1	1,2,4-Trichlorobenzene	1.0
71-55-6	1,1,1-Trichloroethane {Methyl chloroform}	1.0
79-00-5	1,1,2-Trichloroethane	1.0
79-01-6	Trichloroethylene	1.0
75-69-4	Trichlorofluoromethane {CFC-11}	1.0
95-95-4	2,4,5-Trichlorophenol	1.0
88-06-2	2,4,6-Trichlorophenol	0.1
1582-09-8	Trifluralin {Benzenamine, 2,6-dinitro-N,N-dipropyl-4-(trifluoromethyl)-1}	1.0
95-63-6	1,2,4-Trimethylbenzene	1.0
126-72-7	Tris (2,3-dibromopropyl) phosphate	0.1
51-79-6	Urethane {Ethyl carbamate}	0.1
7440-62-2	Vanadium (fume or dust)	1.0
108-05-4	Vinyl acetate	1.0
593-60-2	Vinyl bromide	0.1
75-01-4	Vinyl chloride	0.1
75-35-4	Vinylidene chloride	1.0
1330-20-7	Xylene (mixed isomers)	1.0
108-38-3	m-Xylene	1.0
95-47-6	o-Xylene	1.0
106-42-3	p-Xylene	1.0
87-62-7	2,6-Xylidine	1.0
7440-66-6	Zinc (fume or dust)	1.0
12122-67-7	Zineb {Carbamodithioic acid, 1,2-ethanediylbis-, zinc complex}	1.0

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b. List By CAS Number

CAS Number	Toxic Chemical Name	De Minimis Concentration
50-00-0	Formaldehyde	0.1
51-28-5	2,4-Dinitrophenol	1.0
51-75-2	Nitrogen mustard {2-Chloro-N-(2-chloroethyl)-N-methylethanamine}	0.1
51-79-6	Urethane {Ethyl carbamate}	0.1
52-68-6	Trichlorfon {Phosphonic acid,(2,2,2-trichloro-1-hydroxyethyl)-, dimethyl ester}	1.0
53-96-3	2-Acetylaminofluorene	0.1
55-18-5	N-Nitrosodiethylamine	0.1
55-21-0	Benzamide	1.0
55-63-0	Nitroglycerin	1.0
56-23-5	Carbon tetrachloride	0.1
56-38-2	Parathion {Phosphorothioic acid, O,O-diethyl-O-(4-nitrophenyl)ester}	1.0
57-14-7	1,1-Dimethyl hydrazine	0.1
57-57-8	beta-Propiolactone	0.1
57-74-9	Chlordane {4,7-Methanoindan,1,2,4,5,6,7,8,8-octachloro-2,3,3a,4,7,7a-hexahydro-}	1.0
58-89-9	Lindane {Cyclohexane,1,2,3,4,5,6-hexachloro-,(1.alpha.,2.alpha.,3.beta., 4.alpha.,5.alpha.,6.beta.)-}	0.1
59-89-2	N-Nitrosomorpholine	0.1
60-09-3	4-Aminoazobenzene	0.1
60-11-7	4-Dimethylaminoazobenzene	0.1
60-34-4	Methyl hydrazine	1.0
60-35-5	Acetamide	0.1
62-53-3	Aniline	1.0
62-55-5	Thioacetamide	0.1
62-56-6	Thiourea	0.1
62-73-7	Dichlorvos {Phosphoric acid, 2,2-dichloroethenyl dimethyl ester}	1.0
62-75-9	N-Nitrosodimethylamine	0.1
63-25-2	Carbaryl {1-Naphthalenol, methylcarbamate}	1.0
64-67-5	Diethyl sulfate	0.1
67-56-1	Methanol	1.0
67-63-0	Isopropyl alcohol (manufacturing-strong acid process, no supplier notification)	0.1
67-64-1	Acetone	1.0
67-66-3	Chloroform	0.1
67-72-1	Hexachloroethane	1.0
68-76-8	Triaziquone {2,5-Cyclohexadiene-1,4-dione, 2,3,5-tris(1-aziridinyl)-}	0.1
71-36-3	n-Butyl alcohol	1.0
71-43-2	Benzene	0.1
71-55-6	1,1,1-Trichloroethane {Methyl chloroform}	1.0
72-43-5	Methoxychlor {Benzene, 1,1'-(2,2,2-trichloroethylidene)bis [4-methoxy-]}	1.0
74-83-9	Bromomethane {Methyl bromide}	1.0
74-85-1	Ethylene	1.0
74-87-3	Chloromethane {Methyl chloride}	1.0
74-88-4	Methyl iodide	0.1
74-90-8	Hydrogen cyanide	1.0
74-95-3	Methylene bromide	1.0
75-00-3	Chloroethane {Ethyl chloride}	1.0
75-01-4	Vinyl chloride	0.1
75-05-8	Acetonitrile	1.0
75-07-0	Acetaldehyde	0.1
75-09-2	Dichloromethane {Methylene chloride}	0.1
75-15-0	Carbon disulfide	1.0
75-21-8	Ethylene oxide	0.1
75-25-2	Bromoform {Tribromomethane}	1.0
75-27-4	Dichlorobromomethane	1.0
75-35-4	Vinylidene chloride	1.0
75-44-5	Phosgene	1.0
75-55-8	Propyleneimine	0.1
75-56-9	Propylene oxide	0.1
75-63-8	Bromotrifluoromethane {Halon 1301}	1.0
75-65-0	tert-Butyl alcohol	1.0
75-69-4	Trichlorofluoromethane {CFC-11}	1.0
75-71-8	Dichlorodifluoromethane {CFC-12}	1.0
76-13-1	Freon 113 {Ethane, 1,1,2-trichloro-1,2,2-trifluoro-}	1.0
76-14-2	Dichlorotetrafluoroethane {CFC-114}	1.0

*C.I. means "Color Index"

CAS Number	Toxic Chemical Name	De Minimis Concentration
76-15-3	Monochloropentafluoroethane {CFC-115}	1.0
76-44-8	Heptachlor {1,4,5,6,7,8,8-Heptachloro-3a,4,7,7a-tetrahydro-4,7-methano-1H-indene}	1.0
77-47-4	Hexachlorocyclopentadiene	1.0
77-78-1	Dimethyl sulfate	0.1
78-84-2	Isobutyraldehyde	1.0
78-87-5	1,2-Dichloropropane	1.0
78-88-6	2,3-Dichloropropene	1.0
78-92-2	sec-Butyl alcohol	1.0
78-93-3	Methyl ethyl ketone	1.0
79-00-5	1,1,2-Trichloroethane	1.0
79-01-6	Trichloroethylene	1.0
79-06-1	Acrylamide	0.1
79-10-7	Acrylic acid	1.0
79-11-8	Chloroacetic acid	1.0
79-21-0	Peracetic acid	1.0
79-34-5	1,1,2,2-Tetrachloroethane	0.1
79-44-7	Dimethylcarbamyl chloride	0.1
79-46-9	2-Nitropropane	0.1
80-05-7	4,4'-Isopropylidenediphenol	1.0
80-15-9	Cumene hydroperoxide	1.0
80-62-6	Methyl methacrylate	1.0
81-07-2	Saccharin (manufacturing, no supplier notification) {1,2-Benzisothiazol-3(2H)-one, 1,1-dioxide}	0.1
81-88-9	C.I. Food Red 15*	0.1
82-28-0	1-Amino-2-methyl-anthraquinone	0.1
82-68-8	Quintozene {Pentachloronitrobenzene}	1.0
84-66-2	Diethyl phthalate	1.0
84-74-2	Dibutyl phthalate	1.0
85-44-9	Phthalic anhydride	1.0
85-68-7	Butyl benzyl phthalate	1.0
86-30-6	N-Nitrosodiphenylamine	1.0
87-62-7	2,6-Xylidine	1.0
87-68-3	Hexachloro-1,3-butadiene	1.0
87-86-5	Pentachlorophenol {PCP}	1.0
88-06-2	2,4,6-Trichlorophenol	0.1
88-75-5	2-Nitrophenol	1.0
88-89-1	Picric acid	1.0
90-04-0	o-Anisidine	0.1
90-43-7	2-Phenylphenol	1.0
90-94-8	Michler's Ketone	0.1
91-08-7	Toluene-2,6-Diisocyanate	0.1
91-20-3	Naphthalene	1.0
91-22-5	Quinoline	1.0
91-59-8	beta-Napthylamine	0.1
91-94-1	3,3'-Dichlorobenzidine	0.1
92-52-4	Biphenyl	1.0
92-67-1	4-Aminobiphenyl	0.1
92-87-5	Benzidine	0.1
92-93-3	4-Nitrobiphenyl	0.1
94-36-0	Benzoyl Peroxide	1.0
94-59-7	Safrole	0.1
94-75-7	2,4-D {Acetic acid, (2,4 dichlorophenoxy)-}	1.0
95-47-6	o-Xylene	1.0
95-48-7	o-Cresol	1.0
95-50-1	1,2 Dichlorobenzene	1.0
95-53-4	o-Toluidine	0.1
95-63-6	1,2,4 Trimethylbenzene	1.0
95-80-7	2,4-Diaminotoluene	0.1
95-95-4	2,4,5-Trichlorophenol	1.0
96-09-3	Styrene oxide	0.1
96-12-8	1,2-Dibromo-3-chloropropane {DBCP}	0.1
96-33-3	Methyl acrylate	1.0
96-45-7	Ethylene thiourea	0.1
97-56-3	C.I. Solvent Yellow 3*	0.1
98-07-7	Benzoic trichloride {Benzotrichloride}	0.1
98-82-8	Cumene	1.0
98-87-3	Benzal chloride	1.0
98-88-4	Benzoyl chloride	1.0
98-95-3	Nitrobenzene	1.0
99-59-2	5-Nitro-o-anisidine	0.1
99-65-0	m-Dinitrobenzene	1.0
100-02-7	4-Nitrophenol	1.0
100-25-4	p-Dinitrobenzene	1.0
100-41-4	Ethylbenzene	1.0
100-42-5	Styrene	0.1
100-44-7	Benzyl chloride	1.0
100-75-4	N-Nitrosopiperidine	0.1
101-14-4	4,4'-Methylenebis (2-chloroaniline) {MBOCA}	0.1
101-61-1	4,4'-Methylenebis(N,N-dimethyl) benzenamine	0.1
101-68-8	Methylenebis (phenylisocyanate) {MBI}	1.0
101-77-9	4,4'-Methylenedianiline	0.1

*C.I. means "Color Index"

CAS Number	Toxic Chemical Name	De Minimis Concentration
101-80-4	4,4'-Diaminodiphenyl ether	0.1
103-23-1	Bis(2-ethylhexyl) adipate	1.0
104-94-9	p-Anisidine	1.0
105-67-9	2,4-Dimethylphenol	1.0
106-42-3	p-Xylene	1.0
106-44-5	p-Cresol	1.0
106-46-7	1,4-Dichlorobenzene	0.1
106-50-3	p-Phenylenediamine	1.0
106-51-4	Quinone	1.0
106-88-7	1,2-Butylene oxide	1.0
106-89-8	Epichlorohydrin	0.1
106-93-4	1,2-Dibromoethane {Ethylene dibromide}	0.1
106-99-0	1,3-Butadiene	0.1
107-02-8	Acrolein	1.0
107-05-1	Allyl chloride	1.0
107-06-2	1,2-Dichloroethane {Ethylene dichloride}	0.1
107-13-1	Acrylonitrile	0.1
107-18-6	Allyl alcohol	1.0
107-21-1	Ethylene glycol	1.0
107-30-2	Chloromethyl methyl ether	0.1
108-05-4	Vinyl acetate	1.0
108-10-1	Methyl isobutyl ketone	1.0
108-31-6	Maleic anhydride	1.0
108-38-3	m-Xylene	1.0
108-39-4	m-Cresol	1.0
108-60-1	Bis(2-chloro-1-methylethyl) ether	1.0
108-88-3	Toluene	1.0
108-90-7	Chlorobenzene	1.0
108-95-2	Phenol	1.0
109-86-4	2-Methoxyethanol	1.0
110-80-5	2-Ethoxyethanol	1.0
110-82-7	Cyclohexane	1.0
110-86-1	Pyridine	1.0
111-42-2	Diethanolamine	1.0
111-44-4	Bis(2-chloroethyl) ether	1.0
114-26-1	Propoxur {Phenol, 2-(1-methylethoxy)-, methylcarbamate}	1.0
115-07-1	Propylene (Propene)	1.0
115-32-2	Dicofol {Benzenemethanol, 4-chloro-.alpha.-(4-chlorophenyl)-.alpha.-(trichloromethyl)-}	1.0
117-79-3	2-Aminoanthraquinone	0.1
117-81-7	Di(2-ethylhexyl) phthalate {DEHP}	0.1
118-74-1	Hexachlorobenzene	0.1
119-90-4	3,3'-Dimethoxybenzidine	0.1
119-93-7	3,3'-Dimethylbenzidine {o-Tolidine}	0.1
120-12-7	Anthracene	1.0
120-58-1	Isosafrole	1.0
120-71-8	p-Cresidine	0.1
120-80-9	Catechol	1.0
120-82-1	1,2,4-Trichlorobenzene	1.0
120-83-2	2,4-Dichlorophenol	1.0
121-14-2	2,4-Dinitrotoluene	1.0
121-69-7	N,N-Dimethylaniline	1.0
122-66-7	1,2-Diphenylhydrazine {Hydrazobenzene}	0.1
123-31-9	Hydroquinone	1.0
123-38-6	Propionaldehyde	1.0
123-72-8	Butyraldehyde	1.0
123-91-1	1,4-Dioxane	0.1
124-73-2	Dibromotetrafluoroethane {Halon 2402}	1.0
126-72-7	Tris(2,3-dibromopropyl) phosphate	0.1
126-99-8	Chloroprene	1.0
127-18-4	Tetrachloroethylene {Perchloroethylene}	0.1
128-66-5	C.I. Vat Yellow 4*	1.0
131-11-3	Dimethyl phthalate	1.0
132-64-9	Dibenzofuran	1.0
133-06-2	Captan {1H-Isoindole-1,3(2H)-dione, 3a,4,7,7a-tetrahydro-2-[(trichloromethyl)thio]-}	1.0
133-90-4	Chloramben {Benzoic acid, 3-amino-2,5-dichloro-}	1.0
134-29-2	o-Anisidine hydrochloride	0.1
134-32-7	alpha-Naphthylamine	0.1
135-20-6	Cupferron {Benzeneamine, N-hydroxy-N-nitroso,ammonium salt}	0.1
139-13-9	Nitrilotriacetic acid	0.1
139-65-1	4,4'-Thiodianiline	0.1
140-88-5	Ethyl acrylate	0.1
141-32-2	Butyl acrylate	1.0
151-56-4	Ethyleneimine (Aziridine)	0.1
156-10-5	p-Nitrosodiphenylamine	1.0
156-62-7	Calcium cyanamide	1.0
302-01-2	Hydrazine	0.1

*C.I. means "Color Index"

CAS Number	Toxic Chemical Name	De Minimis Concentration
309-00-2	Aldrin {1,4:5,8-Dimethanonaphthalene, 1,2,3,4,10,10-hexachloro-1,4,4a, 5,8,8a-hexahydro-(1.alpha., 4.alpha.,4a.beta.,5.alpha., 8.alpha.,8a.beta.)-}	1.0
334-88-3	Diazomethane	1.0
353-59-3	Bromochlorodifluoromethane {Halon 1211}	1.0
463-58-1	Carbonyl sulfide	1.0
492-80-8	C.I. Solvent Yellow 34* {Aurimine}	0.1
505-60-2	Mustard gas {Ethane,1,1'-thiobis[2-chloro-}	0.1
510-15-6	Chlorobenzilate {Benzeneacetic acid,4-chloro- .alpha.-(4-chlorophenyl)- .alpha.-hydroxy-,ethyl ester}	1.0
528-29-0	o-Dinitrobenzene	1.0
532-27-4	2-Chloroacetophenone	1.0
534-52-1	4,6-Dinitro-o-cresol	1.0
540-59-0	1,2-Dichloroethylene	1.0
541-41-3	Ethyl chloroformate	1.0
541-73-1	1,3-Dichlorobenzene	1.0
542-75-6	1,3-Dichloropropylene	0.1
542-88-1	Bis(chloromethyl) ether	0.1
569-64-2	C.I. Basic Green 4*	1.0
584-84-9	Toluene-2,4-diisocyanate	0.1
593-60-2	Vinyl bromide	0.1
606-20-2	2,6-Dinitrotoluene	1.0
615-05-4	2,4-Diaminoanisole	0.1
621-64-7	N-Nitrosodi-n-propylamine	0.1
624-83-9	Methyl isocyanate	1.0
636-21-5	o-Toluidine hydrochloride	0.1
680-31-9	Hexamethylphosphoramide	0.1
684-93-5	N-Nitroso-N-methylurea	0.1
759-73-9	N-Nitroso-N-ethylurea	0.1
842-07-9	C.I. Solvent Yellow 14*	0.1
924-16-3	N-Nitrosodi-n-butylamine	0.1
961-11-5	Tetrachlorvinphos {Phosphoric acid, 2-chloro-1-(2,4,5-trichlorophenyl)ethenyl dimethyl ester}	1.0
989-38-8	C.I. Basic Red 1*	1.0
1120-71-4	Propane sultone	0.1
1163-19-5	Decabromodiphenyl oxide	1.0
1313-27-5	Molybdenum trioxide	1.0
1314-20-1	Thorium dioxide	1.0
1319-77-3	Cresol (mixed isomers)	1.0
1330-20-7	Xylene (mixed isomers)	1.0
1332-21-4	Asbestos (friable)	0.1
1335-87-1	Hexachloronaphthalene	1.0
1336-36-3	Polychlorinated biphenyls {PCBs}	0.1
1344-28-1	Aluminum oxide (fibrous forms)	0.1
1464-53-5	Diepoxybutane	0.1
1582-09-8	Trifluralin {Benzenamine, 2,6- dinitro-N,N-dipropyl-4-(trifluoromethyl)-}	1.0
1634-04-4	Methyl tert-butyl ether	1.0
1836-75-5	Nitrofen {Benzene, 2,4-dichloro-1-(4-nitrophenoxy)-}	0.1
1897-45-6	Chlorothalonil {1,3-Benzenedicarbonitrile, 2,4,5,6-tetrachloro-}	1.0
1937-37-7	C.I. Direct Black 38*	0.1
2164-17-2	Fluometuron {Urea, N,N-dimethyl-N'-[3-(trifluoromethyl)phenyl]-}	1.0
2234-13-1	Octachloronaphthalene	1.0
2303-16-4	Diallate {Carbamothioic acid, bis (1-methylethyl)-, S-(2,3-dichloro-2-propenyl) ester}	1.0
2602-46-2	C.I. Direct Blue 6*	0.1
2832-40-8	C.I. Disperse Yellow 3*	1.0
3118-97-6	C.I. Solvent Orange 7*	1.0
3761-53-3	C.I. Food Red 5*	0.1
4549-40-0	N-Nitrosomethylvinylamine	0.1
4680-78-8	C.I. Acid Green 3*	1.0
6484-52-2	Ammonium nitrate (solution)	1.0
7429-90-5	Aluminum (fume or dust)	1.0
7439-92-1	Lead	0.1
7439-96-5	Manganese	1.0
7439-97-6	Mercury	1.0
7440-02-0	Nickel	0.1
7440-22-4	Silver	1.0
7440-28-0	Thallium	1.0
7440-36-0	Antimony	1.0
7440-38-2	Arsenic	0.1
7440-39-3	Barium	1.0
7440-41-7	Beryllium	0.1
7440-43-9	Cadmium	0.1
7440-47-3	Chromium	0.1
7440-48-4	Cobalt	1.0
7440-50-8	Copper	1.0
7440-62-2	Vanadium (fume or dust)	1.0
7440-66-6	Zinc (fume or dust)	1.0

*C.I. means "Color Index"

CAS Number	Toxic Chemical Name	De Minimis Concentration
7550-45-0	Titanium tetrachloride	1.0
7647-01-0	Hydrochloric acid	1.0
7664-38-2	Phosphoric acid	1.0
7664-39-3	Hydrogen fluoride	1.0
7664-41-7	Ammonia	1.0
7664-93-9	Sulfuric acid	1.0
7697-37-2	Nitric acid	1.0
7723-14-0	Phosphorus (yellow or white)	1.0
7782-49-2	Selenium	1.0
7782-50-5	Chlorine	1.0
7783-20-2	Ammonium sulfate (solution)	1.0
8001-35-2	Toxaphene	0.1
8001-58-9	Creosote	0.1
10034-93-2	Hydrazine sulfate	0.1
10049-04-4	Chlorine dioxide	1.0
12122-67-7	Zineb {Carbamodithioic acid, 1,2-ethanediylbis-,zinc complex}	1.0
12427-38-2	Maneb {Carbamodithioic acid, 1,2-ethanediylbis-,manganese complex}	1.0
16071-86-6	C.I. Direct Brown 95*	0.1
16543-55-8	N-Nitrosonornicotine	0.1
20816-12-0	Osmium tetroxide	1.0
25321-14-6	Dinitrotoluene (mixed isomers)	1.0
25321-22-6	Dichlorobenzene (mixed isomers)	0.1
25376-45-8	Diaminotoluene (mixed isomers)	0.1
26471-62-5	Toluenediisocyanate (mixed isomers)	0.1
39156-41-7	2,4-Diaminoanisole sulfate	0.1

SECTION 313 TOXIC CHEMICAL CATEGORIES

Section 313 requires reporting on the toxic chemical categories listed below, in addition to the specific toxic chemicals listed above.

The metal compounds listed below, unless otherwise specified, are defined as including any unique chemical substance that contains the named metal (i.e., antimony, copper, etc.) as part of that chemical's structure.

Toxic chemical categories are subject to the 1 percent de minimis concentration unless the substance involved meets the definition of an OSHA carcinogen, which are subject to the 0.1 percent de minimis concentration. The de minimis concentration for each compound is provided in paranthesis.

Antimony Compounds - (Category Code N010) - Includes any unique chemical substance that contains antimony as part of that chemical's infrastructure. (1.0)

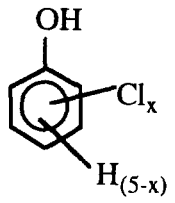
Arsenic Compounds - (Category Code N020) - Includes any unique chemical substance that contains arsenic as part of that chemical's infrastructure. (Inorganic compounds: 0.1; organic compounds: 1.0)

Barium Compounds - (Category Code N040) - Includes any unique chemical substance that contains barium as part of that chemical's infrastructure. (1.0)

Beryllium Compounds - (Category Code N050) - Includes any unique chemical substance that contains beryllium as part of that chemical's infrastructure. (Inorganic compounds: 0.1; organic compounds: 1.0)

Cadmium Compounds - (Category Code N078) - Includes any unique chemical substance that contains cadmium as part of that chemical's infrastructure. (Inorganic compounds: 0.1; organic compounds: 1.0)

Chlorophenols - (Category Code N084) - (0.1)



where x = 1 to 5

*C.I. means "Color Index"

Chromium Compounds - (Category Code N090) - Includes any unique chemical substance that contains chromium as part of that chemical's infrastructure. (chromium VI compounds: 0.1; chromium III compounds: 1.0)

Cobalt Compounds - (Category Code N096) - Includes any unique chemical substance that contains cobalt as part of that chemical's infrastructure. (1.0)

Copper Compounds - (Category Code N100) - Includes any unique chemical substance that contains copper as part of that chemical's infrastructure. (1.0)

This category does not include:

Chemical	CAS Number
C.I. Pigment Blue 15	147-14-8
C.I. Pigment Green 7	1328-53-6
C.I. Pigment Green 36	14302-13-7

Cyanide Compounds - (Category Code N106) - $X^+ CN^-$ where $X = H^+$ or any other group where a formal dissociation may occur. For example, KCN or $Ca(CN)_2$. (1.0)

Glycol Ethers - (Category Code N230) - Includes mono- and di- ethers of ethylene glycol, diethylene glycol, and triethylene glycol. (1.0)

$R\text{-}(OCH_2CH_2)n\text{-}OR'$
Where n = 1,2,or 3

R = alkyl or aryl groups

R'= R, H, or groups which, when removed, yield glycol ethers with the structure:
$R\text{-}(OCH_2CH_2)n\text{-}OH$

Polymers are excluded from this category.

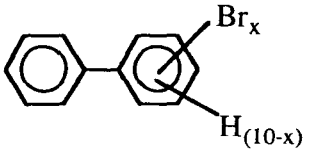
Lead Compounds - (Category Code N420) - Includes any unique chemical substance that contains lead as part of that chemical's infrastructure. (Inorganic compounds: 0.1; organic compounds: 1.0)

Manganese Compounds - (Category Code N450) - Includes any unique chemical substance that contains manganese as part of that chemical's infrastructure. (1.0)

Mercury Compounds - (Category Code N458) - Includes any unique chemical substance that contains mercury as part of that chemical's infrastructure. (1.0)

Nickel Compounds - (Category Code N495) - Includes any unique chemical substance that contains nickel as part of that chemical's infrastructure. (0.1)

Polybrominated Biphenyls (PBBs) - (Category Code N575) - (0.1)



where x = 1 to 10

Selenium Compounds - (Category Code N725) - Includes any unique chemical substance that contains selenium as part of that chemical's infrastructure. (1.0)

Silver Compounds - (Category Code N740) - Includes any unique chemical substance that contains silver as part of that chemical's infrastructure. (1.0)

Thallium Compounds - (Category Code N760) - Includes any unique chemical substance that contains thallium as part of that chemical's infrastructure. (1.0)

Zinc Compounds - (Category Code N982) - Includes any unique chemical substance that contains zinc as part of that chemical's infrastructure. (1.0)

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TABLE III. STATE ABBREVIATIONS

Alabama	AL	Montana	MT
Alaska	AK	Nebraska	NE
American Samoa	AS	Neveda	NV
Arizona	AZ	New Hampshire	NH
Arkansas	AR	New Jersey	NJ
California	CA	New Mexico	NM
Colorado	CO	New York	NY
Connecticut	CT	North Carolina	NC
Delaware	DE	North Dakota	ND
District of Columbia	DC	Commonwealth of Northern Mariana Islands	MP
Florida	FL	Ohio	OH
Georgia	GA	Oklahoma	OK
Guam	GU	Oregon	OR
Hawaii	HI	Pennsylvania	PA
Idaho	ID	Puerto Rico	PR
Illinois	IL	Rhode Island	RI
Indiana	IN	South Carolina	SC
Iowa	IA	South Dakota	SD
Kansas	KS	Tennessee	TN
Kentucky	KY	Texas	TX
Louisiana	LA	Utah	UT
Maine	ME	Vermont	VT
Marshall Islands	MH	Virginia	VA
Maryland	MD	Virgin Islands	VI
Massachusetts	MA	Washington	WA
Michigan	MI	West Virginia	WV
Minnesota	MN	Wisconsin	WI
Mississippi	MS	Wyoming	WY
Missouri	MO		

APPENDIX A. RESERVED

APPENDIX B. REPORTING CODES FOR EPA FORM R

Part II, Section 1.1 - CAS Number

Toxic Chemical Category Codes

N010	Antimony compounds
N020	Arsenic compounds
N040	Barium compounds
N050	Berylium compounds
N078	Cadmium compounds
N084	Clorophenols
N090	Chromium compounds
N096	Cobalt compounds
N100	Copper compounds
N106	Cyanide compounds
N230	Glycol ethers
N420	Lead compounds
N450	Manganese compounds
N458	Mercury compounds
N495	Nickel compounds
N575	Polybrominated biphenyls (PBBs)
N725	Selenium compounds
N740	Silver compounds
N760	Thallium compounds
N982	Zinc compounds

Part II, Section 4 - Maximum Amount of the Toxic Chemical On-Site at Any Time During the Calendar Year

Weight Range in Pounds

Range Code	From...	To....
01	0	99
02	100	999
03	1,000	9,999
04	10,000	99,999
05	100,000	999,999
06	1,000,000	9,999,999
07	10,000,000	49,999,999
08	50,000,000	99,999,999
09	100,000,000	499,999,999
10	500,000,000	999,999,999
11	1 billion	more than 1 billion

Part II, Section 5 - Releases of the Toxic Chemical to the Environment On-Site and Part II, Section 6 - Transfers of the Toxic Chemical in Waste Streams to Off-Site Locations

Total Release or Transfer

Code	Range (lbs)
A	1-10
B	11-499
C	500-999

Basis of Estimate

M: Estimate is based on monitoring data or measurements for the toxic chemical as transferred to an off-site facility.

C: Estimate is based on mass balance calculations, such as calculation of the amount of the toxic chemical in waste streams entering and leaving process equipment.

E: Estimate is based on published emission factors, such as those relating release quantity to throughput or equipment type (e.g., air emission factors).

O: Estimate is based on other approaches such as engineering calculations (e.g., estimating volatilization using published mathematical formulas or best engineering judgment. This would include applying an estimated removal efficiency to a waste stream, even if the composition of the waste stream before treatment was fully characterized by monitoring data.

Part II, Section 6 - Transfers of the Toxic Chemical in Waste Streams to Off-Site Locations

Type of Waste Treatment/Disposal/Recycling/Energy Recovery

M10 Storage Only
M20 Solvents/Organics Recovery
M24 Metals Recovery
M26 Other Reuse or Recovery
M28 Acid Regeneration
M40 Solidification/Stabilization
M50 Incineration/Thermal Treatment
M54 Incineration/Insignificant Fuel Value
M56 Energy Recovery

M61 Wastewater Treatment (Excluding POTW)
M69 Other Waste Treatment
M71 Underground Injection
M72 Landfill/Disposal Surface Impoundment
M73 Land Treatment
M79 Other Land Disposal
M90 Other Off-Site Management
M92 Transfer to Waste Broker -- Energy Recovery
M93 Transfer to Waste Broker -- Recycling
M94 Transfer to Waste Broker -- Disposal
M95 Transfer to Waste Broker -- Waste Treatment
M99 Unknown

Federal Information Processing Standards (FIPS) Codes for Transfers of the Toxic Chemical to Other Countries

This is an abridged list of countires to which a U.S. facility might ship a listed toxic chemical. For a complete listing of FIPS codes, consult your local library.

Country	Code
Argentina	AR
Belgium	BE
Bolivia	BL
Brazil	BR
Canada	CA
Chile	CI
Columbia	CO
Costa Rica	CS
Cuba	CU
Ecuador	EC
El Salvador	ES
France	FR
Guatemala	GT
Honduras	HO
Ireland	EI
Italy	IT
Mexico	MX
Nicaragua	NU
Panama	PM
Paraguay	PA
Peru	PE
Portugal	PO
Spain	SP
Switzerland	SZ
United Kingdom	UK
Uruguay	UY
Venezuela	VE

Part II, Section 7A - Waste Treatment Methods and Efficiency

General Waste Stream

A Gaseous (gases, vapors, airborne particulates)
W Wastewater (aqueous waste)
L Liquid waste streams (non-aqueous waste)
S Solid waste streams (including sludges and slurries)

Waste Treatment Methods

Air Emissions Treatment

A01 Flare
A02 Condenser
A03 Scrubber
A04 Absorber
A05 Electrostatic Precipitator
A06 Mechanical Separation
A07 Other Air Emission Treatment

Biological Treatment

B11 Biological Treatment — Aerobic
B21 Biological Treatment — Anaerobic
B31 Biological Treatment — Facultative
B99 Biological Treatment — Other

Chemical Treatment

C01 Chemical Precipitation -- Lime or Sodium Hydroxide
C02 Chemical Precipitation -- Sulfide
C09 Chemical Precipitation -- Other
C11 Neutralization
C21 Chromium Reduction
C31 Complexed Metals Treatment (other than pH Adjustment)
C41 Cyanide Oxidation -- Alkaline Chlorination
C42 Cyanide Oxidation -- Electrochemical
C43 Cyanide Oxidation -- Other
C44 General Oxidation (including Disinfection) -- Chlorination
C45 General Oxidation (including Disinfection) -- Ozonation
C46 General Oxidation (including Disinfection) -- Other
C99 Other Chemical Treatment

Incineration/Thermal Treatment

F01 Liquid Injection
F11 Rotary Kiln with Liquid Injection Unit
F19 Other Rotary Kiln
F31 Two Stage
F41 Fixed Hearth
F42 Multiple Hearth
F51 Fluidized Bed
F61 Infra-Red
F71 Fume/Vapor
F81 Pyrolytic Destructor
F82 Wet Air Oxidation
F83 Thermal Drying/Dewatering
F99 Other Incineration/Thermal Treatment

Physical Treatment

P01 Equalization
P09 Other Blending
P11 Settling/Clarification
P12 Filtration
P13 Sludge Dewatering (non-thermal)
P14 Air Flotation
P15 Oil Skimming
P16 Emulsion Breaking -- Thermal
P17 Emulsion Breaking -- Chemical
P18 Emulsion Breaking -- Other
P19 Other Liquid Phase Separation
P21 Adsorption -- Carbon
P22 Adsorption -- Ion Exchange (other than for recovery/reuse)
P23 Adsorption -- Resin
P29 Adsorption -- Other
P31 Reverse Osmosis (other than for recovery/reuse)
P41 Stripping -- Air
P42 Stripping -- Steam
P49 Stripping -- Other
P51 Acid Leaching (other than for recovery/reuse)
P61 Solvent Extraction (other than recovery/reuse)
P99 Other Physical Treatment

Solidification/Stabilization

G01 Cement Processes (including Silicates)
G09 Other Pozzolonic Processes (including Silicates)
G11 Asphaltic Processes
G21 Thermoplastic Techniques
G99 Other Solidification Processes

Range of Influent Concentration

1 = Greater than 1 percent
2 = 100 parts per million (0.01 percent) to 1 percent (10,000 parts per million)
3 = 1 part per million to 100 parts per million
4 = 1 part per billion to 1 part per million
5 = Less than 1 part per billion

[Note: Parts per million (ppm) is milligrams/kilogram (mass/mass) for solids and liquids; cubic centimeters/cubic meter (volume/volume) for gases; milligrams/liter for solutions or dispersions of the chemical in water; and milligrams of chemical/kilogram of air for particulates in air. If you have particulate concentrations (at standard temperature and pressure) as grains/cubic foot of air, multiply by 1766.6 to convert to parts per million; if in milligrams/cubic meters, multiply by 0.773 to obtain parts per million. Factors are for standard conditions of 0°C (32°F) and 760 mmHg atmospheric pressure.]

Part II, Section 7B - On-Site Energy Recovery Processes

U01 Industrial Kiln
U02 Industrial Furnace
U03 Industrial Boiler
U09 Other Energy Recovery Methods

Part II, Section 7C - On-Site Recycling Processes

R11 Solvents/Organics Recovery -- Batch Still Distillation
R12 Solvents/Organics Recovery -- Thin-Film Evaporation
R13 Solvents/Organics Recovery -- Fractionation
R14 Solvents/Organics Recovery -- Solvent Extraction
R19 Solvents/Organics Recovery -- Other
R21 Metals Recovery -- Electrolytic
R22 Metals Recovery -- Ion Exchange
R23 Metals Recovery -- Acid Leaching
R24 Metals Recovery -- Reverse Osmosis
R26 Metals Recovery -- Solvent Extraction
R27 Metals Recovery -- High Temperature
R28 Metals Recovery -- Retorting
R29 Metals Recovery -- Secondary Smelting
R30 Metals Recovery -- Other
R40 Acid Regneration
R99 Other Reuse or Recovery

Part II, Section 8.10 - Source Reduction Activity Codes

Good Operating Practices

W13 Improved maintenance scheduling, recordkeeping, or procedures
W14 Changed production schedule to minimize equipment and feedstock changeovers
W19 Other changes in operating practices

Inventory Control

W21 Instituted procedures to ensure that materials do not stay in inventory beyond shelf-life
W22 Began to test outdated material -- continue to use if still effective
W23 Eliminated shelf-life requirements for stable materials
W24 Instituted better labelling procedures
W25 Instituted clearinghouse to exchange materials that would otherwise be discarded
W29 Other changes in inventory control

Spill and Leak Prevention

W31 Improved storage or stacking procedures
W32 Improved procedures for loading, unloading, and transfer operations
W33 Installed overflow alarms or automatic shut-off valves
W35 Installed vapor recovery systems
W36 Implemented inspection or monitoring program of potential spill or leak sources
W39 Other spill and leak prevention

Raw Material Modifications

W41 Increased purity of raw materials
W42 Substituted raw materials
W49 Other raw material modifications

Process Modifications

W51 Instituted recirculation within a process
W52 Modified equipment, layout, or piping
W53 Use of a different process catalyst
W54 Instituted better controls on operating bulk containers to minimize discarding of empty containers
W55 Changed from small volume containers to bulk containers to minimize discarding of empty containers
W58 Other process modifications

Cleaning and Degreasing

W59 Modified stripping/cleaning equipment
W60 Changed to mechanical stripping/cleaning devices (from solvents or other materials)
W61 Changed to aqueous cleaners (from solvents or other materials)
W63 Modified containment procedures for cleaning units
W64 Improved draining procedures
W65 Redesigned parts racks to reduce dragout
W66 Modified or installed rinse systems
W67 Improved rinse equipment design
W68 Improved rinse equipment operation
W71 Other cleaning and degreasing modifications

Surface Preparation and Finishing

W72 Modified spray systems or equipment
W73 Substituted coating materials used
W74 Improved application techniques
W75 Changed from spray to other system
W78 Other surface preparation and finishing modifications

Product Modifications

W81 Changed product specifications
W82 Modified design or composition
W83 Modified packaging
W89 Other product modifications

Part II, Section 8.10 - Methods Used to Identify Source Reduction Activities

For each source reduction activity, enter up to three of the following codes that correspond to the method(s) used to identify that activity and contributed most to the decision to implement that activity.

T01 Internal Pollution Prevention Opportunity Audit(s)
T02 External Pollution Prevention Opportunity Audit(s)
T03 Materials Balance Audits
T04 Participative Team Management
T05 Employee Recommendation (independent of a formal company program)
T06 Employee Recommendation (under a formal company program)
T07 State Government Technical Assistance Program
T08 Federal Government Technical Assistance Program
T09 Trade Association/Industry Technical Assistance Program
T10 Vendor Assistance
T11 Other

APPENDIX C. COMMON ERRORS IN COMPLETING FORM R REPORTS

The common errors in complying with section 313 and completing Form R occur in three areas: Form R entry errors, threshold determination errors, and release estimation errors. It is important to note that although the Pollution Prevention Act of 1990 has greatly impacted the Form R, many of these common errors will still exist. These errors may prevent the entering of information from Form Rs into the Toxic Release Inventory (TRI) database, or may result in overly large or small release estimates or omission of reportable releases of toxic chemicals. If a mistake is made on the Form R that prevents it from being entered into the TRI database, the facility owner/operator will be issued a Notice of Non-Compliance by EPA. The notice will indicate that the Form R cannot be further processed and entered into the TRI database and that changes must be submitted to EPA by a certain date or further enforcement actions will be taken.

For other errors, including missing pieces of information or erroneous data (e.g., missing certification signature, non-numeric SIC codes), the facility owner/operator will be issued a Notice of Technical Error by EPA. This notice will explain the nature of the error and will require that the corrections be returned to EPA by a certain date.

Through examining Form Rs from other facilities in the same industry or through federal, state, and local referrals, EPA may initiate an inspection to determine the toxic chemical-related activities at a facility. If, as a result of the inspection, EPA determines that the facility should have submitted a Form R, then EPA may take enforcement action against the facility, which may involve the subsequent assessment of fines. Likewise, if EPA determines in the process of the inspection that the facility incorrectly calculated a threshold determination, the facility may also be subject to penalties.

Discussed below are common errors made when completing Form Rs and the corresponding notices and enforcement actions that may result from these errors.

Form R Completion Errors

- **Invalid chemical identification on page 3.** The CAS number and the chemical name reported on page 3 must exactly match the listed section 313 CAS number and toxic chemical name. The toxic chemical category code must exactly match the listed category code in Appendix B. A generic chemical name should only be provided if you are claiming the section 313 chemical identity as a trade secret. Toxic chemical names and CAS numbers should be taken directly from the section 313 toxic chemical list. Mixture names are to be entered in Part II, Section 2 if the supplier is claiming the identity of the toxic chemical trade secret and that is the sole identification. Mixture names that include the name or CAS number of one or more section 313 toxic chemical(s) are not valid. Failure to correctly enter the chemical identification information will result in a Notice of Non-Compliance.

- **Missing certification signature.** An original certification signature must appear on page 1 of every Form R submitted to EPA. Failure to provide an original certification signature will result in a Notice of Technical Error.

- **Incomplete forms.** A complete Form R report for any toxic chemical or toxic chemical category consists of at least nine unique pages stapled together. Sending in a package which contains only one page 1, but several page 2's, 3's, 4's, 5's, 6's, etc. will result in a Notice of Non-Compliance.

- **Maximum amount on-site left blank.** In a surprising number of Form R submissions, Part II, Section 4 on page 3 is left blank. Leaving this section blank may result in a Notice of Technical Error.

- **"Questionable" entries**, such as:

  - Missing or incorrect ZIP codes;
  - Missing county names;
  - Non-numeric SIC codes;
  - Non-numeric or invalid Dun and Bradstreet numbers;
  - Incomplete off-site and POTW information (e.g., missing city name)

  Incorrect entries such as these may result in a Notice of Technical Error. If amounts are reported in units other than pounds (e.g., metric) or

with exponential numbers, EPA may require a revision of the Form R to be submitted.

- **Incorrect latitude and longitude coordinates.** Latitude and longitude coordinates are important data on the Form R. These coordinates must be determined using the correct map and correct measuring techniques and reported in degrees, minutes, and seconds. For additional guidance, see Appendix E of the instructions document. Missing, suspect, or incorrect latitude or longitude coordinates will result in a Notice of Technical Error.

- **Incorrect completion of trade secret information.** The response to trade secret questions in Part I and Part II of a Form R must be consistent. If trade secrecy is indicated, a sanitized Form R and two trade secret substantiations (one sanitized) must be submitted in the same package as the trade secret Form R. Failure to provide complete trade secret submissions will result in a Notice of Non-Compliance.

- **Revisions not identified.** Revisions to previously submitted data may be provided to EPA by making corrections in red ink on a copy of the Form R originally submitted; if a revision is made for reporting year 1991 or later, mark an "X" in the space marked "Enter "X" here if this is a revision" on page 1; provide an original signature, and send it to the EPCRA Reporting Center. You must also send a copy of the revision to the appropriate State agency. Failure to clearly identify a revision may result in EPA entering it into the TRI database as a new submission resulting in duplicative data for the facility. Revisions to data submitted using magnetic media must be made on hard copies of the original Form R and submitted with a cover letter explaining that the original data was submitted on magnetic media.

- **Duplicate submissions not identified.** Facilities sometimes send multiple copies of the same Form R to insure that EPA received a copy. Duplicate submissions must be identified by printing the word "DUPLICATE" in red ink at the top of page 1. Failure to clearly identify a duplicate report may result in the duplicate appearance of the data in the TRI database.

- **Failure to report waste treatment.** Waste treatment methods used to treat waste streams containing toxic chemicals, and the efficiencies of these methods, must be reported on Form R. Information must be entered for all waste streams, even if the waste treatment does not affect the toxic chemical. If no waste treatment is performed on the toxic chemical, the box marked "Not Applicable" in Part II, Section 7 must be checked on the Form R. Failure to do so may result in a Notice of Technical Error.

- **Incorrect reporting of waste treatment methods.** The type of waste stream, influent concentration, and waste treatment method for each waste stream is required to be reported on Form R using specific codes, along with the waste treatment efficiency expressed as percent removal. Incomplete or missing treatment codes or missing efficiency data may result in a Notice of Technical Error.

- **Reporting for delisted chemicals.** Form R reports for delisted chemicals or other non-listed chemicals are not required. EPA identifies such reports as nonreportable and notifies the facility that these reports are not required and will not be included as part of the TRI database.

- **Reporting discharges of mineral acids after neutralization.** When a waste stream containing a mineral acid is neutralized to a pH of 6 or above, the mineral acid is considered 100 percent neutralized. As a result, the release of a neutralized acid discharge should be reported on Form R as zero. Reporting a large amount of neutralized acid as a release may result in a Notice of Technical Error.

- **Not completing all sections of Form R.** All sections of Form R must contain data or "NA". Failure to complete <u>any</u> section may result in a Notice of Technical Error.

- **Duplicate data in Part II, Sections 5 and Part II, Section 6.** Reporting identical values as a discharge to a receiving stream in Part II, Section 5.3 and as a transfer to a POTW in Part II, Section 6.1 is interpreted by EPA as duplicative data and may result in a Notice of Technical Error.

- **Documentation**. Any information used to complete the Form R must be clearly documented in facility records and be available for viewing by EPA upon request. Failure to provide proper documentation if requested by EPA may result in an enforcement action. This documentation should not be submitted with the Form R, but must be maintained by the submitting facility for three years.

- **Toxic chemical activity overlooked**. Many facilities believe that because the section 313 reporting requirement pertains to manufacturers, only the use of toxic chemicals in manufacturing processes must be examined. **Any activity** involving the manufacture, process, or otherwise use of a listed toxic chemical must be included in a threshold determination. For example, waste treatment operations otherwise use toxic chemicals to treat waste streams and may coincidentally manufacture another listed toxic chemical as a result of the waste treatment reaction. Failure to correctly identify all uses of toxic chemicals at your facility may result in the omission of a required Form R and may lead to an enforcement action.

- **Misclassification of a toxic chemical activity**. Failure to correctly classify a toxic chemical activity may result in an incorrect threshold determination. As a result, a Form R may not be submitted when one is required. "Manufacture" means to produce, prepare, compound, or import a listed toxic chemical. "Process" means the preparation of a listed toxic chemical after its manufacture, which incorporates the toxic chemical into the final product, for distribution in commerce. "Otherwise use" encompasses any use of a listed toxic chemical that does not fall under the terms "manufacture" or "process." For example, solvents in paint applied to a manufactured product are often misclassified as processed, instead of otherwise used. Because the solvents are not intentionally incorporated into the final product, the solvent is being otherwise used, not processed. Failure to submit a Form R because of an incorrect threshold determination resulting from a misclassification of a toxic chemical activity may result in an enforcement action.

- **Incorrect interpretation of an exemption clause**. Only toxic chemicals meeting every condition of an exemption clause may be omitted from the reporting requirements. For additional guidance on the scope of the section 313 exemptions and specific examples, see the *Toxic Chemical Release Inventory Questions and Answers* document, which includes "Directive #1: Article Exemption." For example, only the processing or otherwise using an article is exempt. Incorrectly assuming the manufacture of an article is exempt will result in incorrectly omitting toxic chemicals which are required to be included in a threshold determination. Failure to submit a Form R due to an incorrect threshold determination resulting from the incorrect interpretation of an exemption clause may result in an enforcement action.

- **Misinterpretation of the toxic chemical list**. Each toxic chemical subject to section 313 reporting requirements has a specific Chemical Abstract Service (CAS) registry number associated with it. All information available at the facility, such as MSDSs and the *Common Synonyms for Section 313 Chemicals* document, must be used to identify the listed toxic chemicals being reported.

- **Failure to consider a listed toxic chemical qualifier**. Aluminum, vanadium, and zinc are qualified as "fume or dust." Isopropyl alcohol and saccharin have manufacturing qualifiers. Ammonium nitrate and ammonium sulfate are qualified as solutions. Phosphorus is qualified as yellow or white. Asbestos is qualified as friable. Aluminum oxide is qualified as fibrous forms. **Only** forms of these toxic chemicals meeting the qualifiers require reporting under section 313 and should be reported on Form R with the appropriate qualifier in parentheses. For example, isopropyl alcohol is listed on the toxic chemical list with the qualifier "manufacturing-strong acid process, no supplier notification." The only facilities that should be reporting this toxic chemical are those that manufacture isopropyl alcohol by the strong acid process. If it is manufactured by another process, or simply processed or otherwise used, you are not required to report it.

- **Incorrectly interpreting threshold definition.** Thresholds for section 313 are based on the amount of toxic chemicals manufactured, processed, or otherwise used at the facility over the course of a calendar year. The thresholds are not based on the amount stored on-site at any one time or the amount released to the environment. Any toxic chemical that is reported that did not exceed a threshold will result in a Notice of Non-Compliance. Any toxic chemical that was not reported due to an incorrect threshold determination (i.e., based on the amount released), which should have been reported, may result in an enforcement action.

- **Reporting zero air emissions of a VOC.** Volatile organic chemicals (VOCs) are substances which readily evaporate at room temperature. As a result, when using these toxic chemicals in an open tank, a painting or degreasing operation, or similar open operations, air emissions will occur. Only in special cases with completely closed systems may a zero emission to air occur. Failure to report air emissions when submitting a Form R for a VOC may result in underreporting of releases.

- **Reporting CAS numbers in Section 1.1.** Beginning with the 1991 reporting year, EPA has assigned alphanumeric category codes to the twenty chemical categories for the purposes of reporting in Section 1.1, the CAS number field. If you are completing a Form R for a chemical category, you must provide the appropriate code for that category in Section 1.1. The category codes can be found in the instructions for Section 1.1; Table II, "Section 313 Toxic Chemical List;" and Appendix B, "Reporting Codes for EPA Form R."

- **Reporting transfers to POTWs.** When all quantities of a listed mineral acid are transferred to a POTW after being neutralized to a pH of 6 or greater, the quantity transferred should be reported as zero. It is incorrect to enter "NA" (Not Applicable), in such a situation.

- **Reporting other off-site transfers.** Beginning with the 1991 reporting year, transfers off-site for the purposes of recycling or combustion for energy recovery are to be reported in Section 6.2. Any quantities reported in Sections 8.5, 8.3, 8.7, and 8.1 as sent off-site for recycling, energy recovery, treatment, or disposal, respectively, must also be reported in Section 6.2 along with the receiving location and appropriate off-site activity code.

- **Reporting on-site energy recovery methods in Section 7B.** When a quantity is reported in Section 8.2 as combusted for energy recovery on-site, the type of energy recovery system used must be reported in Section 7B, and vice versa. Reporting on-site recycling methods in Section 7C. When a quantity is reported in Section 8.4 as recycled on-site, the type of recovery method must be reported in Section 7C, and vice versa.

- **Reporting quantities in Section 8.** This section is mandatory: under no circumstances should a reporting facility leave Section 8 entirely blank, even if the facility does not engage in source reduction or recycling activities. It is incorrect to use range codes to report quantities in Section 8. Range codes can be used only in Sections 5 and 6 of Form R. It is incorrect to use the codes for reporting the maximum amount of the reported toxic chemical on-site in Section 4 to report quantities in Section 8.

  It is incorrect to enter "NA" (Not Applicable), in columns A, B, C, or D in Section 8. Entering "NA" in column A was allowable for the 1991 reporting year only. Zero (0) can be used in columns A, B, C, and D to indicate that the reported toxic chemical will not undergo a specific activity such as treatment. Columns C and D, the future year projections for questions 8.1 through 8.7, must be completed. EPA expects a reasonable estimate for the future year projections. Zero (0) can be used in columns C and D to indicate that the manufacture, processing, or otherwise use of the chemical will be discontinued; in such cases, columns C and D for Sections 8.1 through 8.7 must contain all zeroes.

- **Quantities reported in Sections 8.1 through 8.7 must be mutually exclusive and additive.** This means that quantities of the reported toxic chemical should not be double-counted in Sections 8.1 through 8.7. Some facilities submitting Form Rs have reported the same quantity of a toxic chemical as both treated and recycled on-site. Some double-counting errors have been due to confusion over the differences in how on-site treatment of a toxic chemical is reported in Section 7A

as compared to Section 8. In Section 7A, information on the treatment of waste streams containing the toxic chemical is reported, along with the percent efficiency in terms of destruction or removal of the toxic chemical from each waste stream. In Section 8, only the quantity of the toxic chemical actually destroyed through the treatment processes reported in Section 7A is reported in Section 8.6 to avoid double-counting within Sections 8.1 through 8.7.

For example, a facility submits a Form R for nickel compounds. The facility treats wastewaters containing the nickel compounds and removes the nickel with a 99 percent efficiency. The facility then further reclaims the nickel and makes it available for continued use in its manufacturing processes. In completing Form R, the facility should report the treatment of the wastewaters with a 99 percent efficiency for the removal of the nickel in Section 7A, the method of recovery for the nickel in Section 7C, and only the amount of nickel made available for further use after reclamation as a quantity recycled on-site in Section 8.4. Any quantities released or disposed, including releases from either the treatment or recycling activities, should be reported in Section 8.1. The facility should not report the quantity of nickel removed from the wastewaters as a quantity treated on-site in Section 8.6 because reporting the same quantity as both treated and recycled on-site doubles the quantity of nickel that was treated and subsequently recycled on-site.

- **Quantities reported in Sections 8.1 through 8.7 must not be reported in Section 8.8 and vice versa.**

For example, 10,000 pounds of a toxic chemical is spilled due to non-production related activities during the reporting year. Of the total 10,000 pounds, 2,500 pounds volatilized and were released directly to the air and the remaining 7,500 pounds were collected and sent off-site for treatment. The total 10,000 pounds would be reported in Section 8.8. The 2,500 pound release to air would be reported in Section 5.1 as a fugitive emission, but it would not be reported in Section 8.1. The 7,500 pound transferred off-site for treatment would be reported in Section 6.2, but it would not be reported in Section 8.7.

- **Reporting toxic chemicals in RCRA wastes.** Any time a reported toxic chemical is contained in a waste that is identified under RCRA, and the waste is associated with routine production-related activities and is recycled, combusted for energy recovery, treated, or disposed either on- or off-site, that quantity of the toxic chemical must be included in the quantities reported in Sections 8.1 through 8.7.

- **Reporting quantities in Section 8.1, "Quantity released."** Facilities have incorrectly completed this element in several ways. Often, quantities of the reported toxic chemical that are released or disposed on-site and reported in Section 5 of the form are not reported in Section 8.1. Also, quantities of the reported toxic chemical transferred off-site for the purposes of disposal are reported in Section 6.2 but not in Section 8.1.

To correctly report in Section 8.1, a facility must include the following quantities of the reported toxic chemical that are released directly to the environment, disposed of on-site, or sent off-site for disposal that are not associated with a catastrophic or non-production related activity.

<u>Quantities released directly to the environment and disposed on-site</u>

Fugitive or non-point air emissions (Section 5.1)
Stack or point air emissions (Section 5.2)
Discharges to receiving streams or water bodies (Section 5.3)
Underground injections on-site (Section 5.4)
Release to land on-site
- landfill (Section 5.5.1)
- land treatment/application farming (Section 5.5.2)
- surface impoundment (Section 5.5.3)
- other disposal (Section 5.5.4)

Include in these quantities any direct releases from any treatment, recycling, or energy recovery activities.

<u>Quantities disposed off-site</u>

These are quantities that are reported in Section 6.2 and associated with the following codes:
M10 Storage Only;
M71 Underground Injection;
M72 Landfill/Disposal Surface Impoundment;
M73 Land Treatment;
M79 Other Land Disposal;
M90 Other Off-Site Management;
M94 Transfer to Waste Broker--Disposal; and
M99 Unknown.

- **Do not include in Section 8.1 any of the following quantities:**
  - Direct releases or fugitive emissions from remedial actions, catastrophic events, or one-time events not associated with production processes (these quantities are reported in Section 8.8 only).
  - Quantities of the toxic chemical associated with non-production related activities, such as catastrophic releases and remedial actions, as well as other one-time events not associated with routine production practices that were disposed on-site or sent off-site for disposal (these quantities are reported in Section 8.8 only).

- **Reporting quantities in Section 8.2, "Quantity used for energy recovery on-site."** A quantity must be reported in Section 8.2 for the current (reporting) year when a method of on-site energy recovery is reported in Section 7B, and vice versa. An error facilities make when completing Form R is to report the methods of energy recovery used on-site in Section 7B but not report the total quantity associated with those methods. Another error is to report a quantity in this section if the combustion of the toxic chemical took place in a system that did not recover energy (e.g. an incinerator). It is also incorrect to report a quantity of the toxic chemical as combusted for energy recovery if the toxic chemical does not have a BTU (British Thermal Unit) value high enough to sustain combustion. Examples of toxic chemicals that do not have heating values high enough to sustain combustion include metals, CFCs, and halons.

  Do not include in Section 8.2 any quantities of the toxic chemical associated with non-production related activities, such as catastrophic releases and remedial actions, as well as other one-time events not associated with routine production practices, that were combusted for energy recovery on-site.

- **Reporting quantities in Section 8.3, "Quantity used for energy recovery off-site."** As in Section 8.2, it is an error to report a quantity in this section if the off-site combustion of the toxic chemical took place in a system that did not recover energy (e.g. an incinerator). It is also incorrect to report a quantity of the toxic chemical as sent off-site for the purposes of energy recovery if the toxic chemical does not have a BTU (British Thermal Unit) value high enough to sustain combustion. Examples of toxic chemicals that do not have heating values high enough to sustain combustion include metals, CFCs, and halons. It is an error to not include quantities in Section 8.3 that are reported in Section 6.2 as transferred off-site for the purposes of combustion for energy recovery using the following codes:
  M56 Energy Recovery; and
  M92 Transfer to Waste Broker-Energy Recovery.

  Do not include in Section 8.3 any quantities of the toxic chemical associated with non-production related activities such as catastrophic releases and remedial actions, as well as other one-time events not associated with routine production practices, that were sent off-site for the purposes of combustion for energy recovery (these quantities are reported in Section 8.8 only).

- **Reporting quantities in Section 8.4, "Quantity recycled on-site."** A quantity must be reported in Section 8.4 for the current (reporting) year when a method of on-site recycling is reported in Section 7C, and vice versa. An error facilities make when completing Form R is to report the methods of recycling used on-site in Section 7C but not report the total quantity recovered using those methods. In addition, only the amount of the chemical that was actually recovered is to be reported in Section 8.4.

  Do not include in Section 8.4 any quantities of the toxic chemical associated with non-production related activities such as catastrophic releases and remedial actions, as well as other one-time events not associated with routine production practices, that were recycled on-site.

- **Reporting quantities in Section 8.5, "Quantity recycled off-site."** It is an error to not include quantities in Section 8.3 that are reported in Section 6.2 as transferred off-site for the purposes of recycling using the following codes:
  M20 Organics recovery;
  M24 Metals recovery;
  M26 Other recovery;
  M28 Acid regeneration; and
  M93 Transfer to Waste Broker--Recycling.

  Do not report in Section 8.5 the quantity actually recycled at the off-site facility -- facilities should report the quantity that was sent off-site for the

purposes of recycling. Do not include in Section 8.5 any quantities of the toxic chemical associated with non-production related activities such as catastrophic releases and remedial actions, as well as other one-time events not associated with routine production practices, that were sent off-site for the purposes of recycling (these quantities are reported in Section 8.8 only).

- **Reporting quantities in Section 8.6, "Quantity treated on-site."** Quantities may not always have to be reported in Section 8.6 when Section 7A is completed. This is because the information reported in Sections 7 and 8 is different; information on how waste streams containing the reported toxic chemical are treated is reported in Section 7, while the quantity of the toxic chemical actually destroyed as a result of on-site treatment is reported in Section 8.6. If a quantity is reported in Section 8.6, Section 7A must be completed. This may result in apparent discrepancies between Sections 7 and 8. For example, a facility may treat wastewaters containing a toxic chemical by removing the toxic chemical and then disposing of it on-site. The treatment of the wastewaters would be reported in Section 7A, with an efficiency estimate based on the amount of the toxic chemical removed from the wastewaters. As the toxic chemical undergoes treatment and then disposal, the facility would report only the amount of the toxic chemical actually destroyed during treatment in Section 8.6 and the amount ultimately disposed in Section 8.1 in order to avoid double-counting the same quantity in Section 8. In cases where the toxic chemical is not destroyed during a treatment process and subsequently enters another activity, such as disposal (e.g., metals removed from wastewaters and subsequently disposed on-site), the quantity of the toxic chemical would be reported as disposed in Section 8.1, not as treated in Section 8.6.

  Do not include in Section 8.6 any quantities of the toxic chemical associated with non-production related activities such as catastrophic releases and remedial actions, as well as other one-time events not associated with routine production practices, that were treated on-site.

- **Reporting quantities in Section 8.7, "Quantity treated off-site."** It is an error to not include quantities in Section 8.7 that are reported in Section 6.2 as transferred off-site for the purposes of treatment and associated using the following codes:
  M40 Solidification/stabilization;
  M50 Incineration/thermal treatment;
  M54 Incineration/Insignificant Fuel Value;
  M61 Wastewater treatment (excluding POTW);
  M69 Other treatment; and
  M95 Transfer to Waste Broker-Waste Treatment.

  In addition to those quantities, facilities should report any quantity that is transferred to a POTW (as reported in Section 6.1) in Section 8.7.

  Do not include in Section 8.7 any quantities of the toxic chemical associated with non-production related activities such as catastrophic releases and remedial actions, as well as other one-time events not associated with routine production practices, that were sent off-site for the purposes of treatment or discharged to a POTW (these quantities are reported in Section 8.8 only).

- **Reporting quantities in Section 8.8, "Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes."** Report in Section 8.8 those quantities associated with non-production related activities such as catastrophic releases and remedial actions, as well as other one-time events not associated with routine production practices, that were released directly to the environment, disposed on-site, or transferred off-site for the purposes of recycling, energy recovery, treatment or disposal. Quantities reported in Section 8.8 must not be reported in Sections 8.1 through 8.7.

- **Reporting the production ratio in Section 8.9.** A production ratio or activity index must be provided in Section 8.9. A zero is not acceptable and "NA" (Not Applicable), can be used only when the reported toxic chemical was not manufactured, processed, or otherwise used in the year prior to the reporting year.

- **Reporting source reduction activities in Section 8.10.** It is an error to report a source reduction activity in Section 8.10 and not report at least one method used to identify that activity and vice versa.

APPENDIX D. SUPPLIER NOTIFICATION REQUIREMENTS

Because manufacturers reporting under section 313 must know the toxic chemical composition of the products they use to be able to accurately calculate releases, EPA requires some suppliers of mixtures or trade name products containing one or more of the listed section 313 toxic chemicals to notify their customers. This requirement has been in effect since January 1, 1989.

This appendix explains which suppliers must notify their customers, who must be notified, what form the notice must take, and when it must be sent.

Who Must Supply Notification

You are covered by the section 313 supplier notification requirements if you own or operate a facility which meets all of the following criteria:

(1) Your facility is in Standard Industrial Classification (SIC) codes 20-39 (see Table I);

(2) You manufacture, import, or process a listed toxic chemical; and

(3) You sell or otherwise distribute a mixture or trade name product containing the toxic chemical to either:

- A facility in SIC Codes 20-39.
- A facility that then sells the same mixture or trade name product to a firm in SIC codes 20-39.

Note that you may be covered by the supplier notification rules even if you are not covered by the section 313 release reporting requirements. For example, even if you have less than 10 full-time employees or do not manufacture or process any of the toxic chemicals in sufficient quantities to trigger the release reporting requirements, you may still be required to notify certain customers.

Who Must Be Notified

For each mixture or trade name product that contains a listed toxic chemical, you will have to notify all customers in SIC codes 20-39 or distributors who in turn sell that product to facilities in SIC codes 20-39. Unless you know otherwise, you should assume that the chain of distribution includes facilities in SIC codes 20-39. (The notification is limited to SIC codes 20-39 facilities and their suppliers because only facilities in those SIC codes may be required to report releases under section 313.)

An example would be if you sold a lacquer containing toluene to distributors who then sell the product to other manufacturers. The distributors are not in SIC codes 20-39, but because they sell the product to companies in SIC codes 20-39, they must be notified so that they may pass the notice along to their customers, as required.

The language of the supplier notification requirements covers mixtures or trade name products that are sold or otherwise distributed. The "otherwise distributes" language applies to intra-company transfers. However, if the company has developed an internal communications procedure that alerts their other facilities to the presence and content of covered toxic chemicals in their products, then EPA would accept this.

Supplier notification is also required if a waste mixture containing a toxic chemical is sold to a recycling or recovery facility. However, if the material is sent off-site as a waste stream for treatment or disposal, then no supplier notification is required.

Supplier Notification Must Include the Following Information:

(1) A statement that the mixture or trade name product contains a toxic chemical or chemicals subject to the reporting requirements of EPCRA section 313 (40 CFR 372);

(2) The name of each toxic chemical and the associated Chemical Abstracts Service (CAS) registry number of each chemical if applicable. (CAS numbers are not used for chemical categories, since they can represent several individual toxic chemicals.)

(3) The percentage, by weight, of each toxic chemical (or all toxic chemicals within a listed category) contained in the mixture or trade name product.

For example, if a mixture contains a chemical (i.e., 12 percent zinc oxide) that is a member of a reportable toxic chemical category (i.e., zinc compounds), the notification must include that the mixture contains a zinc compound at 12 percent by weight. Supplying only the weight

percent of the parent metal (zinc) does not fulfill the requirement. The customer must be told the weight percent of the entire compound within a listed toxic chemical category present in the mixture.

How the Notification Must Be Made

The required notification must be provided at least annually in writing. Acceptable forms of notice include letters, product labeling, and product literature distributed to customers. If you are required to prepare and distribute a Material Safety Data Sheet (MSDS) for the mixture under the Occupational Safety and Health Act (OSHA) Hazard Communication Standard, your section 313 notification must be attached to the MSDS or the MSDS must be modified to include the required information. (A sample letter and recommended text for inclusion in an MSDS appear at the end of this appendix.)

You must make it clear to your customers that any copies or redistribution of the MSDS or other form of notification must include the section 313 notice. In other words, your customers should understand their requirement to include the section 313 notification if they give your MSDS to their customers.

When Notification Must Be Provided

In general, you must notify each customer receiving a mixture or trade name product containing a listed toxic chemical with the first shipment of each calendar year. You may send the notice with subsequent shipments as well, but it is required that you send it with the first shipment each year. Once customers have been provided with an MSDS containing the section 313 information, you may refer to the MSDS by a written letter in subsequent years (as long as the MSDS is current).

If EPA adds toxic chemicals to the section 313 list, and your products contain the newly listed toxic chemicals, notify your customers with the first shipment made during the next calendar year following EPA's final decision to add the chemical to the list. For example, if EPA adds chemical ABC to the list in September 1990, supplier notification for chemical ABC would have begun with the first shipment in 1991.

You must send a new or revised notice to your customers if you:

(1) Change a mixture or trade name product by adding, removing, or changing the percentage by weight of a listed toxic chemical.

(2) Discover that your previous notification did not properly identify the toxic chemicals in the mixture or correctly indicate the percentage by weight.

In these cases, you must:

(1) Supply a new or revised notification within 30 days of a change in the product or the discovery of misidentified toxic chemical(s) in the mixture or incorrect percentages by weight; and

(2) Identify in the notification the prior shipments of the mixture or product in that calendar year to which the new notification applies (e.g., if the revised notification is made on August 12, indicate which shipments were affected during the period January 1 - August 12).

When Notifications Are Not Required

Supplier notification is not required for a "pure" toxic chemical unless a trade name is used. The identity of the toxic chemical will be known based on label information.

You are not required to make a "negative declaration." That is, you are not required to indicate that a product contains no section 313 toxic chemicals.

If your mixture or trade name product contains one of the listed toxic chemicals, you are not required to notify your customers if:

(1) Your mixture or trade name product contains the toxic chemical in percentages by weight of less than the following levels (These are known as *de minimis* levels):

- 0.1 percent if the toxic chemical is defined as an "OSHA carcinogen";
- 1 percent for other toxic chemicals.

De minimis levels for each toxic chemical and chemical category are listed Table II.

(2) Your mixture or trade name product is one of the following:

- An article that does not release a listed toxic chemical under normal conditions of processing or otherwise use.

- Foods, drugs, cosmetics, pesticides, alcoholic beverages, tobacco, or tobacco products packaged for distribution to the general public.

- Any consumer product, as the term is defined in the Consumer Product Safety Act, packaged for distribution to the general public. For example, if you mix or package one-gallon cans of paint designed for use by the general public, notification is not required.

(3) Your mixture or trade name product is contained in a waste stream being sent off-site for waste treatment or disposal.

Trade Secrets

Chemical suppliers may consider the chemical name or the specific concentration of a section 313 toxic chemical in a mixture or trade name product to be a trade secret. If you consider the:

(1) Specific identity of a toxic chemical to be a trade secret, the notice must contain a generic chemical name that is descriptive of the structure of that toxic chemical. For example, decabromodiphenyl oxide could be described as a halogenated aromatic.

(2) Specific percentage by weight of a toxic chemical in the mixture or trade name product to be a trade secret, your notice must contain a statement that the toxic chemical is present at a concentration that does not exceed a specified upper bound. For example, if a mixture contains 12 percent toluene and you consider the percentage a trade secret, the notification may state that the mixture contains toluene at no more than 15 percent by weight. The upper bound value chosen must be no larger than necessary to adequately protect the trade secret.

If you claim this information to be trade secret, you must have documentation that provides the basis for your claim.

Recordkeeping Requirements

You are required to **keep records for** <u>**three years**</u> of the following:

(1) Notifications sent to recipients of your mixture or trade name product;

(2) Explanations of why a notification was considered necessary and all supporting materials used to develop the notice;

(3) If claiming a specific toxic chemical identity a trade secret, why the toxic chemical identity is considered a trade secret and the appropriateness of the generic chemical name provided in the notification; and

(4) If claiming a specific concentration a trade secret, explanations of why a specific concentration is considered a trade secret and the basis for the upper bound concentration limit.

This information must be readily available for inspection by EPA.

Sample Notification Letter

January 2, 1992

Mr. Edward Burke
Furniture Company of North Carolina
1000 Main Street
Anytown, North Carolina 99999

Dear Mr. Burke:

The purpose of this letter is to inform you that a product that we sell to you, Furniture Lacquer KXZ-1390, contains 20 percent toluene (Chemical Abstracts Service (CAS) number 108-88-3) and 15 percent zinc compounds. We are required to notify you of the presence of toluene and zinc compounds in the product under section 313 of the Emergency Planning and Community Right-to-Know Act of 1986. This law requires certain manufacturers to report on annual emissions of specified toxic chemicals and chemical categories.

If you are unsure whether or not you are subject to the reporting requirements of Section 313, or need more information, call EPA's Emergency Planning and Community Right-To-Know Information Hotline at (800) 535-0202. Your other suppliers should also be notifying you if section 313 toxic chemicals are in the mixtures and trade name products they sell to you.

Please also note that if you repackage or otherwise redistribute this product to industrial customers, a notice similar to this one should be sent to those customers.

Sincerely,

Axel Leaf
Sales Manager
Furniture Products

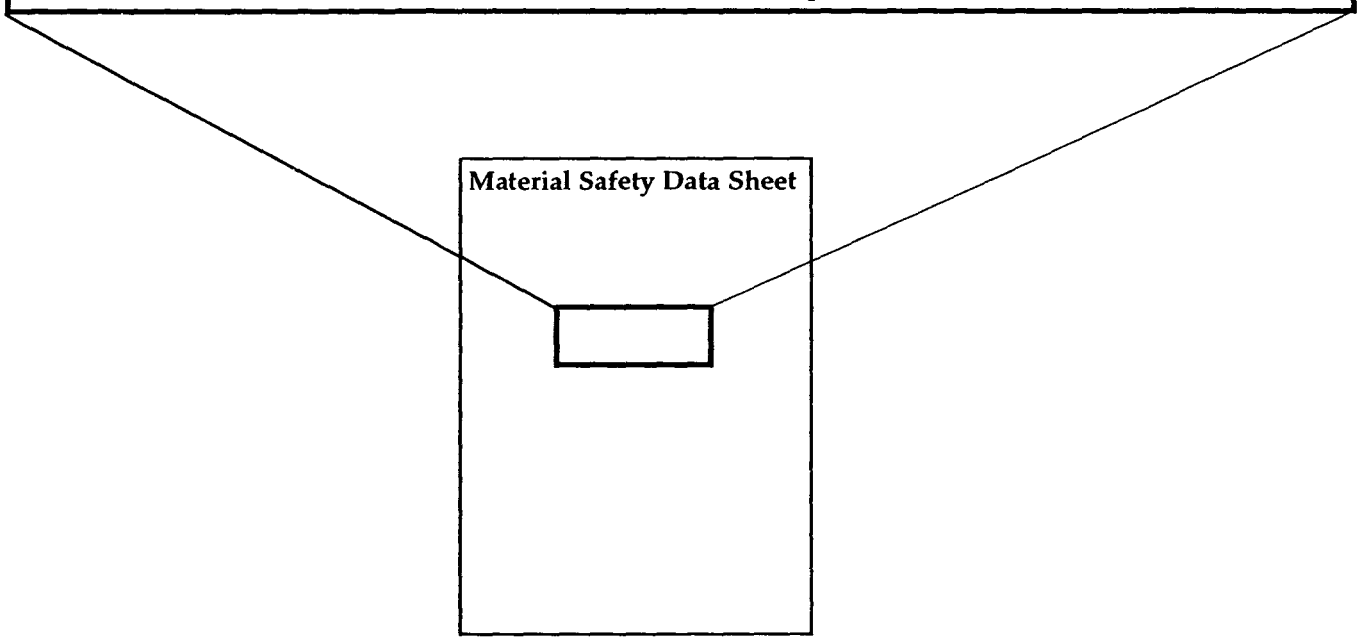
Sample Notification on an MSDS

Section 313 Supplier Notification

This product contains the following toxic chemicals subject to the reporting requirements of section 313 of the Emergency Planning and Community Right-To-Know Act of 1986 (40 CFR 372):

CAS #	Chemical Name	Percent by Weight
108-88-3	Toluene	20%
NA	Zinc Compounds	15%

This information should be included in all MSDSs that are copied and distributed for this material.



APPENDIX E. HOW TO DETERMINE LATITUDE AND LONGITUDE FROM TOPOGRAPHIC MAPS

Latitude and longitude coordinates of reporting facilities are very important for pinpointing facility location and are a required data element on Form R. As such, EPA is encouraging facilities to make the best possible measurements when determining latitude and longitude. As with any other data element, missing, suspect, or incorrect data may result in EPA issuing a Notice of Technical Error to the facility.

Latitude is the distance north or south of the equator. Longitude is the distance east or west of the prime meridian (Greenwich, England). Latitude and longitude are measured in degrees, minutes, and seconds.

60" (seconds) = 1' (minute)
60' (minutes) = 1° (degree)

The most important tool available for determining latitude and longitude for your facility is the U.S. Geological Survey (USGS) topographic quadrangle map. These maps are published in varying degrees of detail. The most detailed version of the topographic quadrangle map is in 7.5 x 7.5 minute increments with a scale of 1:24000 (i.e., one inch on the map represents 2,000 feet). Detailed topographic quadrangle maps are also available in 7.5 x 15 minute increments with a scale of 1:25000 (i.e., one inch on the map represents approximately four miles). It is very important that latitude and longitude measurements be made from one of the detailed maps described above. Otherwise, measurements will not accurately reflect the location of your facility and could be identified as an error on your Form R submission.

In order to identify the detailed topographic quadrangle map in which your facility is located, the USGS has published an index and a catalog of topographic maps available for each state. Both the index and the catalog are available in many libraries or free of charge from the Distribution Branch of the USGS (address on following page). The *Index to Topographic and Other Map Coverage* helps you to identify the most detailed map in which your facility is located. To identify the most detailed map, follow these simple steps on how to use the index:

(1) The beginning of each index contains a map of the state, broken into numbered quadrangular sections. The numbered quadrangular sections are called general areas of interest. **Identify** the numbered section in which your facility is located.

(2) The subsequent pages of the index contain detailed maps of each general area of interest, in numerical order. **Identify** the detailed map corresponding to the numbered general area of interest identified in Step 1.

(3) Within this detailed map, **identify** the smaller quadrangular area in which your facility is located. This smaller quadrangular section is the specific area of interest. Record first the letter then the number coordinate for your specific area of interest (e.g., E4).

(4) Using the chart found on the same page as the detailed map of the general area of interest, **record** the name of the specific area of interest in which your facility is located, identified by the letter and number coordinates (e.g., Richmond).

The name of the specific area of interest and its corresponding letter and number coordinates identify the most detailed topographic quadrangle map in which your facility is located. To identify the map reference code and file number necessary to order this map, follow these simple steps for using the *Catalog of Topographic and Other Published Maps* for the state in which your facility is located:

(5) The beginning of the catalog explains the meaning of the reference code. On the pages following this explanation, there are charts listed alphabetically by the name of the specific area of interest with corresponding file numbers and map reference codes. Using the name of the specific area of interest recorded in Step 4, **identify** the file number and map reference code from the chart for the map in which your facility is located (e.g., file number 00692, map reference code 37977-E4-TF-024-00).

(6) Use the file number and map reference code to obtain the specific topographic quadrangle map in which your facility is located.

These detailed topographic quadrangle maps are available in many libraries or for purchase from the Distribution Branch of the USGS and from private map dealers. The *Catalog of Topographic and Other Published Maps* contains a list of map depository libraries and topographic map dealers for each state covered in the catalog.

To purchase a topographic quadrangle map from the USGS, you must send a written request to the Distribution Branch of the USGS, containing the file number, map reference code, the name of the city, state and zip code in which your facility is located, and payment of $2.50.

The Distribution Branch of the USGS can be reached at:

Distribution Branch of the USGS
P.O. Box 25286
Denver Federal Center
Denver, CO 80225
(303) 236-7477

ALLOW 5 WEEKS FOR DELIVERY

In addition, you may purchase a topographic quadrangle map from the USGS through a USGS Public Inquiry Office. The Public Inquiry Offices are listed for each state on the inside back cover of the *Catalog of Topographic and Other Published Maps.*

If you need help in determining your latitude and longitude, once you have the necessary map, the **National Cartographic Information Center** can provide assistance:

Western states: (303) 236-5829
Eastern states: (314) 341-0851

Please call in advance of the section 313 reporting deadline to avoid unnecessary delays.

Determining Your Facility's Latitude and Longitude

(See diagram next page.)

Once you have obtained the correct map for your facility:

(1) Mark the location of your facility on the map with a point. If your facility is large, choose a point central to the production activities of the facility. If certain structures in your facility are represented on the map, mark one of the structures with a point.

(2) Construct a small rectangle around the point with fine pencil lines connecting the nearest 2 1/2' or 5' graticules. Graticules are intersections of latitude and longitude lines that are marked on the map edge, and appear as black crosses at four points in the interior of the map.

(3) Read and record the latitude and longitude (in degrees, minutes, and seconds) for the southeast corner of the small quadrangle drawn in step two. The latitude and longitude are printed at the edges of the map.

(4) To determine the increment of latitude above the latitude line recorded in step 3,

- position the map so that you face **west;**
- place the ruler in approximately a north-south alignment, with the "0" on the latitude line recorded in step 3 with the ruler edge intersecting the point.

Without moving the ruler, read and record:

- the measurement from the latitude line to the desired point (the point distance);
- the measurement from the latitude line to the north line of the small quadrangle (the total distance).

Determine the number of seconds to be added to the latitude recorded in step 3 by using the ratio:

$$\frac{\text{Point distance}}{\text{Total distance between lines}} \times 150'' = \text{increment of latitude}$$

[Note: 150" is the number of seconds of arc for the side of the small quadrangle on a 7.5' map. If you are using a 15' map, the multiplication factor is 300" instead of 150" since each graticule is 5' of latitude or longitude.]

For example:

Point distance	=	99.5
Total distance	=	192.0
$\frac{99.5}{192.0} \times 150''$	=	77.7"
	=	01'17.7"

(60" = 1'; 77.7" = 60" + 17.7" = 01' 17.7")

Latitude in step 3	32°17'30"
Increment	+ 01'17.7"
Latitude of point	32°18'47.7"

to the nearest second = 32°18'48"

(5) To determine the increment of longitude west of the longitude line recorded in step 3,

- position the map so that you face **south**;
- place the ruler in approximately an east-west alignment with the "0" on the longitude line recorded in step 3 with the ruler edge intersecting the point.

Without moving the ruler, read and record:

- the measurement from the longitude line to the desired point (the point distance);
- the measurement from the longitude line to the west line of the small quadrangle (the total distance).

Determine the number of seconds to be added to the longitude recorded in step 3 by using the ratio:

$$\frac{\text{Point distance}}{\text{Total distance between lines}} \times 150'' = \text{increment of longitude}$$

For example:

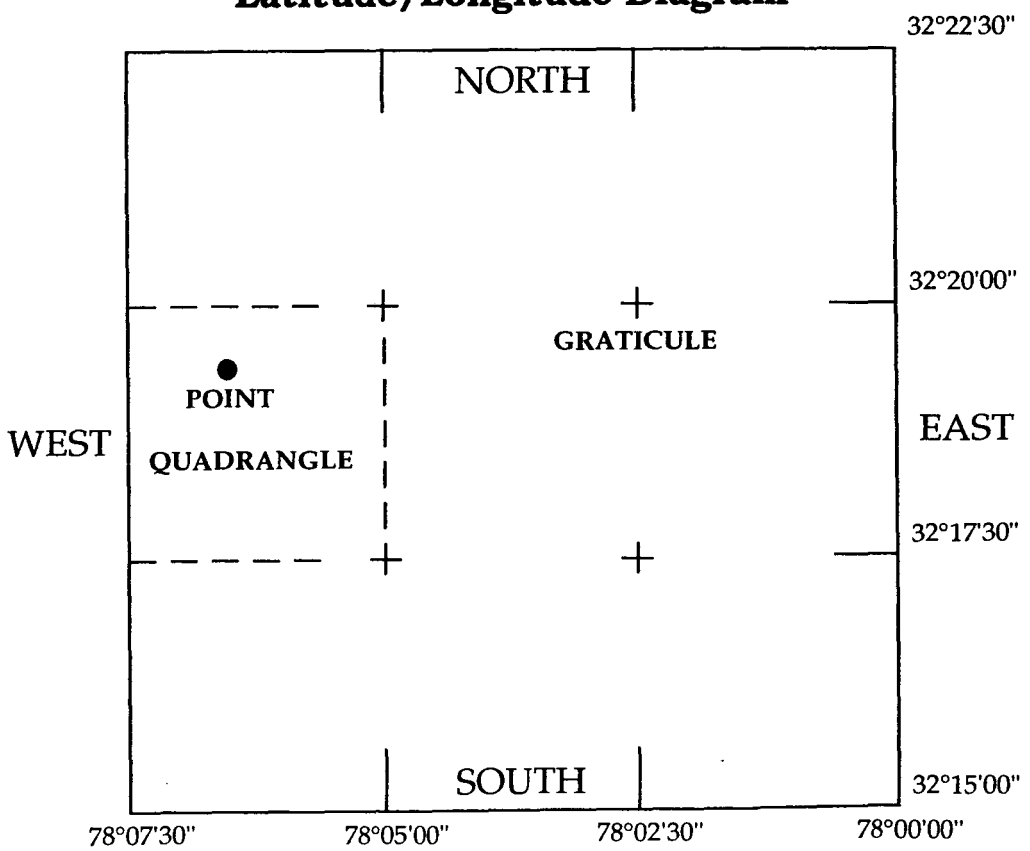
Point distance = 65.0
Total distance = 149.9

$$\frac{65.0}{149.9} \times 150'' = 65'' = 01'05''$$

(60" = 1'; 65" = 60" + 05" = 01'05")

Longitude in step 3	78°05'00"
Increment	+ 01'05"
Longitude of point	78°06'05"
to the nearest second	= 78°06'05"

Latitude/Longitude Diagram



Point: Latitude 32°18'48" North, Longitude 78°06'05" West

Note: This diagram is based on a USGS 7.5 Minute Series Topographic Map. It is not drawn to scale.

APPENDIX F. STATE DESIGNATED SECTION 313 CONTACTS

Note: Use the appropriate address for submission of Form R reports to your State. In addition, many States have additional State reporting requirements. Check with your State contact on any State requirements.

Alabama
Mr. Edward Pooles
Alabama Emergency Response Commission
Alabama Department of Environmental Management
1751 Congressman W.L. Dickinson Drive
Montgomery, AL 36109
(205) 260-2717

Alaska
Ms. Camille Stephens
Alaska State Emergency Response Commission
Department of Environmental Conservation
410 Willoughby, Suite 105
Juneau, AK 99801-1795
(907) 465-5220

American Samoa
Goipa Tausaga
American Samoa EPA
Office of the Governor
Pago Pago, AS 96799
International Number (684) 633-2304

Arizona
Mr. Daniel Roe, Acting Executive Director
Arizona Emergency Response Commission
Division of Emergency Services
5636 East McDowell Road
Phoenix, AZ 85008
(602) 231-6346

Arkansas
Mr. John Ward
Arkansas Department of Pollution Control and Ecology
P.O. Box 8913
8001 National Drive
Little Rock, AR 72219-8913
(501) 562-7444

California
Mr. Stephen Hanna
Assistance for Environmental Information
California Environmental Protection Agency
555 Capitol Mall, Suite 235
Sacramento, CA 95814
(916) 324-9924

Colorado
Winifred Bromley
Colorado Emergency Planning Commission
Colorado Department of Health
4300 Cherry Creek Drive South
Denver, CO 80222-1530
(303) 692-3434

Commonwealth of Northern Mariana Islands
Mr. Frank Russell Meecham, III
Division of Environmental Quality
P.O. Box 1304
Saipan, MP 96950
(670) 234-6984

Connecticut
SARA Title III Coordinator
Department of Environmental Protection
C/O Waste Management
79 Elm St.
Hartford, CT 06106-5127
(203) 566-4856

Delaware
Mr. Robert Pritchett
Division of Air and Waste Management
Department of Natural Resources and
Environmental Control
89 King's Highway
P.O. Box 1401
Dover, DE 19903
(302) 739-4791

District of Columbia
Ms. Pamela Thuber, Environmental Planning Specialist
Office of Emergency Preparedness
2001 14th Street, NW, 8th Floor
Washington, DC 20009
(202) 727-6161

Florida
Ms. Eve Rainey
State Emergency Response Commission
Florida Department of Community Affairs
2740 Centerview Drive
Tallahassee, FL 32399-2100
(904) 488-1472
In Florida: 800-635-7179

Georgia
Mr. Burt Langley
Georgia Emergency Response Commission
7 Martin Luther King Dr. Room 139
Atlanta, GA 30334
(404) 656-6905

Guam
Mr. Fred Castro
Guam EPA
D-107 Harmon Plaza
130 Rojas Street
Harmon, GU 96911
(671) 646-8864

Hawaii
Ms. Marsha Mealey
Hawaii State Emergency Response Commission
Hawaii State Department of Health
5 Waterfront Plaza, Suite 250C
500 Alamona Blvd.
Honolulu, HI 96813
(808) 586-4249

Idaho
Ms. Margaret Ballard
Idaho Emergency Response Commission
1109 Main St.
State House
Boise, ID 83720-7000
(208) 334-3263

Illinois
Mr. Joe Goodner
Emergency Planning Unit
Office of Chemical Safety
Illinois EPA
P.O. Box 19276
2200 Churchill Road
Springfield, IL 62794-9276
(217) 785-0830

Indiana
Mr. Tom Neltner
Indiana Department of Environmental Management
Office of Pollution Prevention Technical Assistance
100 North Senate (N-1355)
Box 6015
Indianapolis, IN 46206-6015

Iowa
Mr. Pete Hamlin
Department of Natural Resources
Wallace Building
900 East Grand Avenue
Des Moines, IA 50319
(515) 281-8852

Kansas
Mr. Jon Flint
Right-to-Know Program
Kansas Emergency Response Commission
J Street and 2 North
Building 283, Forbes Field
Topeka, KS 66620
(913) 296-1690

Kentucky
Ms. Valerie Hudson
Kentucky Department for Environmental Protection
14 Reilly Road
Frankfort, KY 40601
(502) 564-2150

Louisiana
Ms.Linda Brown
Department of Environmental Quality
P.O. Box 82263
7890 Bluebonnet
Baton Rouge, LA 70810-2263
(504) 765-0737

Maine
Ms. Rayna Leibowitz
State Emergency Response Commission
State House Station Number 72
Augusta, ME 04333
(207) 287-4080
In Maine: (800) 452-8735

Maryland
Ms.Patricia Williams
State Emergency Response Commission
Maryland Department of the Environment
Toxics Information Center
2500 Broening Highway
Baltimore, MD 21224
(410) 631-3800

Massachusetts
Ms. Suzi Peck
Massachusetts Department of Environmental Protection
Bureau of Waste Prevention
1 Winter Street
Boston, MA 02108
(617) 292-5870

Michigan
Mr. Kent Kanagey
Title III Coordinator
Michigan Department of Natural Resources
Environmental Response Division
Title III Unit
P.O. Box 30426
Lansing, MI 48909

certified mail only:
300 South Washington Square
Title III, 5th Floor
Lansing, MI 48909
(517) 373-8481

Minnesota
Mr. Steve Tomlyanovich
Minnesota Emergency Response Commission
B5 State Capitol Bldg.
75 Constitution Ave.
St Paul, MN 55155
(612) 282-5396

Mississippi
Mr. John David Burns
Mississippi Emergency Response Commission
Mississippi Emergency Management Agency
P.O. Box 4501
Jackson, MS 39296-4501

certified mail only:
1410 Riverside Drive
Jackson, MS 39202
(601) 960-9000

Missouri
Mr. Dean Martin
Missouri Department of Natural Resources
P.O. Box 176
Jefferson City, MO 65102

certified mail only:
Missouri Department of Natural Resources
2710 West Main
Jefferson City, MO 65109
(314) 526-3901

Montana
Mr. Tom Ellerhoff, Co-Chairman
Montana Emergency Response Commission
Environmental Sciences Division
Department of Health & Environmental Sciences
Capitol Station
Cogswell Building A-107
P.O. Box 200901
Helena, MT 59620-0901
(406) 444-3948

Nebraska
Mr. John Steinauer, Coordinator
State of Nebraska Department of Environmental Quality
P.O. Box 98922
Lincoln, NE 68509-8922

certified mail only:
1200 N Street, Suite 400
Lincoln, NE 68508
(402) 471-4251

Nevada
Ms. Jolaine Johnson
Bureau Chief, Chemical Hazards Management
333 W. Nye Lane
Carson City, NV 89710
(702) 687-5872

New Hampshire
Mr. George L. Iverson, Director
New Hampshire State Emergency Management Agency
Title III Program
State Office Park South
107 Pleasant Street
Concord, NH 03301
(603) 271-2231

New Jersey
Ms. Shirlee Schiffman
Department of Environmental Protection and Energy
Division of Environmental Quality, Safety, Health, and Analytical Programs
SARA Title III Section 313
Bureau of Hazardous Substances Information
401 E. State St. (CN-405)
Trenton, NJ 08625
(609)297-6714

New Mexico
Mr. Max Johnson, Title III Coordinator
New Mexico Emergency Response Commission
Chemical Safety Office, Emergency Management Bureau
P.O. Box 1628
Santa Fe, NM 87504-1628

certified mail only:
4491 Cerrillos Road
Santa Fe, NM 87504
(505) 827-9223

New York
Mr. William Miner
New York Emergency Response Commission
New York State Department Of Environmental Conservation
Bureau of Spill Prevention and Response
50 Wolf Road/Room 340
Albany, NY 12233-3510
(518)457-4107

North Carolina
Ms. Emily Kilpatrick
North Carolina Emergency Response Commission
North Carolina Division of Emergency Management
116 West Jones Street
Raleigh, NC 27603-1335
(919) 733-3865

North Dakota
Mr. Robert W. Johnston
North Dakota Emergency Response Commission
Division of Emergency Management
P.O. Box 5511
Bismarck, ND 58502-5511
(701) 224-3300

Ohio
Ms. Cindy DeWulf
Ohio EPA
Division of Air Pollution Control
1800 Watermark Drive
Columbus, OH 43215
(614) 644-3604

Oklahoma
Mr. Monty Elder
Department of Environmental Quality Support Services
1000 N.E. 10th Street
Oklahoma City, OK 73117-1212
(405) 271-7363

Oregon
Mr. Dennis Walthall
Oregon Emergency Response Commission
c/o State Fire Marshall
4760 Portland Road, N.E.
Salem, OR 97305-1760
(503) 378-3473

Pennsylvania
Mr. James Tinney
Pennsylvania Emergency Management Council
Bureau of Worker and Community Right-to-Know
Room 1503
Labor and Industry Building
7th & Forster Streets
Harrisburg, PA 17120
(717) 783-2071

Puerto Rico
Mr. Genaro Toress
Puerto Rico Emergency Response Commissioner
Title III-SARA Section 313
Puerto Rico Environmental Quality Board
Fernadèz Junco Station
P.O. Box 11488
Santurce, PR 00910

certified mail only:
Environmental Quality Board
Emergency Response and Remedial Office
National Plaza #431
Ponce de Leon Avenue
Hato Rey, PR 00917
(809) 766-8056

Rhode Island
Ms. Martha Delaney Mulcahey
Rhode Island Department of Environmental Management
Division of Air Resources
291 Promenade Street
Providence, RI 02908-5767
Attn: Toxic Release Inventory
(401) 277-2808

South Carolina
Mr. Michael Juras
South Carolina Department of Health and Environmental Control
2600 Bull Street
Columbia, SC 29201
Attn: EPCRA Reporting
(803) 935-6336

South Dakota
Ms. Lee Ann Smith, Title III Coordinator
South Dakota Emergency Response Commission
South Dakota Department of Environment and Natural Resources
Joe Foss Building
523 East Capitol
Pierre, SD 57501-3181
(605) 773-3296

Tennessee
Ms. Betty Eaves
Tennessee Emergency Response Commission
Director, Tennessee Emergency Management Agency
3041 Sidco Drive
Nashville, TN 37204
(615) 741-0001
1-800-262-3300 (in Tennessee)
1-800-258-3300 (out of state)

Texas
Ms. Becky Kurka, Supervisor
Office of Pollution Prevention and Recycling
Texas Natural Resources Conservation Commission
P.O. Box 13087
Austin, TX 78711-3087
(512) 463-7869

Utah
Mr. Steve Thirot
Utah Hazardous Chemical Emergency Response Commission
Utah Department of Environmental Quality
Division of Environmental Response and Remediation
168 North 1950 West
Salt Lake City, UT 84116-4840
(801) 536-4100

Vermont
Mr. Ray McCandless
Department of Health
108 Cherry Street
Burlington, VT 05402
(802) 8265-7730

Virginia
Mr. Roland Owens
Virginia Emergency Response Council
P.O. Box 10009
Richmond, VA 23240-0009

certified mail only:
Virginia Department of Environmental Quality
SARA Title III Program
9th Floor
629 E. Main St.
Richmond, VA 23219
(804) 762-4482

Virgin Islands
Mr. Roy E. Adams, Commissioner
Department of Planning and Natural Resources
U.S. Virgin Islands Emergency Response Commission
Title III
Nisky Center, Suite 231
Charlotte Amalie
St. Thomas, VI 00802
(809) 774-3320/Ext. 101 or 102

Washington
Ms. Idell Hansen, Supervisor
Community Right-To-Know Unit
Department of Ecology
P.O. Box 47659
Olympia, WA 98504-7659

certified mail only:
300 Desmond Road
Lacey, WA 98503
(206) 407-6727

West Virginia
Mr. Carl L. Bradford, Director
West Virginia Emergency Response Commission
West Virginia Office of Emergency Services
Main Capital Building 1, Room EB-80
Charleston, WV 25305-0360
(304) 558-5380

Wisconsin
Department of Natural Resources
101 South Webster
P.O. Box 7921
Madison, WI 53707
Attn: Russ Dunst, Toxics Coordinator
(608) 266-9255

Wyoming
Chairman
Wyoming Emergency Response Commission
Wyoming Emergency Management Agency
Department of Environmental Quality
Herschler Building 4 West
122 West 25th St.
P.O. Box 1709
Cheyenne, WY 82002
(307) 777-4900

Notes:

(1) If an Indian tribe has chosen to act independently of a state for the purpose of section 313 reporting, facilities located within that Indian community should report to the tribal SERC, or until the SERC is established, the Chief Executive Officer of the Indian tribe, as well as to EPA;
(2) Facilities located within the Territories of the Pacific should send a report to the Chief Administrator of the appropriate territory, as well as to EPA.

APPENDIX G. SECTION 313 EPA REGIONAL CONTACTS

Region 1

Pesticides & Toxics Branch
USEPA Region 1 (ATR)
One Congress Street
Boston, MA 02203
(617) 565-4502

Connecticut, Massachusetts, Maine,
New Hampshire, Rhode Island, Vermont

Region 2

Pesticides & Toxics Branch
USEPA Region 2 (MS-105)
2890 Woodbridge Avenue, Building 10
Edison, NJ 08837-3679
(908) 906-6890

New Jersey, New York, Puerto Rico, Virgin Islands

Region 3

Toxics & Pesticides Branch
USEPA Region 3 (3AT31)
841 Chestnut Street Bldg.
Philadelphia, PA 19107
(215) 597-1260

Delaware, Maryland, Pennsylvania, Virginia,
West Virginia, District of Columbia

Region 4

Pesticides & Toxics Branch
Title III Unit
USEPA Region 4
345 Courtland Street
Atlanta, GA 30365
(404) 347-1033

Alabama, Florida, Georgia, Kentucky, Mississippi,
North Carolina, South Carolina, Tennessee

Region 5

Pesticides & Toxic Substances Branch
USEPA Region 5 (SP-14J)
77 West Jackson Blvd.
Chicago, IL 60604
(312) 353-5907

Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin

Region 6

Pesticides & Toxic Substances Branch
USEPA Region 6 (6TPT)
1445 Ross Avenue
Suite 1200
Dallas, TX 75202-2733
(214) 655-8013

Arkansas, Louisiana, New Mexico, Oklahoma, Texas

Region 7

Toxics & Pesticides Branch (TOPE)
USEPA Region 7
726 Minnesota Avenue
Kansas City, KS 66101
(913) 551-7020

Iowa, Kansas, Missouri, Nebraska

Region 8

Toxic Substances Branch
USEPA Region 8 (8ART-TS)
999 18th Street
Denver, CO 80202-2405
(303) 293-1730

Colorado, Montana, North Dakota, South Dakota,
Utah, Wyoming

Region 9

Pesticides & Toxics Branch
USEPA Region 9 (A-4-3)
75 Hawthorne Street
San Francisco, CA 94105
(415) 744-1087

Arizona, California, Hawaii, Nevada, American Samoa, Guam, Commonwealth of the Northern Mariana Islands

Region 10

Pesticides & Toxic Substances Branch
USEPA Region 10 (AT083)
1200 Sixth Avenue
Seattle, WA 98101
(206) 553-4016

Alaska, Idaho, Oregon, Washington

APPENDIX H. NEWLY ADDED CHEMICALS REPORTABLE FOR THE 1994 CALENDAR YEAR

"RCRA U List Chemicals "

Chemical Name	CAS No.
Acetophenone	98-86-2
Amitrole	61-82-5
Bis(2-chloroethoxy)methane	111-91-1
1,4-Dichloro-2-butene	764-41-0
Dihydrosafrole	94-58-6
Ethylidene dichloride	75-34-3
Formic acid	64-18-6
Hexachlorophene	70-30-4
Hydrogen sulfide	7783-06-4
Malononitrile	109-77-3
Methacrylonitrile	126-98-7
Methyl chlorocarbonate	79-22-1
Methyl mercaptan	74-93-1
2-Methylpyridine	109-06-8
5-Nitro-o-toluidine	99-55-8
Paraldehyde	123-67-7
Pentachloroethane	76-01-7
Pronamide	23950-58-5
1,1,1,2-Tetrachloroethane	630-20-6
Thiram	137-26-8
Trypan blue	72-57-1
Ethylenebisdithiocarbamic acid, salts and esters	
Warfarin and salts	

The de minimis level for all of the above chemicals is 1.0% except for the following carcinogens that have a 0.1% de minimis level: Amitrole, Dihydrosafrole, and Trypan blue.

"Hydrochlorofluorocarbons (HCFCs)"

Chemical Name	Cas No.
1-Chloro-1,1-difluoroethane (HCFC-142b)	75-68-3
Chlorodifluoromethane (HCFC-22)	74-45-6
Chlorotetrafluoroethane	63938-10-3
1-Chloro-1,1,2,2-tetrafluoroethane (HCFC-124a)	354-25-6
2-Chloro-1,1,1,2-tetrafluoroethane (HCFC-124)	2837-89-0
1,1-Dichloro-1-fluoroethane (HCFC-141b)	1717-00-6
Dichlorotrifluoroethane	34077-87-7
Dichloro-1,1,2-trifluoroethane	90454-18-5
1,1-Dichloro-1,2,2-trifluoroethane (HCFC-123b)	812-04-4
1,2-Dichloro-1,1,2-trifluoroethane (HCFC-123a)	354-23-4
2,2-Dichloro-1,1,1-trifluoroethane (HCFC-123)	306-83-2

The de minimis level for all of the HCFCs is 1.0%.

APPENDIX I. SECTION 313 RELATED MATERIALS AND INFORMATION ACCESS

To receive a copy of any of the section 313 documents listed below, check the box(es) next to the desired document(s). There is no charge for any of these documents. Be sure to type your full mailing address in the space provided on this form. Send this request form to:

U.S. EPA
P.O. Box 42419
Cincinnati, OH 45242

❑ 40 CFR 372, Toxic Chemical Release Reporting; Community Right-to-Know; Final Rule

A reprint of the final section 313 rule as it appeared in the Federal Register (FR) February 16, 1988 (53 FR 4500).

❑ **Consolidated List of Chemicals Subject to Reporting Under the Act** (Title III List of Lists) (EPA 500-B-92-002)

A consolidated list of specific chemicals covered by the Emergency Planning and Community Right-to-Know Act. The list contains the chemical name, CAS Registry Number, and reporting requirement(s) to which the chemical is subject.

❑ **The Emergency Planning and Community Right-to-Know Act: Section 313 Release Reporting Requirements,** December 1991 (EPA 700-K-92-001)

This brochure alerts businesses to their reporting obligations under section 313 and assists in determining whether their facility is required to report. The brochure contains the EPA regional contacts, the list of section 313 toxic chemicals and a description of the Standard Industrial Classification (SIC) codes subject to section 313.

❑ **Supplier Notification Requirements** (EPA 560/4-91-006)

This pamphlet assists chemical suppliers who may be subject to the supplier notification requirements under section 313 of EPCRA. The pamphlet explains the supplier notification requirements, gives examples of situations which require notification, describes the trade secret provision, and contains a sample notification.

❑ **Trade Secrets Rule and Form** (53 FR 28772)

A reprint of the final rule that appeared in the *Federal Register* of July 29, 1988. This rule implements the trade secrets provision of the Emergency Planning and Community Right-to-Know Act (section 322). Includes a copy of the trade secret substantiation form.

Industry Specific Technical Guidance Documents

EPA has developed a group of smaller, individual guidance documents that target activities in industries who primarily process or otherwise use the listed toxic chemicals.

❑ **Electrodeposition of Organic Coatings,** January 1988 (EPA 560/4-88-004c)

❑ **Electroplating Operations,** January 1988 (EPA 560/4-88-004g)

❑ **Formulation of Aqueous Solutions,** March 1988 (EPA 560/4-88-004f)

❑ **Leather Tanning and Finishing Processes,** February 1988 (EPA 560/4-88-004l)

❑ **Monofilament Fiber Manufacture,** January 1988 (EPA 560/4-88-004a)

❑ **Paper and Paperboard Production,** February 1988 (EPA 560/4-88-004k)

❑ **Presswood & Laminated Wood Products Manufacturing,** March 1988 (EPA 560/4-88-004i)

❑ **Printing Operations,** January 1988 (EPA 560/4-88-004b)

❑ **Roller, Knife, and Gravure Coating Operations,** February 1988 (EPA 560/4/88/004j)

❑ **Rubber Production and Compounding,** March 1988 (EPA 560/4-88-004q)

❑ **Semiconductor Manufacture,** January 1988 (EPA 560/4-88-004e)

- ❑ **Spray Application of Organic Coatings,** January 1988 (EPA 560/4-88-004d)
- ❑ **Textile Dyeing,** February 1988 (EPA 560/4-88-004h)
- ❑ **Wood Preserving,** February 1988 (EPA 560/4-88-004p)

Please type mailing address here (Do not attach business cards)

Name/Title _____

Company Name _____

Mail Stop _____

Street Address _____

P.O. Box _____

City/State/Zip Code _____

OTHER RELEVANT SECTION 313 MATERIALS

1991 Toxics Release Inventory: Public Data Release (EPA 745-R-93-003) (May 1993)

This publication summarizes TRI data submitted for reporting year 1991 - where, how much, and which types of chemicals are being released into the environment - and provides comparisons to TRI submissions for earlier years. Extensive tables itemize releases and transfers by media, chemicals, location and industry. Available at no charge from the EPCRA Hotline (800-535-0202).

Similar reports for 1987-1989 are available for sale from the Superintendent of Documents, U.S. Government Printing Office, Washington, DC 20402-9325 (202-783-3238).

Toxic Release Inventory — On-line Database

A computerized on-line database of the toxic release inventory data is available through the National Library of Medicine's (NLM) TOXNET on-line system 24 hours a day. Other NLM files on TOXNET can provide supporting information in such areas as health hazards and emergency handling of toxic chemicals. Information on accessing the TOXNET system is available from: TRI Representative, Specialized Information Services, National Library of Medicine, 8600 Rockville Pike, Bethesda, MD 20894, (301) 496-6531, up to $37.00 per hour.

RTK-Net is an online network concerned with environmental issues, in particular, matters arising from the passage of the right-to-know provisions embodied in the EPCRA legislation. RTK-net was established by two non-profit organizations (Unison Institute and OMB Watch) to provide access to TRI, link TRI with other environmental data, and exchange information among public interest groups. RTK-net is a full-service center providing free dial in access privileges to government and industry as well, more complete database services, training and technical support, e-mail, and electronic conferences pertaining to issues such as health, activism, and environmental justice. For more information contact RTK-net, 1731 Connecticut Ave., NW, Washington, DC 20009-1146 or phone 202-797-7200. You can register on-line by modem at 202-234-8570, parameters 8,n,1, and log in as "public"

Toxic Release Inventory - CD-ROM

The CD-ROM contains the complete Toxic Release Inventory for several years, as well as Chemical Factsheets containing health and environmental effects information for TRI chemicals. User-friendly software provides the capability to search data by facility, location, chemical, SIC, and many other access points. Other features allow flexibility in printing standard and custom reports, data downloading, and calculating releases for search sets (for example, calculate average air releases for all pulp and paper manufacturers). A CD-ROM containing 1987-1991 reports will be released in Winter 1994; the current disk contains years 1987-1990. The same disc is available from GPO and NTIS, although prices differ:

From GPO (Superintendent of Documents, U.S. Government Printing Office, Washington, DC 20402-9325, 202-783-3238):

> 1987-1990 - S/N 055-000-00399-8, $28
> 1987-1991 (due March 1994) - S/N 055-000-00439-1, unpriced.

From NTIS (5285 Port Royal Road, Springfield, VA 22161, 703-487-4650):

> 1987-1990 - PB93-500742, $45.
> 1987-1991 - call for PB number and price.

Toxic Release Inventory by State - Diskettes

Diskettes containing frequently used data elements from TRI are available on diskette in dBase and Lotus formats. Accompanying documentation describes section 313 reporting requirements, and instructions for loading into dBase and lotus software. dBase and lotus software are not included. Diskettes form GPO and NTIS are the same, although the pricing formula differs between agencies. Prices and order numbers shown are for the 1990 disks; 1991 disks will be available Winter 1994. Earlier years are also available. The same data can be downloaded or ordered on disk from the GPO Federal Bulletin Board. Call GPO at 202-512-1524 for more information.

From GPO (Superintendent of Documents, U.S. Government Printing Office, Washington, DC 20402-9325, 202-783-3238):

Individual state (disks per state vary):

5.25" disk - $15/disk
3.50" disk - $21/disk

From NTIS (5285 Port Royal Road, Springfield, VA 22161, 703-487-4650):

National Set: $1980. (dBase - PB92-502350; Lotus PB92-503622)
Individual state $55/state. (dBase - PB92 - 502350; Lotus - PB92-503622)

Toxic Release Inventory- Magnetic Tapes and Cartridge

Magnetic tapes contain the complete Toxic Release Inventory for 1991. Accompanying manual includes brief overviews of Section 313 reporting requirements, a sample Form R, lists of regional and states contacts and tape layout information. The same tapes are available from GPO and NTIS, although prices differ. Updated versions are also available for earlier years.

From GPO (Superintendent of Documents, U.S. Government Printing Office, Washington, DC 20402-9325, 202-783-3238):

6250 (BPI) Density: $500.

From NTIS (5285 Port Royal Road, Springfield, VA 22161, 703-487-4650):

1600 or 6250 (BPI) Density or 3480 cartridge: $1620. (PB93 - 505873GEI)

Toxic Release Inventory 1991: Reporting Facilities Names and Addresses — Magnetic Tape

Contains the name, address, public contact, phone number, SIC code, Dun and Bradstreet number of each facility that reported under section 313 in reporting year 1991. Also includes, if applicable, parent company name and the parent company's Dun and Bradstreet number. Tapes containing data for 1987 and 1988 reporters are also available. Available from: National Technical Information Service, 5285 Port Royal Road, Springfield, VA 22161, (703) 487-4650.

Section 313 Roadmaps Database — Diskette

A database of sources of information on the toxic chemicals listed in section 313. The database, created in 1988 and updated in 1992), is intended to assist users of the toxic release inventory data in performing exposure and risk assessments of these toxic chemicals. The roadmaps system displays information, including the section 313 toxic chemicals' health and environmental effects, the applicability of federal, state, and local regulations, and monitoring data. Available from: National Technical Information Service, 5285 Port Royal Road, Springfield, VA 22161, (703) 487-4650, Document Number: PB92-501972, $195.00.

Comprehensive List of Chemicals Subject to Reporting Under the Act (Title III List of Lists)

Available as an IBM compatible disk from: The National Technical Information Service, 5285 Port Royal Road, Springfield, VA 22161, (703) 487-4650, Document Number: PB90-501479, $90.00.

The Toxic Release Inventory: Meeting the Challenge (April 1988)

This 19 minute videotape explains the toxic release reporting requirements for plant facility managers and others. State governments, local Chambers of Commerce, labor organizations, public interest groups, universities, and others may also find the video program useful and informative.
3/4 inch = $30.75; Beta = $22.95; VHS = $22.00.

To purchase, write or call:

Color Film Corporation
Video Division
770 Connecticut Avenue
Norwalk, CT 06854
(800) 882-1120

Form R: A Better Understanding

Developed by EPA Region 3, this videotape reviews the Form R and explains how to correctly fill-out the Form R. Available from: National Technical Information Service, 5285 Port Royal Road, Springfield, VA 22161, (703) 487-4650, Document number: PB90-780446, $35.00.

Chemicals in Your Community, A Citizen's Guide to the Emergency Planning and Community Right-to-Know Act, September 1988 (OSWER-88-002)

This booklet is intended to provide a general overview of the EPCRA requirements and benefits for all audiences. Part I of the booklet describes the provisions of EPCRA and Part II describes more fully the authorities and responsibilities of the groups of people affected by the law. Available through written request at no charge from:

Emergency Planning and Community
Right-to-Know Information Service
Mailcode: 5101
401 M Street, SW
Washington, DC 20460

POLLUTION PREVENTION INFORMATION

An up-to-date source of information on pollution prevention is the Pollution Prevention Information Exchange System (PIES), a computerized information network. PIES includes a directory of representatives from Federal, State, and local governments; current news on pollution prevention activities; program summaries for government agencies, public interest groups, academic institutions, trade associations, and industry; a data base of industry case studies; a calendar of conferences, training seminars, and workshops; and specialized bulletin boards dedicated to various topics. Further information on using PIES can be obtained from the PIES Technical Support Hotline, (703) 821-4800.

The Pollution Prevention Information Clearinghouse (PPIC) was established as part of EPA's response to the Pollution Prevention Act of 1990, which directed the Agency to compile information, including a database, on management, technical, and operational approaches to source reduction. PPIC provides information to the public and industries involved in conservation of natural resources and in reduction or elimination of pollutants in facilities, workplaces, and communities.

To request EPA information on pollution prevention or obtain factsheets on pollution prevention from various state programs call the PPIC reference and referral service at 202-260-1023, or fax a request to 202-260-0178, or write to PPIC at 401 M St., SW (Mail Code 3404), Washington, DC, 20460.

☆ U.S. GOVERNMENT PRINTING OFFICE: 1994-364-691

EPA
United States
Environmental Protection Agency
(7408)
Washington, DC 20460

Official Business
Penalty for Private Use
$300

NYS Dept Envir.
Bulk Storage
Certified #
P617 298 081

PERKIN ELMER

The Perkin-Elmer Corporation
Metco Division
1101 Prospect Avenue — P.O. Box 1006
Westbury, New York 11590-0201
Phone (516) 334-1300
Fax (516) 338-2477
RCA 229913

November 4, 1991

Ms. Angela Chieco
New York State Department of Environmental Conservation
Bulk Storage Data Section
Bureau of Spill Prevention and Response
50 Wolf Road, Room 326
Albany, NY 12233-3530

Dear Ms. Chieco:

As per your discussion with a member of my staff, registration is not required because our sites do not have any stationery chemical bulk storage tanks. Therefore, I am returning all paperwork to you as you requested.

Please call me if you require any further information.

Very truly yours,

Patrick A. Tighe

Patrick A. Tighe
Superintendent
Facilities Coordination

PAT:ecb
Enclosures
cc: A.B. Mazzone

NYSDEC.pwp

New York State Department of Environmental Conservation
50 Wolf Road, Albany, New York 12233

Thomas C. Jorling
Commissioner

August 1991

ATTN: METCO INC.(DUFFY AVE.PLANT)
METCO INC.(DUFFY AVE.PLANT)
325 DUFFY AVE.
HICKSVILLE, NY 11801

Re: Hazardous Substance Bulk Storage
Tank Registration
ICS Number: 1167356

Dear METCO INC.(DUFFY AVE.PLANT):

The New York State Environmental Conservation Law, Article 40, requires the registration of hazardous substance bulk storage tanks. This includes aboveground stationary tanks with a capacity of 185 gallons or more and underground tanks of any size.

Our records indicate that you were mailed a registration package in December 1988 and have not yet responded whether your site(s) is or is not regulated by the CBS regulations. The package included a cover letter, which summarized the Chemical Bulk Storage (CBS) regulations, 6 NYCRR Parts 595-597, a copy of the CBS regulations, and a registration application form.

If any of the chemicals you store are regulated under the CBS regulations, please complete the enclosed Hazardous Substance Bulk Storage application form listing the regulated tanks at your site. An instruction sheet has also been enclosed for your reference. Also, the registration fee schedule is listed in section 596.4 of the CBS regulations. Fees range from $50 to $125 per storage tank.

Please check the appropriate box on the next page and return this letter, completed application and fee (if required) within 30 days to:

NYS DEC
50 Wolf Road, Room 326
Albany, NY 12233-3530

You are strongly urged to follow-up on this matter. Failure to register may result in a fine of up to $25,000 per day, if you are found to be in violation.

ICS Number: 1167356

[ ] 1. Completed application and fee are enclosed.

[ ] 2. This site has already been registered. The CBS # is _____.

[ ] 3. Registration is not required (check all that apply):

[ ] a. Site does not store any chemicals listed in Part 597.
[X] b. Site does not have any stationary chemical bulk storage tanks.
[ ] c. Other (please specify) _____
_____.

If you have any questions, need a copy of the Chemical Bulk Storage regulations or additional CBS application forms, please call the Bulk Storage Help-line at 1-800-242-4351.

Bulk Storage Data Section
Bureau of Spill Prevention and Response

enclosures

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

INSTRUCTIONS FOR COMPLETING HAZARDOUS SUBSTANCE BULK STORAGE APPLICATION

Please type or print all items, except "signature" in Section A. This form must be completed for each regulated site containing hazardous substances. If more than 15 regulated tanks exist at a site, use additional applications to register these tanks. A site plan including Tank Numbers must also be included. **Instructions for Section B are on the reverse side.**

SECTION A

Item Name	Specific Instructions
CBS NUMBER	Enter the seven digit DEC Chemical Bulk Storage Registration Number if the site was previously registered; otherwise, leave blank.
OTHER EXISTING DEC NUMBERS	**PBS Number:** Enter the Petroleum Bulk Storage Number if the site has been registered under the Petroleum Bulk Storage Law, Article 17, Title 10 of ECL; 6 NYCRR Parts 612-614. If not applicable, write "Not Applicable". **MOSF Number:** Enter the license number if the site is currently licensed with DEC as a Major Petroleum Facility under Article 12 of the Navigation Law. If not applicable, write "Not Applicable". **SPDES Number:** Enter the number which has been assigned to a facility under the State Pollutant Discharge Elimination System, Article 17, Title 8 of ECL; 6 NYCRR Parts 750-758. If not applicable, write "Not Applicable".
TRANSACTION TYPE	
Initial/New Site:	First application for registration by the owner of a regulated site. CBS Number will be assigned by DEC.
Change of Ownership:	Application for registration by the new owner of the site being transferred. Be sure to enter the CBS Number from the existing Registration Certificate and complete all sections.
Substantial Tank Modification:	Complete this section if one of the following exists: (1) one or more new stationary tanks has been added to the site; or (2) an existing stationary tank has been replaced, reconditioned or permanently closed. In Section A, complete the Site Section, CBS Number, and provide the signature of a duly authorized officer. In Section B, fill in the entire line of information for each tank being amended.
Information Correction:	If any information changes have occurred since the initial application or the last renewal, include the corrected information in the appropriate spaces and be sure to include the CBS Number. In Section A, the signature of a duly authorized officer must be provided.
Renewal:	Application is being made for a previously registered site that has not changed ownership since the last registration. Registration Certificates for Chemical Bulk Storage sites must be renewed every two years and are not transferable. Indicate any changes that may have occurred since last renewal and provide the signature of the duly authorized officer.
GEOGRAPHICAL LOCATOR	Indicate the actual latitude and longitude for the site. This includes the degrees, minutes and seconds of the location. If known, please provide.
SITE INFORMATION	Enter the name and location (**NO** PO Boxes, please) of the site. Include any information that would assist in locating the site. For county, enter the county in which the site is located. For township, enter the geographical location, not the mailing city. Enter the site telephone number and the name of the operator at the site who is familiar with the site and the efforts of the business to comply with provisions of Article 40 of the Hazardous Substance Bulk Storage Law, 6 NYCRR Parts 595-599 of CBS Regulations.
OWNER INFORMATION	Name, address and telephone number of the company which owns the site. Federal Tax Identification Number is the number assigned by the Internal Revenue Service. It is required by New York State Department of Tax and Finance. For owner type, check the appropriate box.
MAILING CORRESPONDENCE	Enter the desired mailing name and address for correspondence (i.e. Certificates, Tank Bulletin) and the name of the contact person who is familiar with the efforts of the business to comply with the provisions of Article 40 of the Hazardous Substances Bulk Storage Law, 6 NYCRR Parts 595-599.
TYPE OF CHEMICAL SITE	Check the appropriate box(es). If other, specify the type of site in the space provided.
NAME AND OFFICIAL TITLE OF OWNER OR OWNER'S AUTHORIZED REPRESENTATIVE	An application submitted by a corporation must be signed by a principal executive officer of at least the level of vice president or his/her duly authorized representative, if such representative is responsible for the overall operation of the site. In the case of a partnership or sole proprietorship, the application must be signed by a general partner or the proprietor, respectively. In the case of a municipality, state or other public facility; the application must be signed by either a principal or executive officer, ranking elected official or other duly authorized employee.
AMOUNT ENCLOSED	For transaction types 1, 2 and 5, please indicate the enclosed fee. Make check or money order payable to NYSDEC. The fee is based on individual tank storage capacity: 550 gallons or less—$50 per storage tank, 551-1100 gallons—100 per storage tank, more than 1100 gallons—$125 per storage tanks. For the complete fee schedule, see 6 NYCRR section 596.4(a), as it is different for over 250 tanks.
SIGNATURE AND DATE	Signature of the owner or duly authorized officer is required, along with the date the application was prepared.

INSTRUCTIONS FOR COMPLETING HAZARDOUS SUBSTANCE BULK STORAGE APPLICATION

(Continued from reverse side)

SECTION B

GENERAL INSTRUCTIONS	Enter all the information (see KEY of choices for certain items, at the bottom of Section B). Use **one** complete line for each tank at the site. Enter one choice per block. Make only one entry per category, except for tank external protection, tank secondary containment, piping external protection, piping secondary containment,leak detection and spill/overfill prevention.
Item Name	**Specific Instructions**
ACTION	**1. Initial Listing:** For initial registration, renewal, or change of ownership of a site. **2. Add Tank:** For installing a new tank at a site. **3. Close/Remove Tank:** For permanently closing a tank, or conversion to non-regulated substance/use. **4. Information Correction:** If any information changes have occurred since the initial application or last renewal for any tank, include the corrected information in the appropriate spaces and be sure to include the tank number. **5. Modify Tank:** For reconditioning a tank, i.e. permanent repair and/or relining.
TANK NUMBER	Use the tank numbering system at the site. If none exists then establish one i.e. 001, 002, etc. Any combination of letters and numbers is acceptable, except"000" or duplicate tank numbers at the same site.
TANK LOCATION	See 6 NYCRR, section 596.1(c)(1), and (28) for specific definitions of aboveground and underground tanks, respectively. 1. Aboveground: Tank bottom rests on grade or pad, allowing no visual inspection. 2. Aboveground on crib, rack, or cradle: Tank bottom rests above grade or pad, allowing visual inspection. 3. Aboveground, 10% or more belowground: Aboveground less than 90% above grade, partially buried. 4. Underground: Completely covered with earth or vaulted with no access. 5. Underground, vaulted, with access: Tank in subterranean vault, accessible for inspection.
STATUS	Enter the code that describes the current operational status of the tank. If a tank is not properly closed, it may be considered temporarily out-of-service (Status 2).
INSTALLATION OR PERMANENT CLOSURE DATE	For Actions 1, 2, 4 or 5, specify the month and year the tank was completely installed. If unknown, enter 0000. For Action 3, (Closure), enter the month and year the tank was permanently closed, or converted to non-regulated substance/use.
CAPACITY	Specify the total design or maximum capacity of the tank in gallons.
TANK TYPE	If tank type is unknown, or tank is coated or painted steel, enter 1.
TANK—INTERNAL PROTECTION	Specify the type of protection provided for the tank to prevent internal corrosion.
TANK—EXTERNAL PROTECTION	Specify the type(s) of protection provided for the tank to prevent external corrosion.
TANK—SECONDARY CONTAINMENT	Refer to section 596.1(c)(21) for definition of secondary containment.
PIPING LOCATION	1. Aboveground: Piping rests on or above ground, or pad. 2. Underground: Completely covered with earth. 3. Aboveground/Underground Combination: Piping is both aboveground and underground.
PIPING TYPE	Enter the code that describes the material of construction.
PIPING—INTERNAL PROTECTION	Specify the type of protection provided for the pipe to prevent internal corrosion.
PIPING—EXTERNAL PROTECTION	Specify the type(s) of protection provided for the pipe to prevent external corrosion.
PIPING—SECONDARY CONTAINMENT	Refer to section 596.1(c)(21) for definition of secondary containment.
LEAK DETECTION	Enter the code(s) that describes the leak detection system(s) used.
SPILL/OVERFILL PREVENTION	Enter the code(s) that describes the methods/systems used for spill/overfill prevention.
SUBSTANCE STORED (CAS NO.)	Enter the CAS Number from the DEC Hazardous Substance List (6 NYCRR Part 597) for the product stored in the greatest concentration.
SUBSTANCE DESCRIPTION	Enter "1"if the substance stored is a single hazardous substance on DEC list (6 NYCRR Part 597). Enter "2" if the tank contains more than one hazardous substance on the list.
PERCENTAGE OF HAZARDOUS SUBSTANCES	Enter the total percentage, (1-100) by volume or weight, of hazardous substance(s) from DEC List (6 NYCRR Part 597) that is stored in the tank.
SUBSTANCE STORED (Common Name)	Enter the common chemical name for the substance stored corresponding to the CAS Number from the DEC Hazardous Substance List. If additional space is needed, use a separate sheet indicating tank number and substance.
TANK FEE	Enter the fee required for each tank, then use the total for each page to determine the total amount to enclose.

93-19-4 (10/90)—26c

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF WATER • BUREAU OF SPILL PREVENTION AND RESPONSE

HAZARDOUS SUBSTANCE BULK STORAGE APPLICATION

Pursuant to the Hazardous Substance Bulk Storage Law, Article 40 of ECL; and 6 NYCRR 595-599.

(Continued on Reverse Side—Please Be Sure to Complete Section B)

Please Type or Print Clearly
And Complete All Items

SECTION A—See Instructions on Cover Sheet

CBS NUMBER

Indicate Other Existing DEC Numbers, if any, for this Site:

PBS Number: _____

MOSF Number: _____

SPDES Number: _____

TRANSACTION TYPE
(Check all that apply)
NOTE: Transaction types 1, 2 and 5 require a fee.

1. ☐ Initial/New Site
2. ☐ Change of Ownership
3. ☐ Substantial Tank Modification
4. ☐ Information Correction
5. ☐ Renewal

Geographical Locator for this Site:
(if known)

LATITUDE: | | | | | | DEG MIN SEC

LONGITUDE: | | | | | | DEG MIN SEC

SITE

NAME

LOCATION (not P.O. Boxes)

LOCATION (Continued)

CITY/TOWN/VILLAGE | STATE NY | ZIP CODE

COUNTY | TOWNSHIP OR CITY

NAME OF OPERATOR AT SITE | SITE TELEPHONE NO. ( )

EMERGENCY CONTACT NAME | EMERGENCY TELEPHONE NO. ( )

OWNER

NAME

ADDRESS (Street and/or P.O. Box)

CITY | STATE | ZIP CODE

FEDERAL TAX ID NO. | OWNER TELEPHONE NUMBER ( )

TYPE OF OWNER (Check only one)

1 ☐ Private Resident 2 ☐ State Government 3 ☐ Local Government
4 ☐ Federal Government 5 ☐ Corporate/Commercial

MAILING CORRESPONDENCE

ATTENTION

NAME OF COMPANY

ADDRESS

ADDRESS

CITY/STATE/ZIP CODE

TELEPHONE NUMBER ( )

TYPE OF CHEMICAL SITE:
(Check all that apply)

A. ☐ Chemical Distributor
B. ☐ Storage Terminal
C. ☐ Retail Gasoline Sales
D. ☐ Manufacturing
E. ☐ Utility (i.e. Wastewater Treatment Plant)
F. ☐ Municipality
G. ☐ School
H. ☐ Private Residence/Apartment Building
I. ☐ Other (Specify) _____

I hereby certify under penalty of perjury that the information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

NAME OF OWNER OR AUTHORIZED REPRESENTATIVE | AMOUNT ENCLOSED $

TITLE

SIGNATURE | DATE

OFFICIAL USE ONLY

Page _____ of _____

ICS Code _____

Date Received: ___/___/___

Date Processed: ___/___/___

Amount Received $ _____

Reviewed By: _____

RETURN COMPLETED FORM, CHECK/MONEY ORDER AND SITE PLAN TO:
New York State Department of Environmental Conservation, 50 Wolf Road, Albany, New York 12233-3530 Telephone Number (518) 457-4351 or 1-800-242-4351

CBS NUMBER:

Tank Information for Hazardous Substance Bulk Storage Facility

SECTION B—See Instructions on Cover Sheet

Page ____ of ____

Action	Tank Number	Tank Location	Status	Installation or Permanent Closure Date (MO) (YR)	Capacity (Gallons)	Tank Type	Tank Internal Prot.	Tank External Prot.	Tank Secondary Containment	Piping Location	Piping Type	Piping Internal Prot.	Piping External Prot.	Piping Secondary Containment	Leak Detection	Spill/Overfill Prevention	Substance Stored (CAS Number)	Substance Description	Percent of Hazardous Substances	Substance Stored (Common Name)	Tank Fee ($)

TOTAL TANK FEE: $

KEY FOR SECTION B

ACTION
1 Initial Listing
2 Add Tank
3 Close/Remove Tank
4 Information Correction
5 Modify Tank

TANK LOCATION
1 Aboveground
2 Aboveground on crib, rack, or cradle
3 Aboveground: 10% or more below ground
4 Underground
5 Underground, vaulted, with access

STATUS
1 In service
2 Temporarily Out-of-Service
3 Closed—Removed
4 Closed—In Place
5 Tank Converted to Non-Regulated Use

TANK TYPE
1 Steel/Carbon Steel
2 Stainless Steel Alloy
3 Fiberglass Coated Steel
4 Fiberglass Reinforced Plastic (FRP)
5 Plastic
6 Equivalent Technology
9 Other*

PIPING LOCATION
0 None
1 Aboveground
2 Underground
3 Aboveground/Underground Combination

PIPING TYPE
0 None
1 Steel/Iron
2 Galvanized Steel
3 Stainless Steel Alloy
4 Fiberglass Coated Steel
5 Fiberglass Reinforced Plastic (FRP)
6 Plastic
9 Other*

INTERNAL PROTECTION: Tank/Piping
0 None
1 Epoxy Liner
2 Rubber Liner
3 Fiberglass Liner (FRP)
4 Glass Liner
9 Other*

EXTERNAL PROTECTION: Tank/Piping
0 None
1 Painted/Asphalt Coating
2 Sacrificial Anode
3 Impressed Current
4 Fiberglass
5 Jacketed
6 Wrapped (Piping)
9 Other*

SECONDARY CONTAINMENT: Tank/Piping
0 None
1 Diking
2 Vault (w/access)
3 Vault (w/o access)
4 Double-Walled
5 Synthetic Liner
6 Remote Impounding Area
7 Excavation/Trench Liner
9 Other*

LEAK DETECTION
0 None
1 Electronic
2 Vapor Well
3 Groundwater Well
4 In-tank System
5 Concrete Pad w/channels
9 Other*

SPILL/OVERFILL PREVENTION
0 None
1 Float Vent Valve
2 High Level Alarm
3 Automatic Shut-off
4 Product Level Gauge
5 Catch Basin
9 Other*

SUBSTANCE DESCRIPTION
1 Single Hazardous Substance on DEC List
2 More than one Hazardous Substance on DEC List

* If Other, please list on separate sheet including the Tank Number

New York State Department of Environmental Conservation
50 Wolf Road, Albany, New York 12233

August 1991

Thomas C. Jorling
Commissioner

ATTN: ABRAHAM TEICHER
METCO INC.(WESTBURY PLANT)
1101 PROSPECT AVE.
WESTBURY, NY 11590

Re: Hazardous Substance Bulk Storage
Tank Registration
ICS Number: 1167354

Dear ABRAHAM TEICHER:

The New York State Environmental Conservation Law, Article 40, requires the registration of hazardous substance bulk storage tanks. This includes aboveground stationary tanks with a capacity of 185 gallons or more and underground tanks of any size.

Our records indicate that you were mailed a registration package in December 1988 and have not yet responded whether your site(s) is or is not regulated by the CBS regulations. The package included a cover letter, which summarized the Chemical Bulk Storage (CBS) regulations, 6 NYCRR Parts 595-597, a copy of the CBS regulations, and a registration application form.

If any of the chemicals you store are regulated under the CBS regulations, please complete the enclosed Hazardous Substance Bulk Storage application form listing the regulated tanks at your site. An instruction sheet has also been enclosed for your reference. Also, the registration fee schedule is listed in section 596.4 of the CBS regulations. Fees range from $50 to $125 per storage tank.

Please check the appropriate box on the next page and return this letter, completed application and fee (if required) within 30 days to:

NYS DEC
50 Wolf Road, Room 326
Albany, NY 12233-3530

You are strongly urged to follow-up on this matter. Failure to register may result in a fine of up to $25,000 per day, if you are found to be in violation.

ICS Number: 1167354

[ ] 1. Completed application and fee are enclosed.

[ ] 2. This site has already been registered. The CBS # is _____.

[ ] 3. Registration is not required (check all that apply):

[ ] a. Site does not store any chemicals listed in Part 597.
[X] b. Site does not have any stationary chemical bulk storage tanks.
[ ] c. Other (please specify) _____
_____.

If you have any questions, need a copy of the Chemical Bulk Storage regulations or additional CBS application forms, please call the Bulk Storage Help-line at 1-800-242-4351.

Bulk Storage Data Section
Bureau of Spill Prevention and Response

enclosures

INSTRUCTIONS FOR COMPLETING HAZARDOUS SUBSTANCE BULK STORAGE APPLICATION

(Continued from reverse side)

SECTION B

GENERAL INSTRUCTIONS	Enter all the information (see KEY of choices for certain items, at the bottom of Section B). Use **one** complete line for each tank at the site. Enter one choice per block. Make only one entry per category, except for tank external protection, tank secondary containment, piping external protection, piping secondary containment,leak detection and spill/overfill prevention.
Item Name	**Specific Instructions**
ACTION	**1. Initial Listing:** For initial registration, renewal, or change of ownership of a site. **2. Add Tank:** For installing a new tank at a site. **3. Close/Remove Tank:** For permanently closing a tank, or conversion to non-regulated substance/use. **4. Information Correction:** If any information changes have occurred since the initial application or last renewal for any tank, include the corrected information in the appropriate spaces and be sure to include the tank number. **5. Modify Tank:** For reconditioning a tank, i.e. permanent repair and/or relining.
TANK NUMBER	Use the tank numbering system at the site. If none exists then establish one i.e. 001, 002, etc. Any combination of letters and numbers is acceptable, except"000" or duplicate tank numbers at the same site.
TANK LOCATION	See 6 NYCRR, section 596.1(c)(1), and (28) for specific definitions of aboveground and underground tanks, respectively. 1. Aboveground: Tank bottom rests on grade or pad, allowing no visual inspection. 2. Aboveground on crib, rack, or cradle: Tank bottom rests above grade or pad, allowing visual inspection. 3. Aboveground, 10% or more belowground: Aboveground less than 90% above grade, partially buried. 4. Underground: Completely covered with earth or vaulted with no access. 5. Underground, vaulted, with access: Tank in subterranean vault, accessible for inspection.
STATUS	Enter the code that describes the current operational status of the tank. If a tank is not properly closed, it may be considered temporarily out-of-service (Status 2).
INSTALLATION OR PERMANENT CLOSURE DATE	For Actions 1, 2, 4 or 5, specify the month and year the tank was completely installed. If unknown, enter 0000. For Action 3, (Closure), enter the month and year the tank was permanently closed, or converted to non-regulated substance/use.
CAPACITY	Specify the total design or maximum capacity of the tank in gallons.
TANK TYPE	If tank type is unknown, or tank is coated or painted steel, enter 1.
TANK—INTERNAL PROTECTION	Specify the type of protection provided for the tank to prevent internal corrosion.
TANK—EXTERNAL PROTECTION	Specify the type(s) of protection provided for the tank to prevent external corrosion.
TANK—SECONDARY CONTAINMENT	Refer to section 596.1(c)(21) for definition of secondary containment.
PIPING LOCATION	1. Aboveground: Piping rests on or above ground, or pad. 2. Underground: Completely covered with earth. 3. Aboveground/Underground Combination: Piping is both aboveground and underground.
PIPING TYPE	Enter the code that describes the material of construction.
PIPING—INTERNAL PROTECTION	Specify the type of protection provided for the pipe to prevent internal corrosion.
PIPING—EXTERNAL PROTECTION	Specify the type(s) of protection provided for the pipe to prevent external corrosion.
PIPING—SECONDARY CONTAINMENT	Refer to section 596.1(c)(21) for definition of secondary containment.
LEAK DETECTION	Enter the code(s) that describes the leak detection system(s) used.
SPILL/OVERFILL PREVENTION	Enter the code(s) that describes the methods/systems used for spill/overfill prevention.
SUBSTANCE STORED (CAS NO.)	Enter the CAS Number from the DEC Hazardous Substance List (6 NYCRR Part 597) for the product stored in the greatest concentration.
SUBSTANCE DESCRIPTION	Enter "1"if the substance stored is a single hazardous substance on DEC list (6 NYCRR Part 597). Enter "2" if the tank contains more than one hazardous substance on the list.
PERCENTAGE OF HAZARDOUS SUBSTANCES	Enter the total percentage, (1-100) by volume or weight, of hazardous substance(s) from DEC List (6 NYCRR Part 597) that is stored in the tank.
SUBSTANCE STORED (Common Name)	Enter the common chemical name for the substance stored corresponding to the CAS Number from the DEC Hazardous Substance List. If additional space is needed, use a separate sheet indicating tank number and substance.
TANK FEE	Enter the fee required for each tank, then use the total for each page to determine the total amount to enclose.

93-19-4 (10/90)—26c

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

INSTRUCTIONS FOR COMPLETING HAZARDOUS SUBSTANCE BULK STORAGE APPLICATION

Please type or print all items, except "signature" in Section A. This form must be completed for each regulated site containing hazardous substances. If more than 15 regulated tanks exist at a site, use additional applications to register these tanks. A site plan including Tank Numbers must also be included. **Instructions for Section B are on the reverse side.**

SECTION A

Item Name	Specific Instructions
CBS NUMBER	Enter the seven digit DEC Chemical Bulk Storage Registration Number if the site was previously registered; otherwise, leave blank.
OTHER EXISTING DEC NUMBERS	**PBS Number:** Enter the Petroleum Bulk Storage Number if the site has been registered under the Petroleum Bulk Storage Law, Article 17, Title 10 of ECL; 6 NYCRR Parts 612-614. If not applicable, write "Not Applicable". **MOSF Number:** Enter the license number if the site is currently licensed with DEC as a Major Petroleum Facility under Article 12 of the Navigation Law. If not applicable, write "Not Applicable". **SPDES Number:** Enter the number which has been assigned to a facility under the State Pollutant Discharge Elimination System, Article 17, Title 8 of ECL; 6 NYCRR Parts 750-758. If not applicable, write "Not Applicable".
TRANSACTION TYPE	
Initial/New Site:	First application for registration by the owner of a regulated site. CBS Number will be assigned by DEC.
Change of Ownership:	Application for registration by the new owner of the site being transferred. Be sure to enter the CBS Number from the existing Registration Certificate and complete all sections.
Substantial Tank Modification:	Complete this section if one of the following exists: (1) one or more new stationary tanks has been added to the site; or (2) an existing stationary tank has been replaced, reconditioned or permanently closed. In Section A, complete the Site Section, CBS Number, and provide the signature of a duly authorized officer. In Section B, fill in the entire line of information for each tank being amended.
Information Correction:	If any information changes have occurred since the initial application or the last renewal, include the corrected information in the appropriate spaces and be sure to include the CBS Number. In Section A, the signature of a duly authorized officer must be provided.
Renewal:	Application is being made for a previously registered site that has not changed ownership since the last registration. Registration Certificates for Chemical Bulk Storage sites must be renewed every two years and are not transferable. Indicate any changes that may have occurred since last renewal and provide the signature of the duly authorized officer.
GEOGRAPHICAL LOCATOR	Indicate the actual latitude and longitude for the site. This includes the degrees, minutes and seconds of the location. If known, please provide.
SITE INFORMATION	Enter the name and location (**NO** PO Boxes, please) of the site. Include any information that would assist in locating the site. For county, enter the county in which the site is located. For township, enter the geographical location, not the mailing city. Enter the site telephone number and the name of the operator at the site who is familiar with the site and the efforts of the business to comply with provisions of Article 40 of the Hazardous Substance Bulk Storage Law, 6 NYCRR Parts 595-599 of CBS Regulations.
OWNER INFORMATION	Name, address and telephone number of the company which owns the site. Federal Tax Identification Number is the number assigned by the Internal Revenue Service. It is required by New York State Department of Tax and Finance. For owner type, check the appropriate box.
MAILING CORRESPONDENCE	Enter the desired mailing name and address for correspondence (i.e. Certificates, Tank Bulletin) and the name of the contact person who is familiar with the efforts of the business to comply with the provisions of Article 40 of the Hazardous Substances Bulk Storage Law, 6 NYCRR Parts 595-599.
TYPE OF CHEMICAL SITE	Check the appropriate box(es). If other, specify the type of site in the space provided.
NAME AND OFFICIAL TITLE OF OWNER OR OWNER'S AUTHORIZED REPRESENTATIVE	An application submitted by a corporation must be signed by a principal executive officer of at least the level of vice president or his/her duly authorized representative, if such representative is responsible for the overall operation of the site. In the case of a partnership or sole proprietorship, the application must be signed by a general partner or the proprietor, respectively. In the case of a municipality, state or other public facility, the application must be signed by either a principal or executive officer, ranking elected official or other duly authorized employee.
AMOUNT ENCLOSED	For transaction types 1, 2 and 5, please indicate the enclosed fee. Make check or money order payable to NYSDEC. The fee is based on individual tank storage capacity: 550 gallons or less—$50 per storage tank, 551-1100 gallons—100 per storage tank, more than 1100 gallons—$125 per storage tanks. For the complete fee schedule, see 6 NYCRR section 596.4(a), as it is different for over 250 tanks.
SIGNATURE AND DATE	Signature of the owner or duly authorized officer is required, along with the date the application was prepared.

93-19-4 (10/90)—26c

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF WATER • BUREAU OF SPILL PREVENTION AND RESPONSE

HAZARDOUS SUBSTANCE BULK STORAGE APPLICATION

Pursuant to the Hazardous Substance Bulk Storage Law, Article 40 of ECL; and 6 NYCRR 595-599.

(Continued on Reverse Side—Please Be Sure to Complete Section B)

Please Type or Print Clearly
And Complete All Items

SECTION A—See Instructions on Cover Sheet

CBS NUMBER

Indicate Other Existing DEC Numbers, if any, for this Site:

PBS Number: _____

MOSF Number: _____

SPDES Number: _____

TRANSACTION TYPE
(Check all that apply)
NOTE: Transaction types 1, 2 and 5 require a fee.

1. ☐ Initial/New Site
2. ☐ Change of Ownership
3. ☐ Substantial Tank Modification
4. ☐ Information Correction
5. ☐ Renewal

Geographical Locator for this Site:
(if known)

LATITUDE: | | | | | |
DEG MIN SEC

LONGITUDE: | | | | | |
DEG MIN SEC

SITE

NAME

LOCATION (not P.O. Boxes)

LOCATION (Continued)

CITY/TOWN/VILLAGE | STATE NY | ZIP CODE

COUNTY | TOWNSHIP OR CITY

NAME OF OPERATOR AT SITE | SITE TELEPHONE NO. ( )

EMERGENCY CONTACT NAME | EMERGENCY TELEPHONE NO. ( )

OWNER

NAME

ADDRESS (Street and/or P.O. Box)

CITY | STATE | ZIP CODE

FEDERAL TAX ID NO. | OWNER TELEPHONE NUMBER ( )

TYPE OF OWNER (Check only one)
1 ☐ Private Resident 2 ☐ State Government 3 ☐ Local Government
4 ☐ Federal Government 5 ☐ Corporate/Commercial

MAILING CORRESPONDENCE

ATTENTION

NAME OF COMPANY

ADDRESS

ADDRESS

CITY/STATE/ZIP CODE

TELEPHONE NUMBER ( )

TYPE OF CHEMICAL SITE:
(Check all that apply)

A. ☐ Chemical Distributor
B. ☐ Storage Terminal
C. ☐ Retail Gasoline Sales
D. ☐ Manufacturing
E. ☐ Utility (i.e. Wastewater Treatment Plant)
F. ☐ Municipality
G. ☐ School
H. ☐ Private Residence/Apartment Building
I. ☐ Other (Specify) _____

I hereby certify under penalty of perjury that the information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

NAME OF OWNER OR AUTHORIZED REPRESENTATIVE | AMOUNT ENCLOSED $

TITLE

SIGNATURE | DATE

OFFICIAL USE ONLY

Page _____ of _____

ICS Code _____

Date Received: ___/___/___

Date Processed: ___/___/___

Amount Received $ _____

Reviewed By: _____

RETURN COMPLETED FORM, CHECK/MONEY ORDER AND SITE PLAN TO:
New York State Department of Environmental Conservation, 50 Wolf Road, Albany, New York 12233-3530 Telephone Number (518) 457-4351 or 1-800-242-4351

CBS NUMBER:

Tank Information for Hazardous Substance Bulk Storage Facility

SECTION B—See Instructions on Cover Sheet

Page ____ of ____

Action	Tank Number	Tank Location	Status	Installation or Permanent Closure Date (MO) (YR)	Capacity (Gallons)	Tank Type	Tank Internal Prot.	Tank External Prot.	Tank Secondary Containment	Piping Location	Piping Type	Piping Internal Prot.	Piping External Prot.	Piping Secondary Containment	Leak Detection	Spill/Overfill Prevention	Substance Stored (CAS Number)	Substance Description	Percent of Hazardous Substances	Substance Stored (Common Name)	Tank Fee ($)

TOTAL TANK FEE: $

KEY FOR SECTION B

ACTION
1 Initial Listing
2 Add Tank
3 Close/Remove Tank
4 Information Correction
5 Modify Tank

TANK LOCATION
1 Aboveground
2 Aboveground on crib, rack, or cradle
3 Aboveground: 10% or more below ground
4 Underground
5 Underground, vaulted, with access

STATUS
1 In service
2 Temporarily Out-of-Service
3 Closed—Removed
4 Closed—In Place
5 Tank Converted to Non-Regulated Use

TANK TYPE
1 Steel/Carbon Steel
2 Stainless Steel Alloy
3 Fiberglass Coated Steel
4 Fiberglass Reinforced Plastic (FRP)
5 Plastic
6 Equivalent Technology
9 Other*

PIPING LOCATION
0 None
1 Aboveground
2 Underground
3 Aboveground/Underground Combination

PIPING TYPE
0 None
1 Steel/Iron
2 Galvanized Steel
3 Stainless Steel Alloy
4 Fiberglass Coated Steel
5 Fiberglass Reinforced Plastic (FRP)
6 Plastic
9 Other*

INTERNAL PROTECTION: Tank/Piping
0 None
1 Epoxy Liner
2 Rubber Liner
3 Fiberglass Liner (FRP)
4 Glass Liner
9 Other*

EXTERNAL PROTECTION: Tank/Piping
0 None
1 Painted/Asphalt Coating
2 Sacrificial Anode
3 Impressed Current
4 Fiberglass
5 Jacketed
6 Wrapped (Piping)
9 Other*

SECONDARY CONTAINMENT: Tank/Piping
0 None
1 Diking
2 Vault (w/access)
3 Vault (w/o access)
4 Double-Walled
5 Synthetic Liner
6 Remote Impounding Area
7 Excavation/Trench Liner
9 Other*

LEAK DETECTION
0 None
1 Electronic
2 Vapor Well
3 Groundwater Well
4 In-tank System
5 Concrete Pad w/channels
9 Other*

SPILL/OVERFILL PREVENTION
0 None
1 Float Vent Valve
2 High Level Alarm
3 Automatic Shut-off
4 Product Level Gauge
5 Catch Basin
9 Other*

SUBSTANCE DESCRIPTION
1 Single Hazardous Substance on DEC List
2 More than one Hazardous Substance on DEC List

* If Other, please list on separate sheet including the Tank Number

Rec'd 9/27 8 45 Am Pat

TO: PAT TIGHE FAX 516-334-1938

FROM: R.T.Podlaski

Subject: Miller Place MSDS

The following are questions I have regarding the package prepared by your office for the upcoming IH survey of the Miller place facility:

The vendor MSDS booklet contains a total of 126 MSDS

1. Is MSDS # 7 Stainless Steel 316,316L,317,317L,410,410S, 301,302,304,304L,305,309,310,321
   ARE THESE POWDERS?

2. MSDS #9 (ALUMINIUM ALLOYS) was stapled with the pages out of order.
3. MSDS #10 COBALT OXIDE
   What is the index number on the Miller place listing?

4. MSDS #12 CALCINED ALUMINIA
   What is the correct index number from the Miller place listing?

5. MSDS #14 Is copper shot a powder?

6. MSDS #15 MONEL
   What is the correct index number on the Miller place listing?

7. MSDS # 17 MIXTURE ALLOYS 2011 6262
   What is the correctr index number?

8. MSDS #1• ALITHALITE AL/Li
   What is the Index Number?

9. MSDS 19 Remelt ingot
   IS this a powder? Is this a solid. Is it grinded?

10. MSDS #20 WELDING WIRE
    WHY IS THIS PROVIDED?

11. MSDS #22 Copper Alloys
    Are These powders?

12. MSDS #23 STAINLESS STEEL
    This is the same MSDS as #7

13. MSDS #34 GW 427 Graphite disperion in water
    Is this a processes material? What is the index number
14. MSDS 35 RULON
    WHAT IS THE INDEX NUMBER

15. MSDS #37 KEROSENE What is the index number
16. MSDS #38 NAPHTHALENE What is the index number?
17. MSDS #39 WHAT IS THE PRODUCT NAME Cant read copy
18. MSDS #40 M-pyrol What is the index number?
19. MSDS #49 NO NAME LISTED ARE THESE POWDERS?
Page reads section 2 HAZARDOUS INGREDIENTS
20. MSDS #55 LACQUER What is the index Number?
21. MSDS #56 NEODYMIUM What is the index number
22. MSDS 57 BASTNASITE What is the index niumber
23. MSDS #62 cerium oxide was missing in one of the 2 books
24. MSDS #63 glass nodules Are these powders
25. MSDS #69 Cant read name of material on MSDSA
26. MSDS #70 Stainless steel powder Same as MSDS #5

27. MSDS 72 Zinc alloy Same as MSDS #67
28. MSDS #74 Zinc Aluminium Is this a powder?
29. MSDS #77 Cobalt oxide same as MSDS #10
30. MSDS 87 Ni/ Chrominium Same as MSDS # 84
31. MSDS 88 Nickel chrominium Same as MSDS # 80
32 MSDS 89 same as # 83 Nickel powder
33. MSDS # 94 White alumina same as # 91
34. MSDS #99 BORON what is the index number?
35. MSDS 105 same as 103 Tungsten carbide with cobalt
36. MSDS 107 Strene acrlic binder What is the index number?
37. MSDS 114 Brown aluminum powder What is the index number?
38. MSDS 121 same as 115 \\crushed nickel
39. MSDS 122 same as 121 and 115
40. MSDS Calcined clay was missing page one in one of the two books
41. MSDS 124 Brass powder What is the index number?

The followong index numbers on the miller place listing I could not relate to a MASDAS

Numbers 4, 6, 7, 9,29,34,35,36,38,39,41,
,44,45,64,65,71,75,76,78,79,80,81,83,85,87,88,89,90,
91,92,95,97,98,99,101,106,107,108,111,114,115,117
118,119,120,121,123,124.125,126,
128,133,137,140,141,142,147,148,153,165

Please call me as soon as possible to discuss this

Rick Podlaski

Working with Ores Containing Naturally Occurring Radioactive Materials

J Hipkin and P V Shaw

NRPB, Northern Centre
Hospital Lane, Cookridge, Leeds LS16 6RW, UK
Email Peter.Shaw@nrpb.org.uk

Introduction

A variety of ores and minerals that contain the naturally occurring radioactive material arising from the presence of thorium and uranium are processed in factories that have nothing to do with the nuclear power industry. These include phosphate rock, titanium dioxide bearing ores, rare earths and materials containing compounds of zirconium. This paper draws attention to the radiological protection problems associated with the use of these materials and their by-products with particular focus on keeping exposures as low as reasonably achievable (ALARA).

The materials

A list of the ores considered in this paper, together with typical activity concentrations, is given in Table 1. The activity concentrations can vary, sometimes quite widely, so the values given are only for guidance. Ores are, more often than not, subjected to purification processes before being made commercially available. Depending on the process, this may upset the equilibrium naturally present in the ore bed. The list is not exhaustive.

Table 1. Ores containing naturally occurring radioactive materials

Ore	Main constituent	Typical active concentrations ($kBq\ kg^{-1}$)	
		Thorium-232	Uranium-238
Phosphate rock	Calcium phosphate	0.1	1.5
Ilmenite	Iron titanium oxide	1	2
Rutile	Titanium dioxide	0.2	0.2
Rare earth concentrate	Cerium oxide	5	0.1
Baddeleyite	Zirconium oxide	1	10
Zircon	Zirconium silicate	0.6	3
Pyrochlore	Niobium oxide	80	10
Monazite	Cerium phosphate	300	40

The presence of radioactive materials in these ores can be detected with portable radiation monitoring equipment, especially when bulk material is present and with the possible exception of the rutile, ilmenite and phosphate rock, the ores pose a degree of external hazard. All of them pose a degree of internal hazard, particularly by inhalation.

In some cases the industrial processing of the ores causes some of the radioactive material to become concentrated in deposits and scales. In processes designed to remove impurities, radioactive materials tend to become concentrated in waste streams and in by-products; this is particularly true of the isotopes of radium. Polonium and, to a lesser extent, lead are concentrated in the fume from high temperature processes because of their volatility. Thus, materials are formed that are potentially more important from a radiological protection point of view than their sources. This is discussed more fully below.

The processes

Phosphate rock

This is the major commercial source of phosphoric acid and of phosphate-derived material such as fertilisers and detergents. Phosphoric acid is made by attacking the raw material with sulphuric acid. The by-product gypsum has radium contamination at similar concentrations to that in the phosphate rock. Uranium-238 tends either to stay in solution with the acid or be released with liquid effluent. The major radiological problem in this process is, however, from radium rich scales which form in parts of the process, such as in filters, tanks and pipework. The concentration of radium-226 can easily exceed 100 kBq kg^{-1} causing high levels of contamination and significant dose rates. Radiation exposures have been kept as low as reasonably achievable through isolation and containment, and the prudent use of protective clothing and good working practices.

European interest in this process has largely now waned as the tendency is for the ore producing country to process the rock and sell the phosphoric acid. The uranium content of the phosphoric acid may still be of concern from a waste disposal viewpoint.

Ilmenite and Rutile

These are the major sources of the pigment material titanium dioxide. Two processes are still operational within Europe. A sulphuric acid digestion is similar in principal to that described above for phosphate rock and has similar attendant problems of radium rich scales. Here, however, radium-226 concentration in excess of 300 kBq kg^{-1} have been found. Again, judicial use of personal protective clothing and good working practices combine to keep exposures low.

The second process is known as the Kroll process. In this, the purer rutile or ilmenites that have been concentrated by the removal of iron, are chlorinated at high temperatures. Fractional distillation is then used to collect titanium tetrachloride, from which a pure titanium dioxide can be made. The major waste streams have radioactive material that is slightly more concentrated than the feed stocks. This process also gives rise to radium rich scales, but at concentrations less than the two previous examples and much more localised. Similar techniques are successful in keeping exposures low.

Rare earth concentrate

The major use of this material is in glass polishing where it is much more effective than the traditional rouge. It is also used as an additive in the glass industry. In both cases the processing is simple and by-products and waste streams are of little radiological consequence. Inhalation of dust is the main source of exposure. The manufacturing process of the glass polishing compound is reasonably continuous and dust exposure can be chronic. Even where the plant is designed to minimise dust by automatic transfer systems, airborne dust levels have been of concern. The methods for the introduction of the raw material into the plant and the packaging of the product have been especially problematical. Other spills contribute to the problems and the eagerness of the workers to get on with the job has sometimes led to their not wearing the breathing protection that they have been provided with and trained to use.

The industry is keen to find a material with a lower thorium content, partly to avoid the radiological protection problems but also because a traditional source is currently coming to an end. One very promising source from the Far East has been found with a thorium content some ten times less than that given in Table 1. Caution must however be exercised in these choices and the following experience is related to emphasise this. Seventeen one tonne bags of this source were obtained for trial processing. Sixteen of these gave analyses for thorium consistent with the low level mentioned above. One bag, however, had a material with a thorium content of 25 kBq kg^{-1}. Fortunately this was discovered when a high external gamma dose rate (20 _ Sv h^{-1}) was found close to this bag before it was processed.

Because glass polishing normally requires small amounts of the material, exposures even under the sloppiest of conditions are very small. There is no UK experience of large-scale use though this is theoretically possible and would give rise to similar radiological problems to those in the manufacturing process.

Baddeleyite and Zircon

The excellent metallurgical properties of zirconium, plus the refractory and other properties of zirconia, make the processing of these materials much more widespread than those mentioned above. Processes include a high temperature treatment, chemical purification, manufacture of refractory bricks, nozzles and dielectric materials. The materials are also used in ceramic glazes and in high temperature casting.

To keep the issues in focus, what follows concentrates on the more important radiological protection aspects. Where bulk materials are stored an external gamma dose rate of about 2 _Sv h^{-1} and 6 _Sv h^{-1} will exist for zircon and baddeleyite, respectively. While these are not excessive, simple precautions such as segregation are appropriate to keep exposures as low as reasonable achievable.

When these materials are moved or otherwise manipulated there is a potential for dust levels to increase and for inhalation of radioactive material to be an issue. Control techniques typically include ventilation and local extraction to keep dust levels within manageable proportions. Experience to date indicates that this is not always totally effective and the use of respiratory protective equipment such a dust masks, respirators or powered face masks are necessary in some cases to keep exposures as low as reasonably achievable.

An interesting extra dimension is present when the material is heat treated, for this drives off the more volatile radioelements, polonium and lead in particular. These then tend to deposit in the cooler parts of effluent ducting and in bag houses or precipitators. Polonium-210 concentrations can exceed 600 kBq kg^{-1}. These deposits do not give rise to external dose rates but are a potential source of inhalation. The main problem, however, is disposal.

Finally the authors have recently become aware of a process involving the manufacture of high purity zirconium compounds from zircon sands. The radionuclides are mostly removed and appear in the liquid chemical effluent, usually at quite low concentrations. At one time, this effluent was passed through an ion exchange treatment plant and this gave rise to considerable concentration effects within the pipes and vessels of this plant. A sample from the bottom of a large acid tank had a radium-226 concentration of over 5000 kBq kg^{-1}. Dose rates of up to 400 _Sv h^{-1} were measured around the tank; in a nearby workshop a dose rate of 30 _Sv h^{-1} was measured. Fortunately internal exposure has not been an issue because the material was effectively sealed within the column. The decommissioning of the plant and the disposal of the waste are now the main issues.

Pyrochlore and monazite

These are briefly mentioned here out of historical interest because there are currently no UK factories using either of these materials. Their importance from a radiological point of view lies in the very much greater activity concentrations present in these materials than in those considered above. Because of this, external gamma dose rates can be relatively high and both inhalation and ingestion problems are much greater.

Others

There are many materials not mentioned above that are relatively rich in their activity content. Some of these, such as pitchblende, uraninite and davidite, are important sources of uranium for the nuclear industry. Their treatment is not considered further here except to say that the radiological issues will be similar to those encountered with pyrochlore and monazite. Materials may also be encountered where there is a slight enrichment of radioactive material. Some sources of bauxite provide an example of this.

Radioactive materials may also be found in the by-products of the processing of materials that themselves had elevated activity. Calcium chloride, a by-product of the phosphate industry, rare earth salts prepared from monazite (where the purification has been poor), a tantalum rich powder, a ferro-zirconium silicate are all examples of this. The further treatment of bulk quantities of these materials could give rise to further radiological consequences. The lesson to be learned from this is that vigilance must be exercised over source materials if ALARA is to be achieved.

Radiological issues

In the UK, work with radioactive materials has been subject to the Ionising Radiation Regulations 1985[1]. These Regulations have been deemed to apply to work with materials such as ores, where occupational exposures might exceed 5 mSv effective dose per year. Doses to workers have been found to be typically in the range 0–5 mSv per year, although in some cases annual doses have been 10 mSv or more per year[2, 3, 4]. Where doses have been high, internal exposure from the inhalation of dust has been the dominant exposure pathway.

As a consequence of the European Basic Safety Standards Directive[5], these regulations are to be revised[6] and the 5 mSv per year „application level" will be reduced to 1 mSv per year. At the same time, adoption of the most recent ICRP dose coefficients for internal radiation exposure[7] will mean estimated radiation doses from the inhalation of dust will be substantially reduced – by up to factor of 10 or more in some cases.

Some of the practical effects of these changes are:

a) exposures from inhalation of dust, often the dominant exposure pathway in the past, are expected to be of a similar magnitude to those from external exposure, except where very high levels of airborne dust are present;

b) for many of the materials described, estimated annual doses from external radiation exceed 1 mSv per year if continuous exposure is assumed. Consequently, it is important that dose estimates are based on realistic assumptions regarding work patterns and occupancy Even then, it is expected that more use will be made of personal dosemeters (at least for trial periods) to assess external doses;

c) to date, measurements have indicated that radon concentrations have not reached significant levels, even where quite high concentrations of radium-226 are present. In future, however, relatively low levels of radon emanating from ores may be significant in terms of whether the work is subject to the revised regulations. The passive etched-track detectors (PADC or Cr-39) traditionally used for radon measurements may not be sensitive enough detect these low levels.

d) in trying to assess annual doses as low as 1 mSv per year from natural radionuclides, the level of background radiation is an important consideration. Representative background measurements of gamma dose rate and, in particular, *indoor* radon concentrations are required; and

e) exposure from ingestion of material is expected to remain an insignificant exposure route except where high activity concentrations, such as in radium rich scales, are encountered.

Processes currently subject to the Ionising Radiations Regulations 1985 will, therefore, need to re-assess the radiological hazard in light of the revised regulations. It is also expected that a number of processes currently exempted from the requirements of the regulations will need to assess whether this will still be the case in future. In both cases, increased attention to external exposure and radon emanation will be necessary.

Those processes that are subject to the regulations are expected to address the same requirements as practices involving artificial sources, including that of ALARA. In practice, a flexible approach to radiation protection is required which takes into account both the scale of the operation and the activity concentrations of the materials present, for example:

a) the materials with lower activity concentrations give rise to modest dose rates (typically a few microsieverts per hour) even at the surface. Dose restriction usually relies on discouraging access, for example by storing materials in mostly unoccupied areas. Physical barriers and warning signs are typically reserved for areas containing scales and other materials with greatly enhanced activity concentrations;

b) the control of inhalation doses in large ore processing facilities is based on the industrial hygiene principles that are applied to airborne dust in general. Engineering controls are the favoured option; working procedures and, finally, respiratory protective equipment being considered only where further engineering controls are not reasonably practicable;

c) the complete containment of material is often impractical, especially where large quantities of low activity concentration ores and minerals are involved. In such cases, spills and the spread of materials outside the area are often of no radiological significance, unless substantial and persistent airborne dust levels result. The usual radiological controls applied to „surface contamination" only become meaningful where higher activity concentration materials are present; and

d) worker training and information is particularly important to support the introduction of local rules and explain the precautions therein.

Summary

1. This paper gives some indication of the variety of materials and an even wider variety of processes that involve natural radioactivity. The problems associated with radium scales demonstrate that vigilance is needed wherever there is large scale processing of feeds that contain even small concentrations of

radioactive materials. This is reinforced by the recent discovery of a process in which the concentration of radioactive material had gone unnoticed for many years.

2. The impending changes to UK regulations brought about by the implementation of the European Basic Safety Standards Directive will require that the occupational radiation exposures associated with the processes described will need to be re-assessed. It is expected that a number of processes that are currently exempt from the Regulations will need to reassess their position.

3. The changes in internal radiation dose coefficients will significantly reduce the importance of the dust inhalation pathway. Processes giving rise to worker doses of more than 1 mSv will be subject to the regulations. At this level of exposure, external radiation, dust inhalation, and inhalation of radon may all be significant pathways. Dose estimates based on realistic assumptions, together with an increased use of personal dosemeters (external radiation) and radon gas measurements to directly assess occupational exposures, are anticipated. In assessing these exposures, careful subtraction of natural background is an important consideration.

4. A flexible approach to the regulation of these processes, and to the ALARA principle in particular, is often required. The system of protection needs to be practical, taking into account both the activity concentration of the material and the scale of the process.

References

1. The Ionising Radiation regulations 1985 (London, HMSO)
2. Hipkin, J and Paynter, R A. Radiation Exposure to the workforce from naturally occurring radioactivity in industrial processes. Rad. Prot. Dos. Vol. 36 No. 2/4 pp 97-100 (1991)
3. Hipkin, J and Shaw, P V. Workplace exposure to ionising radiation in the United Kingdom from the use of naturally occurring radioactive materials. Proceedings of the International symposium on radiological problems with natural radioactivity in the Non-Nuclear Industry, Amsterdam 1997
4. Smith, D M and Shaw P V. Radiation protection issues associated with the processing of mineral sands in the UK. Proceedings of NORM II, Second international symposium on the treatment of naturally occurring radioactive materials, Krefeld, Germany, 1998
5. EU Directive 96/29 Euratom of the Council of May 13, 1996 laying down the basic safety standards for the protection of health of workers and the general public against the dangers arising from ionising radiation. Official Journal of the European Communities, 39, No. L159/1 (1996)
6. HSC Consultative Document: Proposal for revised Ionising Radiations Regulations and Approved Code of Practice, HSE Books (1998)
7. ICRP. Dose coefficients for intakes of radionuclides by workers. ICRP Publication 68. Ann. ICRP, 24, No. 4 (1994)

SULZER METCO

Sulzer Metco (Westbury) Inc.
325 Duffy Avenue
Hicksville, NY 11801
Phone: (516) 338-2550
Fax: (516) 338-2551

Telefax

Place,date. Duffy Ave October 278 1994

To: Laura
Sulzer Metco(Westbury)Inc
Fax 338-2336

From: Carolyn
Sulzer Metco(Westbury)Inc
Duffy Ave Operations
Phone (516)338-2505
Fax (516)338-2551

Total Pages: 10

Re:Material Safety Data Sheets

Dear Laura,

As you requested

Item#	Manufacturer	Product	Number of Page
1	Exxon Chemical Co	Actrel 3349L (Cleaner)	5
2	Process Research Pr	B1361(Lubricating Oil)	2
3	Precision Finishing	Chemtrol 108(Compound	2

MATERIAL SAFETY DATA SHEET

EXXON CHEMICAL AMERICAS, P.O. BOX 3272, HOUSTON, TEXAS 77001
A Division of EXXON CHEMICAL COMPANY, A Division of EXXON CORPORATION

ACTREL 3349L CLEANER

DATE PREPARED: JUN 8, 1992
MSDS NO.: 92887640

SECTION 1 PRODUCT IDENTIFICATION & EMERGENCY INFORMATION

PRODUCT NAME: ACTREL 3349L Cleaner

CHEMICAL NAME:
Petroleum Hydrocarbon CAS 64742-48-9

CHEMICAL FAMILY:
Aliphatic Hydrocarbon

PRODUCT DESCRIPTION:
Clear colorless liquid.

EMERGENCY TELEPHONE NUMBERS: EXXON CHEMICAL AMERICAS 713-870-6000
CHEMTREC 800-424-9300

SECTION 2 HAZARDOUS INGREDIENT INFORMATION

This product is hazardous as defined in 29 CFR1910.1200.

OSHA HAZARD
Combustible

For additional information see Section 3.

SECTION 3 HEALTH INFORMATION & PROTECTION

NATURE OF HAZARD

EYE CONTACT:
Slightly irritating but does not injure eye tissue.

SKIN CONTACT:
Frequent or prolonged contact may irritate and cause dermatitis.
Low order of toxicity.
Skin contact may aggravate an existing dermatitis condition.

INHALATION:
High vapor/aerosol concentrations (greater than approximately 1000 ppm) are irritating to the eyes and the respiratory tract, may cause headaches, dizziness, anesthesia, drowsiness, unconsciousness, and other central nervous system effects, including death.

INGESTION:
Small amounts of this product aspirated into the respiratory system during ingestion or vomiting may cause mild to severe pulmonary injury, possibly progressing to death.
Minimal toxicity.

FIRST AID

EYE CONTACT:
Flush eyes with large amounts of water until irritation subsides. If irritation persists, get medical attention.

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EXXON CHEMICAL AMERICAS, P.O. BOX 3272, HOUSTON, TEXAS 77001
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SKIN CONTACT:
Flush with large amounts of water; use soap if available.
Remove grossly contaminated clothing, including shoes, and launder before reuse.

INHALATION:
Using proper respiratory protection, immediately remove the affected victim from exposure. Administer artificial respiration if breathing is stopped. Keep at rest. Call for prompt medical attention.

INGESTION:
If swallowed, DO NOT induce vomiting. Keep at rest. Get prompt medical attention.

ACUTE TOXICITY DATA IS AVAILABLE UPON REQUEST.

WORKPLACE EXPOSURE LIMITS

EXXON RECOMMENDS THE FOLLOWING OCCUPATIONAL EXPOSURE LIMITS:
300 ppm total hydrocarbon based on composition.

PRECAUTIONS

SPECIAL PRECAUTIONS:
Health studies have shown that many petroleum hydrocarbons pose potential human health risks which may vary from person to person. As a precaution, exposure to liquids, vapors, mists or fumes should be minimized.

PERSONAL PROTECTION:
For open systems where contact is likely, wear safety glasses with side shields, long sleeves, and chemical resistant gloves.
Where contact may occur, wear safety glasses with side shields.
Where concentrations in air may exceed the limits given in this Section and engineering, work practice or other means of exposure reduction are not adequate, NIOSH/MSHA approved respirators may be necessary to prevent overexposure by inhalation.

VENTILATION:
The use of mechanical dilution ventilation is recommended whenever this product is used in a confined space, is heated above ambient temperatures, or is agitated.

SECTION 4 FIRE & EXPLOSION HAZARD

FLASHPOINT: 120 Deg F. METHOD: TCC D-56 NOTE: Minimum
FLAMMABLE LIMITS: LEL: 1.3 UEL: 9.8
AUTOIGNITION TEMPERATURE: 660 Deg F. NOTE: Greater than;ASTM D 2155

GENERAL HAZARD:
Combustible Liquid, can form combustible mixtures at temperatures at or above the flashpoint.
Static Discharge, material can accumulate static charges which can cause an incendiary electrical discharge .
"Empty" containers retain product residue (liquid and/or vapor) and can be dangerous. DO NOT PRESSURIZE, CUT, WELD, BRAZE, SOLDER, DRILL, GRIND, OR EXPOSE SUCH CONTAINERS TO HEAT, FLAME, SPARKS, STATIC ELECTRICITY, OR OTHER SOURCES OF IGNITION; THEY MAY EXPLODE AND CAUSE INJURY OR DEATH.

MATERIAL SAFETY DATA SHEET

EXXON CHEMICAL AMERICAS, P.O. BOX 3272, HOUSTON, TEXAS 77001
A Division of EXXON CHEMICAL COMPANY, A Division of EXXON CORPORATION

Empty drums should be completely drained, properly bunged and promptly returned to a drum reconditioner, or properly disposed of.

FIRE FIGHTING:

Use water spray to cool fire exposed surfaces and to protect personnel.
Isolate "fuel" supply from fire.
Use foam, dry chemical, or water spray to extinguish fire.
Avoid spraying water directly into storage containers due to danger of boilover.
This liquid is volatile and gives off invisible vapors. Either the liquid or vapor may settle in low areas or travel some distance along the ground or surface to ignition sources where they may ignite or explode.

HAZARDOUS COMBUSTION PRODUCTS:

No unusual

SECTION 5 SPILL CONTROL PROCEDURE

LAND SPILL:

Eliminate sources of ignition. Prevent additional discharge of material, if possible to do so without hazard. For small spills implement cleanup procedures; for large spills implement cleanup procedures and, if in public area, keep public away and advise authorities. Also, if this product is subject to CERCLA reporting (see Section 7) notify the National Response Center.
Prevent liquid from entering sewers, watercourses, or low areas. Contain spilled liquid with sand or earth. Do not use combustible materials such as sawdust.
Recover by pumping (use an explosion proof or hand pump) or with a suitable absorbent.
Consult an expert on disposal of recovered material and ensure conformity to local disposal regulations.

WATER SPILL:

Remove from surface by skimming or with suitable adsorbents. If allowed by local authorities and environmental agencies, sinking and/or suitable dispersants may be used in non-confined waters.
Consult an expert on disposal of recovered material and ensure conformity to local disposal regulations.

SECTION 6 NOTES

MATERIAL SAFETY DATA SHEET

EXXON CHEMICAL AMERICAS, P.O. BOX 3272, HOUSTON, TEXAS 77001
A Division of EXXON CHEMICAL COMPANY, A Division of EXXON CORPORATION

ACTREL 3349L CLEANER

DATE PREPARED: JUN 8, 1992
MSDS NO.: 92887640

HAZARD RATING SYSTEMS:

This information is for people trained in:
National Paint & Coatings Association's (NPCA)
Hazardous Materials Identification System (HMIS)
National Fire Protection Association (NFPA 704)
Identification of the Fire Hazards of Materials

	NPCA-HMIS	NFPA 704
HEALTH	1	1
FLAMMABILITY	2	2
REACTIVITY	1	1

KEY
4 - Severe
3 - Serious
2 - Moderate
1 - Slight
0 - Minimal

SECTION 7 REGULATORY INFORMATION

DEPARTMENT OF TRANSPORTATION (DOT):
DOT PROPER SHIPPING NAME:
PETROLEUM NAPHTHA, Combustible Liquid UN 1255
DOT HAZARD CLASS: Combustible Liquid
DOT IDENTIFICATION NUMBER: UN 1255
NAME: Naphtha, petroleum

FLASHPOINT: 120 Deg F. METHOD: TCC D-56 NOTE: Minimum

TSCA:
This product is listed on the TSCA Inventory at CAS Registry Number 64742-48-9

CERCLA:
If this product is accidentally spilled, it is not subject to any special reporting under the requirements of the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA). We recommend you contact local authorities to determine if there may be other local reporting requirements.

SARA TITLE III:
Under the provisions of Title III, Sections 311/312 of the Superfund Amendments and Reauthorization Act, this product is classified into the following hazard categories:
Fire.

SECTION 8 TYPICAL PHYSICAL & CHEMICAL PROPERTIES

SPECIFIC GRAVITY:
0.76 at 60

SOLUBILITY IN WATER, WT. % AT °F:
Less than 0.10 at 68

SP. GRAV. OF VAPOR, at 1 atm (Air=1):
5.51

EVAPORATION RATE, n-Bu Acetate=1:
0.1

VAPOR PRESSURE, mmHg at °F:
2 <10 @ 25 Deg C

VISCOSITY OF LIQUID, CST AT °F:
1 at 77
2 at 61

FREEZING/MELTING POINT, °F:
Less than 32

BOILING POINT, °F:
335 to 380 Approximately

MATERIAL SAFETY DATA SHEET

EXXON CHEMICAL AMERICAS, P.O. BOX 3273, HOUSTON, TEXAS 77001
A Division of EXXON CHEMICAL COMPANY, A Division of EXXON CORPORATION

ACTREL 3349L CLEANER

DATE PREPARED: JUN 8, 1992
MSDS NO.: 92887640

SECTION 9 REACTIVITY DATA

STABILITY:
Stable

HAZARDOUS POLYMERIZATION:
Will not occur

CONDITIONS TO AVOID INSTABILITY:
Not Applicable

MATERIALS AND CONDITIONS TO AVOID INCOMPATIBILITY:
Strong oxidizing agents.

HAZARDOUS DECOMPOSITION PRODUCTS:
None

SECTION 10 STORAGE AND HANDLING

ELECTROSTATIC ACCUMULATION HAZARD:
Yes, use proper grounding procedure

STORAGE TEMPERATURE, °F:
Ambient

LOADING/UNLOADING TEMPERATURE, °F:
Ambient

STORAGE/TRANSPORT PRESSURE, mmHg:
Atmospheric

VISC. AT LOADING/UNLOADING TEMP., cST:
2

REVISION SUMMARY:
Since MAY 12,1992 this MSDS has been revised in Section(s):
3, 7

REFERENCE NUMBER:	DATE PREPARED:	SUPERSEDES ISSUE DATE:
MDHA-C-25103	June 8,1992	May 12,1992

FOR ADDITIONAL PRODUCT INFORMATION, CONTACT YOUR TECHNICAL SALES REPRESENTATIVE
FOR ADDITIONAL HEALTH/SAFETY INFORMATION, CALL 713-870-6884

THIS INFORMATION RELATES TO THE SPECIFIC MATERIAL DESIGNATED AND MAY NOT BE VALID FOR SUCH MATERIAL USED IN COMBINATION WITH ANY OTHER MATERIALS OR IN ANY PROCESS. SUCH INFORMATION IS TO THE BEST OF OUR KNOWLEDGE AND BELIEF ACCURATE AND RELIABLE AS OF THE DATE COMPILED. HOWEVER, NO REPRESENTATION, WARRANTY OR GUARANTEE IS MADE AS TO ITS ACCURACY, RELIABILITY OR COMPLETENESS. IT IS THE USER'S RESPONSIBILITY TO SATISFY HIMSELF AS TO THE SUITABILITY AND COMPLETENESS OF SUCH INFORMATION FOR HIS OWN PARTICULAR USE. WE DO NOT ACCEPT LIABILITY FOR ANY LOSS OR DAMAGE THAT MAY OCCUR FROM THE USE OF THIS INFORMATION NOR DO WE OFFER WARRANTY AGAINST PATENT INFRINGEMENT.

PROCESS RESEARCH PRODUCTS
1013 WHITEHEAD ROAD EXTENSION
TRENTON, N.J. 08638

Fire
1
Health 1 0 Reactivity

HAZARD RATING
Least 0 Slight 1
Moderate 2 High 3 Extreme 4

FOR CHEMICAL EMERGENCY, CALL
CHEMTREC: 800-424-9300

FROM OUTSIDE USA, CALL COLLECT:
202-483-7616

MATERIAL SAFETY DATA SHEET

SECTION I

B 1361

TRADE NAME AND SYNONYMS: [redacted]
CHEMICAL NAME AND SYNONYMS: Mixture
CHEMICAL FAMILY: Lubricating Oil

Emergency Telephone Number
(609) 882-0400

SECTION II -- HAZARDOUS INGREDIENTS

	%	TLV (Units)	%	TLV (Units)
Severely Hydrotreated Naphthenic Oil				
Chlorinated Paraffinic Oil, total:	98	5mg/m^3 as an oil mist		
CAS # 61788-78-9				
CAS #64742-34-3				

SECTION III -- PHYSICAL DATA

Boiling Point (°F): Initial 530°F -- Wide Range
Vapor Pressure (mm Hg.): @15°C - <0.0001
Vapor Density (AIR=1): 10+
Solubility in Water: Insoluble
Appearance and Odor: Amber liquid/oily odor

Specific Gravity: 0.93
Percent, Volatile by Volume (%): <1.0%
Evaporation Rate (Ethyl ether =1): 1000 x slower

SECTION IV -- FIRE EXPLOSION HAZARD DATA

Flash Point (Method Used): 300°F min. COC
Flammable Limits: Not Determined Lel: Uel:
Extinguishing Media: Water fog, dry chemical, CO_2, chemical foam
Special Fire Fighting Procedures: Use self contained breathing apparatus when fighting fire in confined area.
Unusual Fire and Explosion Hazards: None

SECTION V -- HEALTH HAZARD DATA

Effects of Overexposure: Liquid and/or vapors may cause eye, skin and lung irritation.
Emergency and First Aid Procedures:

SKIN CONTACT: Wash with a large volume of soap and water until no odor remains.
EYE CONTACT: Flush with plenty of water. If irritation persists, consult physician.
INHALATION: Normally no problem; remove to fresh air.
INGESTION: Call a physician.

PROCESS RESEARCH PRODUCTS
MATERIAL SAFETY DATA SHEET
TRADE NAME: B-5250

SECTION VI -- REACTIVITY DATA

Stability -- Unstable:
Stable: X
Conditions to Avoid:
Incompatability (Materials to Avoid): Strong Oxidants
Hazardous Decomposition Products: Smoke, CO, Sulfur Oxides, Aldehydes

Hazardous Polymerization -- May Occur:
Will Not Occur: X
Hazardous Polymerization Conditions to Avoid:

SECTION VII -- SPILL OR LEAK PROCEDURES

Steps to be Taken in Case Material is Released or Spilled: Keep out of stream and waterways. Collect free liquid. Absorb remainder on inert absorbant.

Waste Disposal Method: Incinerate or land fill where permitted under appropriate Federal, State and Local Regulations.

SECTION VIII -- SPECIAL PROTECTION INFORMATION

Respiratory Protection (Specify Type): None Normally
Ventilation -- Local Exhaust: None Normally
Mechanical (General): Expected to be satisfactory
Protective Gloves: Impervious--Neoprene
Eye Protection: Recommended
Other Protective Equipment: None Needed Normally

SECTION IX -- SPECIAL PRECAUTIONS

Precautions to be Taken in Handling and Storing: Keep containers covered. Avoid eye and prolonged skin contact. NFPA Class III B Storage.

Other Precautions: Do not store near heat, sparks, flame or strong oxidants.

SECTION X -- DOCUMENTARY INFORMATION

Issue Date: November 28, 1988
Prepared By: PROCESS RESEARCH PRODUCTS
1013 Whitehead Road Extension, Trenton, N.J. 08638
Reviewed By: Semih Zaim, Vice-President of R & D

Semih Zaim

Certain information in this Material Safety Data Sheet may be based on sources other than direct test data on this product.

The opinions expressed herein are those of qualified experts within PROCESS RESEARCH PRODUCTS and its suppliers. We believe that the information contained herein is current as of the date of this Material Data Safety Sheet. Since the use of this information and these opinions and the conditions of use of the product are not within the control of PROCESS RESEARCH PRODUCTS, it is the user's obligation to determine the conditions of safe use of the product.

U.S. DEPARTMENT OF LABOR
Occupational Safety and Health Administration

Form Approved
OMB No 44-R1307

MATERIAL SAFETY DATA SHEET

Required under USDL Safety and Health Regulations for Ship Repairing Shipbuilding and Shipbreaking (29 CFR 1915 1916 1917)

SECTION I

MANUFACTURER'S NAME: Precision Finishing, Inc.	EMERGENCY TELEPHONE NO: 215/257-6862
ADDRESS (Number Street City State and ZIP Code): P.O Box 272 Sellersville, PA 18960	
CHEMICAL NAME AND SYNONYMS:	TRADE NAME AND SYNONYMS: Chemtrol #108
CHEMICAL FAMILY: Abrasive Vibratory & Tumbling Compound	FORMULA: Proprietary

SECTION II - HAZARDOUS INGREDIENTS NA *

PAINTS, PRESERVATIVES, & SOLVENTS	%	TLV (Units)	ALLOYS AND METALLIC COATINGS	%	TLV (Units)
PIGMENTS			BASE METAL		
CATALYST			ALLOYS		
VEHICLE			METALLIC COATINGS		
SOLVENTS			FILLER METAL PLUS COATING OR CORE FLUX		
ADDITIVES			OTHERS		
OTHERS					

HAZARDOUS MIXTURES OF OTHER LIQUIDS, SOLIDS, OR GASES	%	TLV (Units)
SILICA CAS #7631-86-9		10 mg/m³

SECTION III - PHYSICAL DATA

BOILING POINT (°F)	NA*	SPECIFIC GRAVITY (H_2O=1)	NA*
VAPOR PRESSURE (mm Hg)	NA*	PERCENT VOLATILE BY VOLUME (%)	NA*
VAPOR DENSITY (AIR=1)	NA*	EVAPORATION RATE (= 1)	NA*
SOLUBILITY IN WATER	20%	pH 1% Sol.	9.3
APPEARANCE AND ODOR			

SECTION IV - FIRE AND EXPLOSION HAZARD DATA NA*

FLASH POINT (Method used)	FLAMMABLE LIMITS	LEL	UEL
EXTINGUISHING MEDIA			
SPECIAL FIRE FIGHTING PROCEDURES			
UNUSUAL FIRE AND EXPLOSION HAZARDS			

*Not applicable

(Continued on reverse side)

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Rev May 72

SECTION V - HEALTH HAZARD DATA

TWA/PEL LOWEST VALUE: 10 mg/M^3

EFFECTS OF OVEREXPOSURE: Repeated inhalation of dust in excess of [illegible] limit [illegible] over an extended period of time may result in [illegible]

EMERGENCY PROCEDURES: Flush eyes with water. Induce vomiting. Seek [illegible] medical attention.

SECTION VI - REACTIVITY DATA

STABILITY			CONDITIONS TO AVOID
NA*	UNSTABLE		
	STABLE		

INCOMPATIBILITY (Materials to avoid): Do not mix with strong acid products

HAZARDOUS DECOMPOSITION PRODUCTS:

HAZARDOUS POLYMERIZATION			CONDITIONS TO AVOID
NA*	MAY OCCUR		
	WILL NOT OCCUR		

SECTION VIII - SPILL OR LEAK PROCEDURES

STEPS TO BE TAKEN IN CASE MATERIALS RELEASED OR SPILLED: Sweep and discard in accordance with local codes.

WASTE DISPOSAL METHOD: Effluent may require settling of solids to meet local codes

SECTION VIII - SPECIAL PROTECTION INFORMATION NA*

RESPIRATORY PROTECTION (Specify type): Dust respirator in compliance with OSHA Standard 1910.134

VENTILATION: LOCAL EXHAUST: Follow OSHA standards; MECHANICAL (General): ; SPECIAL: ; OTHER:

PROTECTIVE GLOVES: Rubber, impervious type

EYE PROTECTION: Normal for dust

OTHER PROTECTIVE EQUIPMENT:

SECTION IX - SPECIAL PRECAUTIONS

PRECAUTIONS TO BE TAKEN IN HANDLING AND STORING: Store in dry area

OTHER PRECAUTIONS:

 * Not Applicable

Form OSHA-20
Rev July 04

Precision Fin ching furnishes the data contained herein in good faith at customer's request without liability or legal responsibility for same whatsoever & no warranty or guarantee express or implied is made with respect to such data nor does PFI grant permission, recommendation, or inducement to infringe any patent whether owned by PFI or others. The data is offered solely for your information and consideration. Since conditions of use are beyond PFI's control, user assumes all responsibility and risk.

DATE OF ISSUE 1984

JOB SAFETY & HEALTH PROTECTION

The Occupational Safety and Health Act of 1970 provides job safety and health protection for workers by promoting safe and healthful working conditions throughout the Nation. Provisions of the Act include the following:

Employers

All employers must furnish to employees employment and a place of employment free from recognized hazards that are causing or are likely to cause death or serious harm to employees. Employers must comply with occupational safety and health standards issued under the Act.

Employees

Employees must comply with all occupational safety and health standards, rules, regulations and orders issued under the Act that apply to their own actions and conduct on the job.

The Occupational Safety and Health Administration (OSHA) of the U.S. Department of Labor has the primary responsibility for administering the Act. OSHA issues occupational safety and health standards, and its Compliance Safety and Health Officers conduct jobsite inspections to help ensure compliance with the Act.

Inspection

The Act requires that a representative of the employer and a representative authorized by the employees be given an opportunity to accompany the OSHA inspector for the purpose of aiding the inspection.

Where there is no authorized employee representative, the OSHA Compliance Officer must consult with a reasonable number of employees concerning safety and health conditions in the workplace.

Complaint

Employees or their representatives have the right to file a complaint with the nearest OSHA office requesting an inspection if they believe unsafe or unhealthful conditions exist in their workplace. OSHA will withhold, on request, names of employees complaining.

The Act provides that employees may not be discharged or discriminated against in any way for filing safety and health complaints or for otherwise exercising their rights under the Act.

Employees who believe they have been discriminated against may file a complaint with their nearest OSHA office within 30 days of the alleged discriminatory action.

Citation

If upon inspection OSHA believes an employer has violated the Act, a citation alleging such violations will be issued to the employer. Each citation will specify a time period within which the alleged violation must be corrected.

The OSHA citation must be prominently displayed at or near the place of alleged violation for three days, or until it is corrected, whichever is later, to warn employees of dangers that may exist there.

Proposed Penalty

The Act provides for mandatory civil penalties against employers of up to $7,000 for each serious violation and for optional penalties of up to $7,000 for each nonserious violation. Penalties of up to $7,000 per day may be proposed for failure to correct violations within the proposed time period and for each day the violation continues beyond the prescribed abatement date. Also, any employer who willfully or repeatedly violates the Act may be assessed penalties of up to $70,000 for each such violation. A minimum penalty of $5,000 may be imposed for each willful violation. A violation of posting requirements can bring a penalty of up to $7,000.

There are also provisions for criminal penalties. Any willful violation resulting in the death of any employee, upon conviction, is punishable by a fine of up to $250,000 (or $500,000 if the employer is a corporation), or by imprisonment for up to six months, or both. A second conviction of an employer doubles the possible term of imprisonment. Falsifying records, reports, or applications is punishable by a fine of $10,000 or up to six months in jail or both.

Voluntary Activity

While providing penalties for violations, the Act also encourages efforts by labor and management, before an OSHA inspection, to reduce workplace hazards voluntarily and to develop and improve safety and health programs in all workplaces and industries. OSHA's Voluntary Protection Programs recognize outstanding efforts of this nature.

OSHA has published Safety and Health Program Management Guidelines to assist employers in establishing or perfecting programs to prevent or control employee exposure to workplace hazards. There are many public and private organizations that can provide information and assistance in this effort, if requested. Also, your local OSHA office can provide considerable help and advice on solving safety and health problems or can refer you to other sources for help such as training.

Consultation

Free assistance in identifying and correcting hazards and in improving safety and health management is available to employers, without citation or penalty, through OSHA-supported programs in each State. These programs are usually administered by the State Labor or Health department or a State university.

Posting Instructions

Employers in States operating OSHA approved State Plans should obtain and post the State's equivalent poster.

Under provisions of Title 29,Code of Federal Regulations, Part 1903.2(a)(1) employers must post this notice (or facsimile) in a conspicuous place where notices to employees are customarily posted.

More Information

Additional information and copies of the Act, specific OSHA safety and health standards, and other applicable regulations may be obtained from your employer or from the nearest *OSHA Regional Office in the* following locations:

Atlanta, GA	(404) 347-3573
Boston, MA	(617) 565-7164
Chicago, IL	(312) 353-2220
Dallas, TX	(214) 767-4731
Denver, CO	(303) 844-3061
Kansas City, MO	(816) 426-5861
New York, NY	(212) 337-2378
Philadelphia, PA	(215) 596-1201
San Francisco, CA	(415) 744-6670
Seattle,WA	(206) 442-5930

To report suspected fire hazards, imminent danger safety and health hazards in the workplace, or other job safety and health emergencies, such as toxic waste in the workplace, call OSHA's 24-hour hotline: 1-800-321-OSHA.

Lynn Martin

Lynn Martin, Secretary of Labor

U.S. Department of Labor

Occupational Safety and Health Administration

Washington, DC
1991 (Reprinted)
OSHA 2203

CycleChem

INVOICE NO.	CUSTOMER NO.	INVOICE DATE	ORDER NO.	GEN CODE
W091159	08-1047408	10/17/2008	91159 WW865	945948 -1

FOR ADDITIONAL INFORMATION PERTAINING TO THIS INVOICE PLEASE DIAL
PHONE: 908-355-5800 • FAX: 908-355-0562

PICK UP FROM: SULZER METCO US INC
Attn: JIM Kourkoumelis
1101 PROSPECT AVE
WESTBURY, NY 11590

BILL TO: SULZER METCO US INC
Attn: JIM Kourkoumelis
1101 PROSPECT AVE
WESTBURY, NY 11590

TELEPHONE NUMBER

POF

EPA ID NO.	MANIFEST NO.	DATE RECEIVED	P.O. #
NYD131318651	CVCC108210	10/9/2008	4530114674

PRODUCT CODE	SEQUENCE NUMBER	QUANTITY ORDERED	DESCRIPTION	UNITS	RATE	CONT.	TOTAL
PC08	0036	1	METAL/CERAMIC POWDER & 90% WATER	2155.00	0.90/G	TT	1,939.50

SULZER METCO (US) INC.
OCT 22 2008
EHS DEPARTMENT

INVOICE

Disposal Subtotal* $1939.50

COMMENTS/ADDITIONAL CHARGES		AMOUNT
	QA/QC Fee	No Charge
	Reg. Admin. Fee	No Charge
	Transportation*	900.00
	Demurrage*	75.00
	Tax On * Items:	
	8.625% X $2914.50	251.38

Please Remit payment in full to:
Cycle Chem, Inc.
P.O. Box 18173, Newark, N.J. 07191

PAY THIS AMOUNT 3,165.88

PLEASE NOTE: INTEREST CHARGES OF 1.5% PER MONTH (18% PER YEAR WILL ACCRUE ON ALL PAST DUE AMOUNTS. ON UNPAID AMOUNTS, INTEREST AND ALL EXPENSES OF COLLECTIONS INCLUDING A REASONABLE ATTORNEY FEE IN AN AMOUNT OF 20% WILL BE CHARGED.

THE WASTE LISTED ON THIS INVOICE HAS BEEN RECEIVED BY OUR HAZARDOUS WASTE FACILITY AND IS BEING HANDLED IN FULL COMPLIANCE WITH THE RCRA REGULATIONS CONCERNING THE TREATMENT, STORAGE AND DISPOSAL OF THE DESCRIBED MATERIAL

NYG 3919221

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID & HAZARDOUS MATERIALS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple

(Hazardous Waste Manifest 1/23/03)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD 1 3 1 1 8 8 5 1
Manifest Doc. No. 117321
2. Page 1 of 1

Information within heavy bold line is not required by Federal Law.

A. NYG 3919221

3. Generator's Name and Mailing Address
Solvay Union USA Inc
1111 Prospect Avenue
Westbury, NY 11590

B. Generator's ID SAME

4. Generator's Telephone Number (516) 338-7337

5. Transporter 1 (Company Name)
Clean Harbors Env Services Inc

6. US EPA ID Number
MAD 0 3 9 3 2 2 5 0

C. State Transporter's ID NY 114 001

D. Transporter's Telephone (781) 849-1800

7. Transporter 2 (Company Name)

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Telephone ( )

9. Designated Facility Name and Site Address
Spring Grove Resource Recovery
4879 Spring Grove Avenue
Cincinnati, OH, 45232

10. US EPA ID Number
OHD 0 9 8 0 8 1 0 6 2 8

G. State Facility ID

H. Facility Telephone (513) 681-5020

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE CORROSIVE ACID SOLUTION, 8, UN1759, PG II	001	DF	00444	P	EPA D002 / STATE
b. HAZARDOUS WASTE, SOLID, N.O.S. (SODIUM SULFIDE, CORROSIVE), 9, UN3077, PG III	003	DM	00429	P	EPA D003 / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials listed Above
a. PROPERTY (SOLID)
b.
c.
d.

K. Handling Codes for Wastes Listed Above
a. T
b. T
c.
d.

15. Special Handling Instructions and Additional Information
EMERGENCY PHONE # (800) 645-5715
IN CASE OF EMERGENCY CALL CHEMTREC
NOS

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: [illegible] Signature: [illegible] Mo. 04 Day 20 Year 15

TRANSPORTER — 17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Frank [illegible] Signature: [illegible] Mo. 04 Day 20 Year 15

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Signature: Mo. Day Year

FACILITY — 19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Signature: Mo. Day Year

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

COPY 8—Generator—Retained by Generator

INSTRUCTIONS FOR THE NEW YORK STATE UNIFORM HAZARDOUS WASTE MANIFEST

General Information

New York State regulation requires proper completion of all information on a manifest. Omissions, false coding or illegibility is considered a violation. All generators are responsible under New York State and Federal Law for the proper identification, labeling, manifesting and ultimate disposal of all hazardous waste they generate. The manifest system is designed to track hazardous waste from the point of generation until its final disposal (cradle to grave). In order to accomplish this goal, it is essential that all **items on a manifest be properly completed.**

Distribution

Distribution of each copy of the manifest is indicated on the bottom of the form. Copies of the manifest must be mailed promptly. New York State regulations provide five (5) working days for generator and two (2) for a TSDF. The disposer's state is the state in which the designated TSD facility is located. Generator's state is the state in which the installation generating the hazardous waste is located. TSD facility is a treatment, storage or disposal facility.

Generator Section

Item 1-Enter the US EPA ID number (twelve digit number issued by the federal government). The generator must assign a sequential unique, five digit number different for each manifest, as the manifest document number.

Item 2-If a continuation sheet is used, please enter the total number of sheets here. Any EPA approved continuation sheet may be used, but distribution and completion must meet New York manifest requirements. The document number in Item A must be placed in Item L of each continuation sheet.

Items 3-and **4**-Self explanatory. These must correspond to the generator's US EPA ID number.

Items 5, 6, 7 and **8**- These are self-explanatory. These numbers must be secured from the transporter. If more than one transporter is used, the generator must supply additional copies of this manifest for each transporter copy (#5).

Items 9 and **10**-The designated TSD facility, name, address and ID number should appear here.

NOTE: All US EPA ID numbers are a twelve digit code starting off with the letters corresponding to the state in which the facility or transporter is located.

NOTE: Only New York State authorized transporters and TSD facilities are allowed to transport or receive hazardous waste in New York State. The generator shall check for authorization.

Item 11-USDOT requires the word "waste" before or in the shipping name for all hazardous waste. See 49 CFR 171 thru 177. Contact USDOT office for description assistance. Any waste in this box is considered a hazardous waste.

Item 12-

Number-indicate number of containers (use whole numbers).

Containers/Type

DM-Metal drums, barrels, kegs	DT-Dump trucks
DW-Wooden drums, barrels, kegs	CY-Cylinders
DF-Fiberboard or plastic drums, kegs	CM-Metal boxes, cartons, cases, roll-offs
TP-Tanks, portable	CW-Wooden boxes, cartons, cases
TT-Cargo tank, tank trucks	CF-Fiber or plastic boxes, cartons, cases
TC-Tank cars	BA-Burlap, cloth, paper or plastic bags

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to: Chief Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street S.W., Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503

Item 13-Actual number of units indicated in box 14. (Do not use fractions or decimals).

Item 14-Units (wt/vol)

G-Gallons (liquids only)	L-Liters (liquids only)
P-Pounds	K-Kilograms
T-Tons (2,000 pounds)	M-Metric Tons (1,000 kilograms)
Y-Cubic Yards	N-Cubic Meters

Item 15-Use this space to indicate special transportation, treatment, storage or disposal or Bill of Lading information. If an alternate facility is designated, note it here. For international shipments, enter point of departure. Emergency response telephone numbers, or similar information may be included here.

Item 16-The authorized agent of the generator must read and then sign (by hand) and date this certification. The date is the date of receipt by transporter.

NEW YORK STATE REQUIRES THIS ADDITIONAL INFORMATION

Item A-Number preprinted by New York State Department of Environmental Conservation (NYSDEC).

Item B-Generator site address if different from mailing address. If same, write in same.

Item C and **E**-State of registration and motor vehicle license plate number of waste carrying portion of vehicle used to transport.

Item D and **F**-Telephone number of authorized agent.

Item G-No entry required by NYSDEC

Item H-Telephone number at site of TSD facility.

Item I-Hazardous waste numbers (letter and three digits) as assigned by 6 NYCRR Part 371 or 40 CFR 261 must be used to identify hazardous waste. Enter in top box by EPA. If waste is not hazardous in New York but regulated by another state, enter that state's waste code in bottom box.

Item J-If description in Item 11 (a,b,c,d) contains NOS or other general term, the hazardous waste constituent must be provided here for each. The specific gravity, assumed to be one (1.00) unless indicated in lower right of each box.

Item K-Each material **must** be assigned an ultimate disposal method code as follows: L=Landfill, B=Incineration, heat recovery, burning, T=Chemical, physical, or biological treatment, R=Material recovery of more than 75 percent of the total material. Both the generator and the TSDF should agree on codes assigned in this item.

Transporter Section

Items 17 and **18**-Print or type the full name of person accepting responsibility and acknowledging receipt of material as listed on manifest for transport. Enter date of receipt and signature.

TSDF Section

Item 19-The authorized representative of the TSDF must note in the space any discrepancy between waste described on manifest and waste actually received. Any rejected materials should be listed and destination of those materials provided.

Item 20-The signature (by hand) of the authorized TSDF agent indicates acceptance (except for Item 19) and agreement with statements on this manifest. The date is the date of signature and receipt of shipment. A TSDF not providing ultimate disposal agrees to transfer waste to a TSDF authorized to provide ultimate disposal as indicated in Item K.

Additional Information

1. If the disposer state supplies a manifest, that state's form must be used. In any case, New York requires that both the generator and TSDF mail copies to the generator's state and the disposer's state, with the ultimate disposal method indicated in Item K.
2. There may be variations in the requirements between various states regarding Items A thru K, therefore, the generator should contact the disposer's state for specific details.
3. If assistance is needed in completion of this manifest, please contact NYSDEC Data Management Section at 518/402-8738 weekdays from 9:00 a.m. to 4:00 p.m.

EPHM-2 REV. 5/97

4141

STATE OF CONNECTICUT

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST PROGRAM
79 Elm St., Hartford, CT 06106-5127

FOR STATE USE ONLY

Please type (or print) *(Form designed for use on elite (12-pitch) typewriter.)*

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No. NYD131318651	Manifest Document No. 172785	2. Page 1 of	Information in the shaded areas is not required by Federal law, but may be required by State law.

3. Generator's Name and Mailing Address
SULZER METCO
1101 PROSPECT AVE
WESBURY L.I. 11590

4. Generator's Phone ( )

A. State Manifest Document Number
CT F 1172785

B. G.S.I. (Gen. Site Address)

5. Transporter 1 Company Name: CLEAN HARBORS ENV SER INC.
6. US EPA ID Number: MAD039322250

7. Transporter 2 Company Name
8. US EPA ID Number

C. S.T.I. (Trans. Lic. Plate #) 60054MA
D. Tran. Phone ( ) 781 849 1800

9. Designated Facility Name and Site Address
CLEAN HARBORS OF CONN
51 BRODERICK RD
BRISTOL CONN, 06010
10. US EPA ID Number: CTD000604488

E. S.T.I. (Trans. Lic. Plate #)
F. Tran. Phone (860 5838917
G. State Facility's ID (Not Required) /
H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. NON DOT REGULATED MATERIAL, NONE, NONE (CERAMIC OXIDE) WATER, SLUDGE	001	TT	2000	G	NONE EPA CR04 STATE
b.					EPA STATE
c. MH MH					EPA STATE
d.					EPA STATE

J. Additional Descriptions for Materials Listed Above
a.
b. CH82414BB
c.
d.

K. Handling Codes for Wastes Listed Above

	Interim	Final	Interim	Final
a.	S01	D81	c.	
b.			d.	

15. Special Handling Instructions and Additional Information
11a. EMER PHONE # 800 4633718

Point of Departure:

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR,** if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: PETER DI PIETRANTONIO | Signature: P. Dipietrantonio | Month 07 Day 25 Year 05

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: VINCENT ZEN | Signature: | Month 07 Day 25 Year 05

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Melissa Hogan | Signature: Melissa Hogan | Month 07 Day 26 Year 05

GENERATOR — TRANSPORTER — FACILITY

FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILL RESPONSE AT (860) 424-3338

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802.

COPY 3: FACILITY TO GENERATOR

CT F 1172785

EPA Form 8700-22 (Rev. 9/91) Form Approved OMB No.2050-0039.

COPY 3: FACILITY TO GENERATOR

PARTIAL INSTRUCTIONS
FOR COMPLETING THE CONNECTICUT UNIFORM HAZARDOUS WASTE MANIFEST

IMPORTANT: READ ALL INSTRUCTIONS ON THE COVER SHEET BEFORE COMPLETING THIS FORM. ALL 8 COPIES MUST BE TOTALLY LEGIBLE.

GENERAL INFORMATION

The Hazardous Waste Manifest is designed to track waste from the point of generation to final disposal ("cradle to grave"). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete, incorrect or illegible manifests are violations of the law, and could subject you to civil or criminal liabilities as specified in Connecticut Hazardous Waste Management Regulations.

The Connecticut manifest contains 8 copies. ALL COPIES MUST BE LEGIBLE! (Illegible manifests submitted to the State will be returned to the Generator for proper completion). This form is designed for use on a 12 pitch (elite) typewriter. A firm ball point pen may also be used only if you press down HARD. The eight copies must be filed with the appropriate parties as they are completed.

* Be aware that hazardous wastes manifested into or out of Connecticut are subject to a hazardous waste assessment per C.G.S. 22a-132. Please contact the Dept. of Revenue Services at (860) 541-3225 for more information.

COPY DISTRIBUTION is as follows:

COPY 1: FACILITY MAILS TO DESTINATION STATE: This copy is mailed by the Facility to the responsible state agency in the state in which the facility is located, upon receipt of the waste.

COPY 2: FACILITY MAILS TO GENERATOR STATE: This copy is mailed by the facility to the appropriate agency in the Generator's state, upon receipt of the waste.

COPY 3: FACILITY MAILS TO GENERATOR: This copy is mailed to the generator by the facility upon receipt of the waste. This copy is the generator's documentation that the facility received the waste.

COPY 4: FACILITY-RETAINS: This copy is retained by the facility for his records.

COPY 5: TRANSPORTER 1 RETAINS: This copy is retained by the Transporter for his records. This copy is the Transporter's documentation that this shipment was transported from the generator to the facility.
NOTE: If a continuing Transporter is used, the generator is responsible for supplying him with a legible photocopy of the manifest, which must contain signatures where required.

COPY 6: GENERATOR MAILS TO DESTINATION STATE: This copy is mailed by the generator to the appropriate agency in the destination state (the state in which the facility is located).

COPY 7: GENERATOR MAILS TO GENERATOR STATE: This copy is mailed by the generator to the appropriate state agency in his state.

COPY 8: GENERATOR RETAINS: This copy is retained by the generator for his records.

GENERATOR SECTION

Item 12: CONTAINERS (NO. & TYPE) - Enter the number of containers for each waste and the appropriate abbreviation from TABLE 1 (below) for the type of container used.

TABLE 1 - CONTAINER TYPE

DM = Metal drums, barrels, kegs	TP = Tanks, Portable	CM = Metal boxes, cartons, cases (incl. roll-offs)
DW = Wooden drums, barrels, kegs	TT = Cargo Tanks (tank trucks)	CW = Wooden boxes, cartons, cases
DF = Fiberboard or plastic drums, barrels, kegs	TC = Tank Cars	CF = Fiber or plastic boxes, cartons, cases
CY = Cylinders	DT = Dump Trucks	BA = Burlap, cloth, paper, plastic bags

Item 13: TOTAL QUANTITY - Enter the total quantity of waste described on each line, relative to the units used in Item 14.

Item 14: UNIT (Wt./Vol.) - Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line. DO NOT use fractions.

TABLE II - UNITS OF MEASURE

G = Gallons (liquids only)	L = Liters (liquids only)	Y = Cubic Yards
P = Pounds	K = Kilograms	N = Cubic Meters
T = Tons (2000 lb.)	M = Metric Tons (1000 kg.)	

TRANSPORTER SECTION

Item 17: TRANSPORTER 1 ACKNOWLEDGEMENT - Print or type the name of the person accepting the waste on behalf of the 1st transporter. That person must acknowledge acceptance of the waste described on the manifest by signing & entering the date of receipt.

Item 18: TRANSPORTER 2 ACKNOWLEDGEMENT - If applicable, follow instructions for Item 17 for Transporter 2.

DESIGNATED FACILITY (TSDF) SECTION

Item K: HANDLING CODES (TSDF COMPLETES) - Refer to Item K in full instructions.

TABLE III - PROCESS CODES/HANDLING METHOD CODES

STORAGE:	S01 (Containers)	S02 (Tank)	S03 (Waste Pile)	S04 (Surface Impoundment)	S05 (Other - Specify)
TREATMENT:	T01 (Tank)	T02 (Surface Impoundment)	T03 (Incinerator)	(Other Treatment - specify code from 40 CFR 265 Appendix I).	
DISPOSAL:	D80 (Injection well)	D81 (Landfill)	D82 (Land Application)	D84 (Surface Impoundment)	
			D83 (Ocean Disposal)	D85 (Other - Specify)	

Item 19: DISCREPANCY INDICATION SPACE - The authorized representative of the designated facility's owner or operator must note in this space any significant discrepancy between the waste described on the manifest & the waste actually received at the facility. Any rejected materials should be listed here, along with an indication of the disposition of the rejected materials. **Any applicable Discrepancy or Rejection reporting requirements must also be complied with. Federal & State regulations vary.**

Item 20: FACILITY OWNER OR OPERATOR CERTIFICATION - Print or type the name of the person accepting the waste on behalf of the owner or operator of the designated TSDF. That person must acknowledge acceptance of the waste described on the manifest by signing (by hand) & entering the date of the receipt. The signature of the authorized TSDF agent indicates acceptance (except for items specified in Item 19) & agreement with the statements on this manifest.

* NOTE: FOR INTERSTATE SHIPMENTS (between different states) YOU MAY BE REQUIRED TO COMPLY WITH THE MANIFESTING REQUIREMENTS OF BOTH THE DESTINATION & GENERATOR STATES REGARDING THE COMPLETION OF SPECIFIC INFORMATION INCLUDED IN LETTERED ITEMS A-K. You may wish to contact State agencies for more information on this subject.

REMINDER: ALL 8 COPIES OF THIS FORM MUST BE TOTALLY LEGIBLE.

Public reporting burden for this collection of information is estimated to average: 37 minutes for generator, 15 minutes for transporter, 10 minutes for treatment, storage and disposal facility. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to CHIEF, INFORMATION POLICY BRANCH, PM-223, U.S. ENVIRONMENTAL PROTECTION AGENCY, 401 M STREET SW, WASHINGTON, D.C. 20460; and to the OFFICE OF INFORMATION AND REGULATORY AFFAIRS, OFFICE OF MANAGEMENT AND BUDGET, WASHINGTON, D.C. 20503.

SITE NAME _____

EPA ID NO. ___ ___ ___ ___

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

1993 HAZARDOUS WASTE

FORM PS

WASTE TREATMENT, DISPOSAL OR RECYCLING PROCESS SYSTEMS

INSTRUCTIONS: Read the detailed instructions beginning on page 33 of the Hazardous Waste Report booklet before completing this form.

Sec. I

A. Waste treatment, disposal or recycling system description - Instructions, Page 38

B. System type Instructions, Page 38 — M

C. Regulatory status Instructions, Page 39

D. Operational status Instructions, Page 39

E. Unit types Instructions, Page 39

Sec. II

A. 1993 influent quantity - Instuctions, Page 40

Total _____ . _ UOM _ Density _____ . ___

RCRA _____ . _ ☐ 1. lbs/gal. ☐ 2. Sg.

GM Pages

B. Maximum operational capacity Instuctions, Page 41

Total _____ . _

RCRA _____ . _

C. 1993 liquid effluent quantity Instuctions, Page 42

Total _____ . _ UOM _ Density _____ . ___

RCRA _____ . _ ☐ 1. lbs/gal. ☐ 2. Sg.

GM Pages

D. 1993 solid/sludge quantity Instuctions, Page 43

Total _____ . _ UOM _ Density _____ . ___

RCRA _____ . _ ☐ 1. lbs/gal. ☐ 2. Sg.

GM Pages

E. Limitation on maximum operational capacity: Instructions, Page 43

1. __ 2. __ 3. __

F. Commercial capacity availability code: Instructions, Page 44

G. Percent of capacity commercially available. Instructions, Page 44

___ %

Sec. III

A. Do you plan a change in maximum operational capacity? Instuctions, Page 44

☐ 1. Yes (continue to Box "B")

☐ 2. No (This form is now complete)

B. New maximum operational capacity Instuctions, Page 45

Total _____ . _ UOM _

RCRA _____ . _

C. Planned year of change Instructions, Page 45

1 9 __

D. Future commercial capacity availability code: Instructions, Page 45

E. Percent of future capacity will be commercially available? Instructions, Page 45

___ %

Comments:

ONYX ENVIRONMENTAL SERVICES

ONYX

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD 1 3 1 3 1 8 6 5 1 — Manifest Document No. 0 5 0 0 6 — 2. Page 1 of 1

3. Generator's Name and Mailing Address
SULZER METCO (US) INC.
1101 PROSPECT AVENUE
ATTN: PETER DIPIETRANTONIO
WESTBURY, NY 11590

4. Generator's Phone (516) 338-2337

A. Non-hazardous Manifest Document Num: Z 135160

B. State Generator's ID: SAME

5. Transporter 1 Company Name: ENVIRON TRANSPORT GROUP INC. — 6. US EPA ID Number: NJD 0 0 0 6 9 2 0 6 1

C. State Trans. ID

7. Transporter 2 Company Name — 8. US EPA ID Number

D. Transporter's Phone (973) 347-6200

E. State Trans. ID

9. Designated Facility Name and Site Address
ONYX ENVIRONMENTAL SERVICES L.L.C.
1 EDEN LANE
FLANDERS, NJ 07836

10. US EPA ID Number: NJD 9 8 0 5 3 6 5 9 3

F. Transporter's Phone ( )

G. State Facility's ID: N/A

H. Facility's Phone (973) 347-1909

GENERATOR

	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	L Waste No.
a.	NON HAZARDOUS MATERIAL, NONE, NONE	055	DF	40900	P	D27
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above
S/- DUST COLLECTOR MATERIAL
a. c. b. d.

K. Handling Codes for Wastes Listed Above
a. NY=L c. b. d.

15. Special Handling Instructions and Additional Information
PACKING SLIPS ATTACHED FOR CLARIFICATION - EMERGENCY NUMBER-INFOTRAC: 1-800-535-5053
ID27 REGULATED BY NJDEP ONLY:
TRC 451

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labelled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

I hereby certify that the above-named material is not hazardous waste as defined by 40 CFR Part 261 or any applicable state law.

Printed/Typed Name: Tim Zik — Signature: [signature] — Month Day Year: 11 17 95

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Richard Wellins — Signature: [signature] — Month Day Year: 11 17 95

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

1-GENERATOR COPY

SIGNATURE AND INFORMATION *MUST* BE LEGIBLE ON ALL COPIES

LLRW Disposal Manifests 2007

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number
2. Page 1 of 1
3. Emergency Response Phone 410-377-3742
4. Manifest Tracking Number 001251031 JJK

GENERATOR

5. Generator's Name and Mailing Address SULZER METCO (US) 1101 PROSPECT AVE WESTBURY, NY 11590
Generator's Phone: 516-338-2337
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name REDROCK DBA TRI-STATE MOTOR TRANSIT
U.S. EPA ID Number MOD 095 038 998

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address WASTE CONTROL SPECIALISTS 9998 W. HWY 176 ANDREWS, TX 79714
Facility's Phone: 505-394-4300
U.S. EPA ID Number

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	1. RADIOACTIVE MATERIAL, EXCEPTED PACKAGE, LTD QTY OF MATERIAL, UN2910	50	DM	5,166	K	NONE
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: JOHN E. MONSALVE
Signature:
Month 09 Day 18 Year 07

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Ed YANKEY
Signature:
Month 9 Day 18 Year 07

Transporter 2 Printed/Typed Name
Signature
Month Day Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name
Signature
Month Day Year

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO GENERATOR STATE (IF REQUIRED)

APPROVED BY OMB: NO. 3150-0164
EXPIRES: 08/30/2007

Estimated burden per response to comply with this information collection request: 45 minutes. This uniform manifest is required by NRC to meet reporting requirements of Federal and State Agencies for the safe transportation and disposal of low-level waste. Send comments regarding burden estimate to the Records and FOIA/Privacy Services Branch (T-5 F52), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to infocollects@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0164), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

NRC FORM 540
(6-2004)

U.S. NUCLEAR REGULATORY COMMISSION

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST SHIPPING PAPER

1. EMERGENCY TELEPHONE NUMBER (Include Area Code)
(410) 377-3742

ORGANIZATION
ECOLOGY SERVICES, INC.

2. IS THIS AN "EXCLUSIVE USE" SHIPMENT?
☐ YES
☑ NO

3. TOTAL NUMBER OF PACKAGES IDENTIFIED ON THIS MANIFEST ====> 50

4. DOES EPA REGULATED WASTE REQUIRING A MANIFEST ACCOMPANY THIS SHIPMENT? ☐ YES ☑ NO
If "Yes," provide Manifest Number ====>

EPA MANIFEST NUMBER

5. SHIPPER – NAME AND FACILITY
Sulzer-Metco (US), Inc.
1101 Prospect Avenue
Westbury, NY 11590

SHIPPER I.D. NUMBER
NA
☐ COLLECTOR
☐ PROCESSOR
☑ GENERATOR TYPE (Specify) I

USER PERMIT NUMBER
NA

SHIPMENT NUMBER
70917

CONTACT
Peter DiPietrantonio

TELEPHONE NUMBER (Include Area Code)
(516) 338-2337

6. CARRIER – Name and Address
Bedrock, d.b.a., Tri-State Motor Transit
P.O. Box 113
Joplin, MO 64802

EPA I.D. NUMBER
MOD095038998

SHIPPING DATE
09/18/2007

CONTACT
Cassie Gardner

TELEPHONE NUMBER (Include Area Code)
800-234-8768

SIGNATURE – Authorized carrier acknowledging waste receipt
DATE 9-18-07

7. NRC FORM 540 AND 540A — PAGE 1 OF 6 PAGE(S)
NRC FORM 541 AND 541A — 1/2 PAGE(S)
NRC FORM 542 AND 542A — None PAGE(S)
ADDITIONAL INFORMATION — None PAGE(S)

8. MANIFEST NUMBER (Use this number on all continuation pages)
SM 70917-03

9. CONSIGNEE - Name and Facility Address
WASTE CONTROL SPECIALISTS, LLC
9998 W. HWY 176
ANDREWS, TX 79714

CONTACT
Anne Dean

TELEPHONE NUMBER (Include Area Code)
(505) 394-4300

SIGNATURE – Authorized consignee acknowledging waste receipt

DATE

10. CERTIFICATION
This is to certify that the herein-named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation. This also certifies that the materials are classified, packaged, marked, and labeled and are in proper condition for transportation and disposal as described in accordance with the applicable requirements of 10 CFR Parts 20 and 61, or equivalent state regulations.

AUTHORIZED SIGNATURE

TITLE SUPERVISOR

DATE 09-18-07

11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (Including proper shipping name, hazard class, UN ID number, and any additional information)	12. DOT LABEL "RADIOACTIVE"	13. TRANSPORT INDEX	14. PHYSICAL AND CHEMICAL FORM	15. INDIVIDUAL RADIONUCLIDES			16. TOTAL PACKAGE ACTIVITY (MBq)	17. LSA/SCO CLASS	18. TOTAL WEIGHT OR VOLUME (Use appropriate units)	19. IDENTIFICATION NUMBER OF PACKAGE
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	243 LBS; 7.5 FT3	SM 70918-01
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	278 LBS; 7.5 FT3	SM 70918-02
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	114 LBS; 7.5 FT3	SM 70918-03
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	126 LBS; 7.5 FT3	SM 70918-04
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	117 LBS; 7.5 FT3	SM 70918-05
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	136 LBS; 7.5 FT3	SM 70918-06

FOR CONSIGNEE USE ONLY

NRC FORM 540A
(3-95)

U.S. NUCLEAR REGULATORY COMMISSION

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST
SHIPPING PAPER (CONTINUATION)

8. MANIFEST NUMBER
(Use this number on all continuation pages)
SM 70917-03

11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (Including proper shipping name, hazard class, UN ID number, and any additional information)	12. DOT LABEL "RADIOACTIVE"	13. TRANSPORT INDEX	14. PHYSICAL AND CHEMICAL FORM	15. INDIVIDUAL RADIONUCLIDES			16. TOTAL PACKAGE ACTIVITY (MBq)	17. LSA/SCO CLASS	18. TOTAL WEIGHT OR VOLUME (Use appropriate units)	19. IDENTIFICATION NUMBER OF PACKAGE
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	194 LBS; 7.5 FT3	SM 70916-07
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	147 LBS; 7.5 FT3	SM 70916-08
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	105 LBS; 7.5 FT3	SM 70916-09
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	110 LBS; 7.5 FT3	SM 70916-10
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	126 LBS; 7.5 FT3	SM 70916-11
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	129 LBS; 7.5 FT3	SM 70916-12
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	122 LBS; 7.5 FT3	SM 70916-13
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	199 LBS; 7.5 FT3	SM 70916-14
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	152 LBS; 7.5 FT3	SM 70916-15
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	137 LBS; 7.5 FT3	SM 70916-16
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	65 LBS; 7.5 FT3	SM 70916-17
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	118 LBS; 7.5 FT3	SM 70916-18
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	118 LBS; 7.5 FT3	SM 70916-19

NRC FORM 540A
(3-95)

U.S. NUCLEAR REGULATORY COMMISSION

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST
SHIPPING PAPER (CONTINUATION)

8. MANIFEST NUMBER
(Use this number on all continuation pages)
SM 70917-03

11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (Including proper shipping name, hazard class, UN ID number, and any additional information)	12. DOT LABEL "RADIOACTIVE"	13. TRANSPORT INDEX	14. PHYSICAL AND CHEMICAL FORM	15. INDIVIDUAL RADIONUCLIDES			16. TOTAL PACKAGE ACTIVITY (MBq)	17. LSA/SCO CLASS	18. TOTAL WEIGHT OR VOLUME (Use appropriate units)	19. IDENTIFICATION NUMBER OF PACKAGE
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	120 LBS; 7.5 FT3	SM 70918-20
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	125 LBS; 7.5 FT3	SM 70918-21
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	151 LBS; 7.5 FT3	SM 70918-22
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	77 LBS; 7.5 FT3	SM 70918-23
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	193 LBS; 7.5 FT3	SM 70918-24
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	112 LBS; 7.5 FT3	SM 70918-25
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	134 LBS; 7.5 FT3	SM 70918-26
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	115 LBS; 7.5 FT3	SM 70918-27
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	131 LBS; 7.5 FT3	SM 70918-28
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	100 LBS; 7.5 FT3	SM 70918-29
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	124 LBS; 7.5 FT3	SM 70918-30
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	117 LBS; 7.5 FT3	SM 70918-31
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	125 LBS; 7.5 FT3	SM 70918-32

NRC FORM 540A
(3-95)

U.S. NUCLEAR REGULATORY COMMISSION

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST
SHIPPING PAPER (CONTINUATION)

8. MANIFEST NUMBER
(Use this number on all continuation pages)
SM 70917-03

11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (Including proper shipping name, hazard class, UN ID number, and any additional information)	12. DOT LABEL "RADIOACTIVE"	13. TRANSPORT INDEX	14. PHYSICAL AND CHEMICAL FORM	15. INDIVIDUAL RADIONUCLIDES			16. TOTAL PACKAGE ACTIVITY (MBq)	17. LSA/SCO CLASS	18. TOTAL WEIGHT OR VOLUME (Use appropriate units)	19. IDENTIFICATION NUMBER OF PACKAGE
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	171 LBS; 7.5 FT3	SM 70918-33
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	122 LBS; 7.5 FT3	SM 70918-34
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	100 LBS; 7.5 FT3	SM 70918-35
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	127 LBS; 7.5 FT3	SM 70918-36
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	765 LBS; 7.5 FT3	SM 70918-37
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	859 LBS; 7.5 FT3	SM 70918-38
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	904 LBS; 7.5 FT3	SM 70918-39
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	881 LBS; 7.5 FT3	SM 70918-40
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	123 LBS; 7.5 FT3	SM 70918-41
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	130 LBS; 7.5 FT3	SM 70918-42
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	118 LBS; 7.5 FT3	SM 70918-43
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	90 LBS; 7.5 FT3	SM 70918-44
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	845 LBS; 7.5 FT3	SM 70918-45

NRC FORM 540A
(3-95)

U.S. NUCLEAR REGULATORY COMMISSION

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST
SHIPPING PAPER (CONTINUATION)

8. MANIFEST NUMBER
(Use this number on all continuation pages)
SM 70917-03

11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (Including proper shipping name, hazard class, UN ID number, and any additional information)	12. DOT LABEL "RADIOACTIVE"	13. TRANSPORT INDEX	14. PHYSICAL AND CHEMICAL FORM	15. INDIVIDUAL RADIONUCLIDES			16. TOTAL PACKAGE ACTIVITY (MBq)	17. LSA/SCO CLASS	18. TOTAL WEIGHT OR VOLUME (Use appropriate units)	19. IDENTIFICATION NUMBER OF PACKAGE
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	159 LBS; 7.5 FT3	SM 70918-46
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	697 LBS; 7.5 FT3	SM 70918-47
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	640 LBS; 7.5 FT3	SM 70918-48
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	151 LBS; 7.5 FT3	SM 70918-49
Radioactive material, excepted package-limited quantity of material, 7, UN 2910	NA	NA	SOLID: Zirconium Oxide WP-019353	U-NAT			5.6610E-01	NA	146 LBS; 7.5 FT3	SM 70918-50

APPROVED BY OMB: NO. 3150-0138
EXPIRES: 06/30/2007

Estimated burden per response to comply with this information collection request: 3.3 hours. This uniform manifest is required by NRC to meet reporting requirements of Federal and State Agencies for the safe transportation and disposal of low-level waste. Send comments regarding burden estimate to the Records and FOIA/Privacy Service Branch (T-5 F52), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to infocollects@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0166), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

NRC FORM 541
(6-2004)

U.S. NUCLEAR REGULATORY COMMISSION

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

CONTAINER AND WASTE DESCRIPTION

Additional Nuclear Regulatory Commission (NRC) Requirements for Control, Transfer and Disposal of Radioactive Waste

1. MANIFEST TOTALS

NUMBER OF PACKAGES/ DISPOSAL CONTAINERS	NET WASTE VOLUME (m3)	NET WASTE WEIGHT (kg)	SPECIAL NUCLEAR MATERIAL (grams) U-233	U-235	Pu	Total
50	10.6200	5165.5103	NP	NP	NP	NP

ACTIVITY (MBq) ALL NUCLIDES	TRITIUM	C-14	Tc-99	I-129	SOURCE (kg)
2.8305E+01	NP	NP	NP	NP	5.0000E-01

2. MANIFEST NUMBER
SM 70917-03

3. PAGE 1 OF 12 PAGE(S)

4. SHIPPER NAME
Sulzer-Metco (US), Inc.

SHIPPER ID NUMBER
NA

DISPOSAL CONTAINER DESCRIPTION 5. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	6. CONTAINER DESCRIPTION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ☑ (mSv/hr) ☐ (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER PHYSICAL DESCRIPTION 11. WASTE DESCRIPTOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	14. CHEMICAL DESCRIPTION CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT (IF > 0.1%)	15. RADIOLOGICAL DESCRIPTION INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	16. WASTE CLASSIFICATION A-Class A Stable All-Class A Unstable B-Class B C-Class C
SM 70918-01/SM	4	0.2124	110.2230	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	All
												Total 5.6610E-01 MBq	
SM 70918-02/SM	4	0.2124	128.0987	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	All
												Total 5.6610E-01 MBq	
SM 70918-03/SM	4	0.2124	51.7095	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	All
												Total 5.6610E-01 MBq	

Note 1: Container Description Codes. For containers/ waste requiring disposal in approved structural overpacks the numerical code must be followed by "-OP."

1. Wooden Box or Crate
2. Metal Box
3. Plastic Drum or Pail
4. Metal Drum or Pail
5. Metal Tank or Liner
6. Concrete Tank or Liner
7. Polyethlene Tank or
8. Fiberglass Tank or Liner
9. Demineralizer
10. Gas Cylinder
11. Bulk, Unpackaged Waste
12. Unpackaged Components
13. High Integrity Container
19. Other. Describe in Item 6, or additional page

NOTE 2: Waste Descriptor Codes. (Choose up to three which predominate by volume.)

20. Charcoal
21. Incinerator Ash
22. Soil
23. Gas
24. Oil
25. Aqueous Liquid
26. Filter Media
27. Mechanical Filter
28. EPA or State Hazardous
29. Demolition Rubble
30. Cation Ion-exchange Media
31. Anion Ion-exchange Media
32. Mixed Bed Ion-exchange Media
33. Contaminated Equipment
34. Organic Liquid (except oil)
35. Glassware or Labware
36. Sealed Source/Device
37. Paint or Plating
38. Evaporator Bottoms/Sludges/Concentrates
39. Compactible Trash
40. Noncompactible Trash
41. Animal Carcass
42. Biological Material (except animal carcass)
43. Activated Material
59. Other. Describe in Item 11, or additional page

Note 3: For solidification media that meet disposal site structural stability requirements, the numerical code must be followed by "-S." For all solidification media, the vendor (manufacturer) and brand name must also be identified in Item 13. Code 100=NONE REQUIRED.

Sorption

60. Speedi Dri
61. Celetom
62. Floor Dry/ Superfine
63. Hi Dri
64. Safe T Sorb
65. Safe N Dri
66. Florco
67. Florco X
68. Solid A Sorb
69. Chemsil 30
70. Chemsil 50
71. Chemsil 3030
72. Dicapel HP200
73. Dicapel HP500
74. Petroset
75. Petroset II
76. Aquaset
77. Aquaset II
89. Other. Describe in item 13, or additional page.

Solidification

90. Cement
91. Concrete (encapsulation)
92. Bitumen
93. Vinyl Chloride
94. Vinyl Ester Styrene
99. Other. Describe in Item 13, or additional page
100. None Required

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UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

U.S. NUCLEAR REGULATORY COMMISSION

2. MANIFEST NUMBER
SM 70917-04

CONTAINER AND WASTE DESCRIPTION

DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
							PHYSICAL DESCRIPTION			14. CHEMICAL DESCRIPTION		15. RADIOLOGICAL DESCRIPTION	
5. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	6. CONTAINER DESCRIPTION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ☑ (µSv/hr) ☐ (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	11. WASTE DESCRIPTOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT IF > 0.1%	INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	16. WASTE CLASSIFICATION A-Class A Stable AU-Class A Unstable B-Class B C-Class C
SM 70918-04/SM	4	0.2124	57.1526	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Atl
												Total 5.6610E-01 MBq	
SM 70918-05/SM	4	0.2124	53.0703	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Atl
												Total 5.6610E-01 MBq	
SM 70918-06/SM	4	0.2124	61.6886	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Atl
												Total 5.6610E-01 MBq	
SM 70918-07/SM	4	0.2124	57.9969	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Atl
												Total 5.6610E-01 MBq	
SM 70918-08/SM	4	0.2124	66.6781	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Atl

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UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

U.S. NUCLEAR REGULATORY COMMISSION

2. MANIFEST NUMBER
SM 70917-03

CONTAINER AND WASTE DESCRIPTION

DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
							PHYSICAL DESCRIPTION			14. CHEMICAL DESCRIPTION		15. RADIOLOGICAL DESCRIPTION	
5. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	6. CONTAINER DESCRIPTION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ☑ (µSv/hr) ☐ (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	11. WASTE DESCRIPTOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT (IF > 0.1%)	INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	16. WASTE CLASSIFICATION A-Class A Stable AU-Class A Unstable B-Class B C-Class C
												Total 5.6610E-01 MBq	
SM 70918-09/SM	4	0.2124	47.6272	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Atl
												Total 5.6610E-01 MBq	
SM 70918-10/SM	4	0.2124	49.8952	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Atl
												Total 5.6610E-01 MBq	
SM 70918-11/SM	4	0.2124	57.1526	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Atl
												Total 5.6610E-01 MBq	
SM 70918-12/SM	4	0.2124	58.5134	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Atl
												Total 5.6610E-01 MBq	

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UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

U.S. NUCLEAR REGULATORY COMMISSION

2. MANIFEST NUMBER SM 70917-06

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CONTAINER AND WASTE DESCRIPTION

DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
5. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	6. CONTAINER DESCRIPTION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ☑ (µSv/hr) (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	PHYSICAL DESCRIPTION 11. WASTE DESCRIPTOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	14. CHEMICAL DESCRIPTION CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT IF > 0.1%	15. RADIOLOGICAL DESCRIPTION INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	16. WASTE CLASSIFICATION A/S-Class A Stable A/U-Class A Unstable B-Class B C-Class C
SM 70916-13/SM	4	0.2124	55.3383	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	A/U
												Total 5.6610E-01 MBq	
SM 70916-14/SM	4	0.2124	90.2649	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	A/U
												Total 5.6610E-01 MBq	
SM 70916-15/SM	4	0.2124	58.9460	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	A/U
												Total 5.6610E-01 MBq	
SM 70916-16/SM	4	0.2124	62.1422	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	A/U
												Total 5.6610E-01 MBq	
SM 70916-17/SM	4	0.2124	29.4835	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	A/U

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UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

U.S. NUCLEAR REGULATORY COMMISSION

2. MANIFEST NUMBER
SM 70917-00

CONTAINER AND WASTE DESCRIPTION

DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
							PHYSICAL DESCRIPTION			14. CHEMICAL DESCRIPTION		15. RADIOLOGICAL DESCRIPTION	
5. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	6. CONTAINER DESCRIPTION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ☑ (µSv/hr) ☐ (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	11. WASTE DESCRIPTOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT (IF > 0.1%)	INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	16. WASTE CLASSIFICATION (A-Class A Stable U-Class A Unstable B-Class B C-Class C)
												Total 5.6810E-01 MBq	
SM 70918-18/SM	4	0.2124	53.5239	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Aui
												Total 5.6810E-01 MBq	
SM 70918-19/SM	4	0.2124	53.5239	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Aui
												Total 5.6810E-01 MBq	
SM 70918-20/SM	4	0.2124	54.4311	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Aui
												Total 5.6810E-01 MBq	
SM 70918-21/SM	4	0.2124	56.6991	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Aui
												Total 5.6810E-01 MBq	

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UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

CONTAINER AND WASTE DESCRIPTION

U.S. NUCLEAR REGULATORY COMMISSION

2. MANIFEST NUMBER
SM 70917-00

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DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
							PHYSICAL DESCRIPTION			14. CHEMICAL DESCRIPTION		15. RADIOLOGICAL DESCRIPTION	
6. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	5. CONTAINER DESCRIPTION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ☑ (µSv/hr) ☐ (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	11. WASTE DESCRIPTOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT IF > 0.1%	INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	16. WASTE CLASSIFICATION AS-Class A Stable AU-Class A Unstable B-Class B C-Class C
SM 70918-22/SM	4	0.2124	58.4925	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70918-23/SM	4	0.2124	54.9266	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70918-24/SM	4	0.2124	57.5433	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70918-25/SM	4	0.2124	50.8023	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70918-26/SM	4	0.2124	50.7814	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU

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UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

U.S. NUCLEAR REGULATORY COMMISSION

2. MANIFEST NUMBER
SM 70917-00

CONTAINER AND WASTE DESCRIPTION

DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
							PHYSICAL DESCRIPTION			14. CHEMICAL DESCRIPTION		15. RADIOLOGICAL DESCRIPTION	
5. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	6. CONTAINER DESCRIPTION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ☑ (µSv/hr) ☐ (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	11. WASTE DESCRIPTOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT (IF > 0.1%)	INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	16. WASTE CLASSIFICATION A/S-Class A Stable A/U-Class A Unstable B-Class B C-Class C
												Total 5.6610E-01 MBq	
SM 70916-27/SM	4	0.2124	52.1631	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Atl
												Total 5.6610E-01 MBq	
SM 70916-28/SM	4	0.2124	59.4206	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Atl
												Total 5.6610E-01 MBq	
SM 70916-29/SM	4	0.2124	45.3592	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Atl
												Total 5.6610E-01 MBq	
SM 70916-30/SM	4	0.2124	56.2455	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Atl
												Total 5.6610E-01 MBq	

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UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

U.S. NUCLEAR REGULATORY COMMISSION

2. MANIFEST NUMBER
SM 70917-06

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CONTAINER AND WASTE DESCRIPTION

DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
							PHYSICAL DESCRIPTION			14. CHEMICAL DESCRIPTION		15. RADIOLOGICAL DESCRIPTION	
5. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	6. CONTAINER DESCRIPTION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ☑ (µSv/hr) ☐ (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	11. WASTE DESCRIPTOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT (IF > 0.1%)	INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	16. WASTE CLASSIFICATION A-Class A Stable U-Class A Unstable B-Class B C-Class C
SM 70918-31/SM	4	0.2124	53.0703	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Act
												Total 5.6610E-01 MBq	
SM 70918-32/SM	4	0.2124	58.6991	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Act
												Total 5.6610E-01 MBq	
SM 70918-33/SM	4	0.2124	77.5643	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Act
												Total 5.6610E-01 MBq	
SM 70918-34/SM	4	0.2124	55.3383	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Act
												Total 5.6610E-01 MBq	
SM 70918-35/SM	4	0.2124	45.3592	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Act

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UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

U.S. NUCLEAR REGULATORY COMMISSION

2. MANIFEST NUMBER
SM 70917-00

CONTAINER AND WASTE DESCRIPTION

DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
							PHYSICAL DESCRIPTION			14. CHEMICAL DESCRIPTION		15. RADIOLOGICAL DESCRIPTION	
6. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	8. CONTAINER DESCRIPTION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ☑ (µSv/hr) ☐ (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	11. WASTE DESCRIPTOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT (IF > 0.1%)	INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	16. WASTE CLASSIFICATION S-Class A Stable U-Class A Unstable B-Class B C-Class C
												Total 5.6610E-01 MBq	
SM 70916-36/SM	4	0.2124	57.6062	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Atl
												Total 5.6610E-01 MBq	
SM 70916-37/SM	4	0.2124	346.9982	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Atl
												Total 5.6610E-01 MBq	
SM 70916-38/SM	4	0.2124	359.6359	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Atl
												Total 5.6610E-01 MBq	
SM 70916-39/SM	4	0.2124	410.0475	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Atl
												Total 5.6610E-01 MBq	

NRC FORM 541A
(3-95)

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

U.S. NUCLEAR REGULATORY COMMISSION

2. MANIFEST NUMBER
SM 70917-03

CONTAINER AND WASTE DESCRIPTION

DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
							PHYSICAL DESCRIPTION			CHEMICAL DESCRIPTION		RADIOLOGICAL DESCRIPTION	
5. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	6. CONTAINER DESCRIPTION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ☑ (µSv/hr) ☐ (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	11. WASTE DESCRIPTOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT (IF > 0.1%)	INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	16. WASTE CLASSIFICATION A/S-Class A Stable U-Class A Unstable B-Class B C-Class C
SM 70918-40/SM	4	0.2124	169.6149	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019853/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	All
												Total 5.6610E-01 MBq	
SM 70918-41/SM	4	0.2124	55.7919	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019853/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	All
												Total 5.6610E-01 MBq	
SM 70918-42/SM	4	0.2124	58.9670	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019853/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	All
												Total 5.6610E-01 MBq	
SM 70918-43/SM	4	0.2124	53.5239	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019853/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	All
												Total 5.6610E-01 MBq	
SM 70918-44/SM	4	0.2124	40.8233	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019853/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	All

NRC FORM 541A
(3-95)

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

CONTAINER AND WASTE DESCRIPTION

U.S. NUCLEAR REGULATORY COMMISSION

2. MANIFEST NUMBER
SM 70917-00

DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
							PHYSICAL DESCRIPTION			CHEMICAL DESCRIPTION		RADIOLOGICAL DESCRIPTION	
6. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	5. CONTAINER DESCRIP-TION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ☑ (µSv/hr) ☐ (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	11. WASTE DESCRIP-TOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	14. CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT IF > 0.1%	15. INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	16. WASTE CLASSIFI-CATION AS-Class A Stable U-Class A Unstable B-Class B C-Class C
												Total 5.6610E-01 MBq	
SM 70918-45/SM	4	0.2124	383.2856	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70918-46/SM	4	0.2124	72.1212	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70918-47/SM	4	0.2124	316.1539	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	
SM 70918-48/SM	4	0.2124	290.2991	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	AU
												Total 5.6610E-01 MBq	

NRC FORM 541A
(3-95)

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

U.S. NUCLEAR REGULATORY COMMISSION

2. MANIFEST NUMBER
SM 70917-00

3. PAGE 12 OF 12 PAGE(S)

CONTAINER AND WASTE DESCRIPTION

DISPOSAL CONTAINER DESCRIPTION							WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						
							PHYSICAL DESCRIPTION			CHEMICAL DESCRIPTION		RADIOLOGICAL DESCRIPTION	
5. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	6. CONTAINER DESCRIPTION (See Note 1)	7. VOLUME (m3)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL ☑ (µSv/hr) (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm2) ALPHA	BETA-GAMMA	11. WASTE DESCRIPTOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m3)	13. SORBENT SOLIDIFICATION STABILIZATION MEDIA (See Note 3)	CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT IF > 0.1%	INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	16. WASTE CLASSIFICATION A/S-Class A Stable A/U-Class A Unstable B-Class B C-Class C
SM 70918-49/SM	4	0.2124	68.4925	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Aul
												Total 5.6610E-01 MBq	
SM 70918-50/SM	4	0.2124	68.2245	<5.0000E+00	<3.6740E-06	<3.6740E-06	39	0.2124	100	Zirconium Oxide WP-019353/NP	NP	U-NAT 5.6610E-01 [1.0000E-02 kg]	Aul
												Total 5.6610E-01 MBq	

NRC FORM 541A (3-95)

WORK COPY PA

SITE NAME: METCO DIVISION PERKIN-ELMER
PROSPECT AVENUE FACILITY

EPA ID NO. NYD 131 318 651

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

1993 HAZARDOUS WASTE REPORT

FORM GM

WASTE GENERATION AND MANAGEMENT

INSTRUCTIONS: Read the detailed instructions beginning on page 13 of the Hazardous Waste Report booklet before completing this form.

Sec I

A. Waste description: - Instructions, Page 15
NON-COMBUSTIBLE, TOXIC SPENT HALOGENATED SOLVENT FROM DEGREASING OPERATION; 1,1,1-TRICHLOROETHANE

B. EPA hazardous waste code: Instructions, Page 16: F002

C. New York State hazardous waste code: Instructions, Page 16:

D. SIC code: Page 16: 3542

E. Origin Code: Page 16: 1
System type: M

F. Source code: Page 17: A07

G. Point of measuement: Page 17: 1

H. Form code: Page 17: B202

I. RCRA Radioactive- mixed: Page 17: 2

J. Reported TRI constituent: Page 18: 2

K. CAS numbers: Page 18
1. ____-__-__ 2. ____-__-__
3. ____-__-__ 4. ____-__-__ 5. ____-__-__

Sec II

A. Quantity of Hazardous Waste generated in 1992: Instructions, Page 18: NA

B. Quantity of Hazardous Waste generated in 1993: - Instructions, Page 18: 456.5

C. UOM: Instr., Page 19: 1 Density: ____.__
☐ 1. lbs/gal. ☐ 2. sg

D. Did this site treat on site, dispose of on site, recycle on site, or discharge to a sewer/POTW? Instr., Page 19
☐ 1. Yes (continue to system 1)
☒ 2. No (Skip to Sec. III)

ON-SITE SYSTEM 1 — PS Page Number
On-site system type Instr., Page 19: M
Quantity treated, disposed of, or recycled on site in 1993:

ON-SITE SYSTEM 2 — PS Page Number
On-site system type: Instr., Page 19: M
Quantity treated, disposed of, or recycled on site in 1993:

Sec III

A. Was any of this waste shipped off site in 1993? Instructions, Page 20
☒ 1. Yes (continue to Box "B")
☐ 2. No (Skip to Sec. IV)

	B. EPA ID Number of facility to which waste was shipped: Instr., Page 20	C. System type shipped to Instr., Page 20	D. Off- site availability code: Instr., Page 21	E. Total quantity shipped to this facility in 1993: Instr., Page 21
Site 1	NJD 089 216 790	M 061	1	456.5
Site 2		M		

Sec IV

A. Did any new activities in 1993 result in reduction of this waste? Instructions, Page 22
☐ 1. Yes (continue to Box "B")
☒ 2. No (This form is now complete)

B. Activity: - Instr., Page 22	C. Other effects ? Instr., Page 22	D. Quantity recycled in 1993 due to new activities: Instr., Page 22	E. Activity/production index: Instr., Page 22	F. 1993 source reduction quantity: Instr., Page 24
W W W W	☐ 1. Yes ☐ 2. No			

Comments:

Soil Alternatives

No.3

- Excavation
- Volume Reduction
- Stabilization of Non-Radioactive Soils
- Off-Site Disposal of Radioactive Soils
- On-Site Containment of Treated Soils
- Building Demolition

Soil Alternatives

No.4

- Removal and Off-Site Disposal of Ore Stockpiles
- Ex-Situ Electrokinetic Treatment
- On-Site Containment of Treated Soils
- Off-Site Disposal of Concentrated Residuals
- Building Demolition

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: NYD131318651
2. Page 1 of: 1
3. Emergency Response Phone: (908) 354-0210
4. Manifest Tracking Number: 001028523 JJK

5. Generator's Name and Mailing Address: SULZER METCO US INC
1101 PROSPECT AVE
WESTBURY, NY 11590
Generator's Phone: (516) 338-2417

Generator's Site Address (if different than mailing address): SAME

6. Transporter 1 Company Name: CLEAN VENTURE INC.
U.S. EPA ID Number: NJ0000027193

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Cycle Chem Inc.
217 South First Street
Elizabeth, NJ 07206
Facility's Phone: (908) 355-5800
U.S. EPA ID Number: NJD002200046

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. Waste Paint related material 8 UN3066 PG III ERG# 153	2	~~BM~~ DF	81	P	D002 T
X	2. WASTE Corrosive liquid, N.O.S. 8 UN1760 PG II	1	DF ~~BM~~	504	P	D002 D006 D007 D008
	3.					
	4.					

SULZER METCO (US) INC.

14. Special Handling Instructions and Additional Information 945948/-1/89352/235172 (1)IDA-49 CONCRETE ETCHER
2) STCR-311 CUPPER CLEANER

AUG 28 2008
EHS DEPARTMENT

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Jim Kouhoumelis
Signature:
Month 08 Day 08 Year 08

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Kevin Howard
Signature:
Month 08 Day 08 Year 08
Transporter 2 Printed/Typed Name:
Signature:
Month Day Year

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator)
Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. H141 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: Alicia Gibson
Signature:
Month 08 Day 08 Year 08

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: [illegible]
2. Page 1 of 1
3. Emergency Response Phone: [illegible]
4. Manifest Tracking Number: 001028523 JJK

5. Generator's Name and Mailing Address: SULZER METCO US INC
1101 PROSPECT AVE
WESTBURY, NY 11590
Generator's Phone: [illegible]

Generator's Site Address (if different than mailing address): SAME

6. Transporter 1 Company Name: CLEAN HARBORS INC.
U.S. EPA ID Number: [illegible]

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: [illegible] INC.
207 SOUTH [illegible] STREET
[illegible], NJ [illegible]
Facility's Phone: [illegible]
U.S. EPA ID Number: [illegible]

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
	1. [illegible]	2	DF	81	P	[illegible]	1	
X	2. WASTE CORROSIVE liquid, N.O.S. 8 UN1760 PGII	1	DF	504	P	D002 D007	D006 D008	
	3.							
	4.							

14. Special Handling Instructions and Additional Information: [illegible] CONTAIN CF ETCHER
2) STCR-311 COPPER Cleaner

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: [illegible] Signature: [illegible] Month 08 Day 08 Year 08

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Kevin Howard Signature: [illegible] Month 08 Day 08 Year 08
Transporter 2 Printed/Typed Name: Signature: Month Day Year

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. H141 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name Signature Month Day Year

GENERATOR | INT'L | TRANSPORTER | DESIGNATED FACILITY

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

GENERATOR'S INITIAL COPY

U.S. EPA Form 8700-22

Read all instructions before completing this form.

1. This form has been designed for use on a 12-pitch (elite) typewriter which is also compatible with standard computer printers; a firm point pen may also be used—press down hard.
2. Federal regulations require generators and transporters of hazardous waste and owners or operators of hazardous waste treatment, storage, and disposal facilities to complete this form (EPA Form 8700–22) and, if necessary, the continuation sheet (EPA Form 8700–22A) for both inter- and intrastate transportation of hazardous waste.

Public reporting burden for this collection of information is estimated to average: 30 minutes for generators, 10 minutes for transporters, and 25 minutes for owners or operators of treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, completing, reviewing and transmitting the form. Any correspondence regarding the PRA burden statement for the manifest must be sent to the Director of the Collection Strategies Division in EPA's Office of Information Collection at the following address: U.S. Environmental Protection Agency (2822T), 1200 Pennsylvania Ave., NW., Washington, DC 20460. Do not send the completed form to this address.

I. Instructions for Generators

Item 1. Generator's U.S. EPA Identification Number

Enter the generator's U.S. EPA twelve digit identification number, or the State generator identification number if the generator site does not have an EPA identification number.

Item 2. Page 1 of ___

Enter the total number of pages used to complete this Manifest (*i.e.*, the first page (EPA Form 8700-22) plus the number of Continuation Sheets (EPA Form 8700-22A), if any).

Item 3. Emergency Response Phone Number

Enter a phone number for which emergency response information can be obtained in the event of an incident during transportation. The emergency response phone number must:

1. Be the number of the generator or the number of an agency or organization who is capable of and accepts responsibility for providing detailed information about the shipment;
2. Reach a phone that is monitored 24 hours a day at all times the waste is in transportation (including transportation related storage); and
3. Reach someone who is either knowledgeable of the hazardous waste being shipped and has comprehensive emergency response and spill cleanup/incident mitigation information for the material being shipped or has immediate access to a person who has that knowledge and information about the shipment.

Note: Emergency Response phone number information should only be entered in Item 3 when there is one phone number that applies to all the waste materials described in Item 9b. If a situation (*e.g.*, consolidated shipments) arises where more than one Emergency Response phone number applies to the various wastes listed on the manifest, the phone numbers associated with each specific material should be entered after its description in Item 9b.

Item 4. Manifest Tracking Number

This unique tracking number must be pre-printed on the manifest by the forms printer.

Item 5. Generator's Mailing Address, Phone Number and Site Address

Enter the name of the generator, the mailing address to which the completed manifest signed by the designated facility should be mailed, and the generator's telephone number. Note, the telephone number (including area code) should be the normal business number for the generator, or the number where the generator or his authorized agent may be reached to provide instructions in the event the designated and/or alternate (if any) facility rejects some or all of the shipment. Also enter the physical site address from which the shipment originates only if this address is different than the mailing address.

Item 6. Transporter 1 Company Name, and U.S. EPA ID Number

Enter the company name and U.S. EPA ID number of the first transporter who will transport the waste. Vehicle or driver information may not be entered here.

Item 7. Transporter 2 Company Name and U.S. EPA ID Number

If applicable, enter the company name and U.S. EPA ID number of the second transporter who will transport the waste. Vehicle or driver information may not be entered here.

If more than two transporters are needed, use a Continuation Sheet(s) (EPA Form 8700-22A).

Item 8. Designated Facility Name, Site Address, and U.S. EPA ID Number

Enter the company name and site address of the facility designated to receive the waste listed on this manifest. Also enter the facility's phone number and the U.S. EPA twelve digit identification number of the facility.

Item 9. U.S. DOT Description (Including Proper Shipping Name, Hazard Class or Division, Identification Number, and Packing Group)

Item 9a. If the wastes identified in Item 9b consist of both hazardous and nonhazardous materials, then identify the hazardous materials by entering an "X" in this Item next to the corresponding hazardous material identified in Item 9b.

Item 9b. Enter the U.S. DOT Proper Shipping Name, Hazard Class or Division, Identification Number (UN/NA) and Packing Group for each waste as identified in 49 CFR 172. Include technical name(s) and reportable quantity references, if applicable.

Note: If additional space is needed for waste descriptions, enter these additional descriptions in Item 27 on the Continuation Sheet (EPA Form 8700-22A). Also, if more than one Emergency Response phone number applies to the various wastes described in either Item 9b or Item 27, enter applicable Emergency Response phone numbers immediately following the shipping descriptions for those Items.

Item 10. Containers (Number and Type)

Enter the number of containers for each waste and the appropriate abbreviation from Table I (below) for the type of container.

TABLE I.--TYPES OF CONTAINERS

BA = Burlap, cloth, paper, or plastic bags.	DT = Dump truck.
CF = Fiber or plastic boxes, cartons, cases.	DW = Wooden drums, barrels, kegs.
CM = Metal boxes, cartons, cases (including roll-offs).	HG = Hopper or gondola cars.
CW = Wooden boxes, cartons, cases.	TC = Tank cars.
CY = Cylinders.	TP = Portable tanks.
DF = Fiberboard or plastic drums, barrels, kegs.	TT = Cargo tanks (tank trucks).
DM = Metal drums, barrels, kegs.	

Item 11. Total Quantity

Enter, in designated boxes, the total quantity of waste. Round partial units to the nearest whole unit, and *do not* enter decimals or fractions. To the extent practical, report quantities using appropriate units of measure that will allow you to report quantities with precision. Waste quantities entered should be based on actual measurements or reasonably accurate estimates of actual quantities shipped. Container capacities are not acceptable as estimates.

Item 12. Units of Measure (Weight/Volume)

Enter, in designated boxes, the appropriate abbreviation from Table II (below) for the unit of measure.

TABLE II.--UNITS OF MEASURE

G = Gallons (liquids only).	N = Cubic Meters.
K = Kilograms.	P = Pounds.
L = Liters (liquids only).	T = Tons (2000 Pounds).
M = Metric Tons (1000 kilograms).	Y = Cubic Yards.

Note: Tons, Metric Tons, Cubic Meters, and Cubic Yards should only be reported in connection with very large bulk shipments, such as rail cars, tank trucks, or barges.

Item 13. Waste Codes

Enter up to six federal and state waste codes to describe each waste stream identified in Item 9b. State waste codes that are not redundant with federal codes must be entered here, in addition to the federal waste codes which are most representative of the properties of the waste.

Item 14. Special Handling Instructions and Additional Information

1. Generators may enter any special handling or shipment-specific information necessary for the proper management or tracking of the materials under the generator's or other handler's business processes, such as waste profile numbers, container codes, bar codes, or response guide numbers. Generators also may use this space to enter additional descriptive information about their shipped materials, such as chemical names, constituent percentages, physical state, or specific gravity of wastes identified with volume units in Item 12.
2. This space may be used to record limited types of federally required information for which there is no specific space provided on the manifest, including any alternate facility designations; the manifest tracking number of the original manifest for rejected wastes and residues that are re-shipped under a second manifest; and the specification of PCB waste descriptions and PCB out-of-service dates required under 40 CFR 761.207. Generators, however, cannot be required to enter information in this space to meet state regulatory requirements.

Item 15. Generator's/Offeror's Certifications

1. The generator must read, sign, and date the waste minimization certification statement. In signing the waste minimization certification statement, those generators who have not been exempted by statute or regulation from the duty to make a waste minimization certification under section 3002(b) of RCRA are also certifying that they have complied with the waste minimization requirements. The Generator's Certification also contains the required attestation that the shipment has been properly prepared and is in proper condition for transportation (the shipper's certification). The content of the shipper's certification statement is as follows: "I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent." When a party other than the generator prepares the shipment for transportation, this party may also sign the shipper's certification statement as the offeror of the shipment.
2. Generator or Offeror personnel may preprint the words, "On behalf of" in the signature block or may hand write this statement in the signature block prior to signing the generator/offeror certification, to indicate that the individual signs as the employee or agent of the named principal.

Note: All of the above information except the handwritten signature required in Item 15 may be pre-printed.

Cycle Chem, Inc

201 South First Street Elizabeth, NJ 07206 PHONE: 908-355-5800, FAX: 908-355-0562

Land Disposal Restriction Notification and Certification Form

Generator: SULZER METCO US INC
EPAID: NYD131318651

Manifest Number: 235172
Manifest Tracking Number: 001028523JJK

The EPA hazardous wastes identified below must be treated to the applicable treatment standards Set forth In 40 CFR 268.40.

EPA Waste Code Information

Manifest Line	Waste-water?	EPACodes
Page 1 Line 1	No	D002
Page 1 Line 2	No	Previously Shipped - LDR On File

Underlying Hazardous Constituents

(None present unless identified below.)

Manifest Line	Constituents

I certify that all information submitted On this Land Disposal Restriction and Certification Form is accurate and complete, to the best of my knowledge and information.

Signature: X

Name: Tim Kourkoulis

Title:

Date: 08/08/08

Bottle west.

EPHM-2 REV. 5/07

STATE OF CONNECTICUT

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST PROGRAM
79 Elm St., Hartford, CT 06106-5127

Please type (or print) *(Form designed for use on elite (12 pitch) typewriter.)*

FOR STATE USE ONLY

FOR SPILLS WITHIN CONNECTICUT, CONTACT DEP - C. AND D. SPECIAL SPILL RESPONSE AT (860) 424-3338

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD - 800-424-8802

GENERATOR

TRANSPORTER

FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No. CAW	Manifest Document No. 5 21 55	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but may be required by State law.

3. Generator's Name and Mailing Address: Sulzer Metco US Inc. Attn: Peter DiPietramtonna, 1101 Prospect Avenue, Westbury NY 11590

4. Generator's Phone (516) 338 2337

A. State Manifest Document Number: CT F 1152155

B. G.S.I. (Gen. Site Address): 220 Miller Place, Hicksville NY 11590

5. Transporter 1 Company Name: Clean Harbors Env. Services Inc — 6. US EPA ID Number: MAD039322250

7. Transporter 2 Company Name: Clean Harbors Env. Services Inc — 8. US EPA ID Number: MAD039322250

C. S.T.I. (Trans. Lic. Plate #): 614140 MA

D. Tran. Phone (781) 849-1800

9. Designated Facility Name and Site Address: Clean Harbors of Connecticut, 51 Broderick Road, Bristol, CT 06010 — 10. US EPA ID Number: CTD000604988

E. S.T.I. (Trans. Lic. Plate #): Same

F. Tran. Phone ( )

G. State Facility's ID (Not Required)

H. Facility's Phone (860) 583-8917

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. NON REGULATED MATERIALS (Metal, Ceramic Powder) (RQ) water) NON DOT REGULATED	0.0.1	T.T	0.14.00	G	EPA NONE / STATE CR04
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
a. (RQ) (SL)
c.
b.
d.

K. Handling Codes for Wastes Listed Above

	Interim	Final	Interim	Final
a.	S02	T50	c.	
b.			d.	

15. Special Handling Instructions and Additional Information: In Case of Emergency Call 1-800-483-3718
IIA CH189134
WO#K-700098

Point of Departure

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR,** if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month	Day	Year
X [illegible]	[illegible]	12	09	03

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Richard Sanchez	[illegible]	12	09	03

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Antonio Morales	Antonio Morales	12	1	03

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year
Michael J. Cavally	[illegible]	12	12	03

EPA Form 8700-22 (Rev. 9/91) Form Approved OMB No. 2050-0039

COPY 3: FACILITY TO GENERATOR

CT F 1152155

COPY 3: FACILITY TO GENERATOR

EPHM-2 REV. 5/97

STATE OF CONNECTICUT

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST PROGRAM
79 Elm St., Hartford, CT 06106-5127

FOR STATE USE ONLY

Please type (or print) *(Form designed for use on elite (12-pitch) typewriter.)*

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER - U.S. COAST GUARD - 1-800-424-8802 FOR SPILLS WITHIN CONNECTICUT CONTACT DEP - OIL AND CHEMICAL SPILL RESPONSE AT (860) 424-3338

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAW | Manifest Document No. 5-21-55
2. Page 1 of 1
Information in the shaded areas is not required by Federal law but may be required by State law.

A. State Manifest Document Number **CT F 1152155**

3. Generator's Name and Mailing Address [illegible]
4. Generator's Phone (516) 3382337

B. G.S.I. (Gen. Site Address) [illegible]

5. Transporter 1 Company Name [illegible] | 6. US EPA ID Number [illegible]

C. S.T.I. (Trans. Lic. Plate #) 614140 E

7. Transporter 2 Company Name | 8. US EPA ID Number

D. Tran. Phone ([illegible])

9. Designated Facility Name and Site Address [illegible] | 10. US EPA ID Number

E. S.T.I. (Trans. Lic. Plate #)

F. Tran. Phone ( )

G. State Facility's ID (Not Required)

H. Facility's Phone [illegible]

11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. [illegible] NON DOT [illegible]	001	TT	0.14	G	EPA / STATE [illegible]
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
a. [illegible] | c.
b. | d.

K. Handling Codes for Wastes Listed Above
a. Interim / Final | c. Interim / Final
b. Interim / Final | d. Interim / Final

15. Special Handling Instructions and Additional Information [illegible]
[illegible]
[illegible] Point of Departure

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GENERATOR — Printed/Typed Name: X | Signature | Month 12 Day 09 Year 03

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible] | Signature | Month 12 Day 09 Year 03

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name | Signature | Month Day Year

EPA Form 8700-22 (Rev. 9/91) Form Approved OMB No 2050-0039

COPY 6: GENERATOR MAILS TO DESTINATION STATE

CT F 1152155

COPY 6: GENERATOR MAILS TO DESTINATION STATE

EPHM-2 REV. 5/97

STATE OF CONNECTICUT

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST PROGRAM
79 Elm St., Hartford, CT 06106-5127

FOR STATE USE ONLY

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IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER U.S. COAST GUARD - 800-424-8802 FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILL RESPONSE AT (860) 424-3338

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAW
Manifest Document No.: 3.21.5.5
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but may be required by State law.

3. Generator's Name and Mailing Address
4. Generator's Phone (516) 352-2537

A. State Manifest Document Number: **CT F 1152155**
B. G.S.I. (Gen. Site Address)

5. Transporter 1 Company Name
6. US EPA ID Number

7. Transporter 2 Company Name
8. US EPA ID Number

C. S.T.I. (Trans. Lic. Plate #)
D. Tran. Phone ( )

9. Designated Facility Name and Site Address
10. US EPA ID Number

E. S.T.I. (Trans. Lic. Plate #)
F. Tran. Phone ( )
G. State Facility's ID (Not Required)
H. Facility's Phone

GENERATOR

11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. [illegible] (Petroleum Products) [illegible]	001	11	[illegible]	G	EPA [illegible] STATE [illegible]
b.					EPA STATE
c.					EPA STATE
d.					EPA STATE

J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above	Interim	Final	Interim	Final
a. [illegible]	c.	a.			c.	
b.	d.	b.			d.	

15. Special Handling Instructions and Additional Information
[illegible]

Point of Departure:

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Printed/Typed Name: X
Signature
Month Day Year: 12 [illegible] 3

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: [illegible]
Signature: [illegible]
Month Day Year: 12 [illegible]

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name
Signature
Month Day Year

EPA Form 8700-22 (Rev. 9/91) Form Approved OMB No.2050-0039

COPY 7: GENERATOR MAILS TO GENERATOR STATE

CT F 1152155

COPY 7: GENERATOR MAILS TO GENERATOR STATE

EIHM-2 REV. 6/97

STATE OF CONNECTICUT

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST PROGRAM
79 Elm St., Hartford, CT 06106-5127

FOR STATE USE ONLY

Please type (or print) *(Form designed for use on elite (12 pitch) typewriter.)*

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but may be required by State law.

3. Generator's Name and Mailing Address

4. Generator's Phone ( )

5. Transporter 1 Company Name — 6. US EPA ID Number

7. Transporter 2 Company Name — 8. US EPA ID Number

9. Designated Facility Name and Site Address — 10. US EPA ID Number

A. State Manifest Document Number: **CT F 1152155**

B. G.S.I. (Gen. Site Address)

C. S.T.I. (Trans. Lic. Plate #)

D. Tran. Phone ( )

E. S.T.I. (Trans. Lic. Plate #)

F. Tran. Phone ( )

G. State Facility's ID (Not Required)

H. Facility's Phone

11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.					EPA / STATE
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
		Interim	Final	Interim	Final
a.	c.	a.		c.	
b.	d.	b.		d.	

15. Special Handling Instructions and Additional Information

Point of Departure:

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GENERATOR — Printed/Typed Name: X — Signature — Month / Day / Year

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials — Printed/Typed Name — Signature — Month / Day / Year

18. Transporter 2 Acknowledgement of Receipt of Materials — Printed/Typed Name — Signature — Month / Day / Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name — Signature — Month / Day / Year

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802. FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILL RESPONSE AT (860) 424-3338

COPY 8: GENERATOR RETAINS

CT F 1152155

EPA Form 8700-22 (Rev. 9/91) Form Approved OMB No.2050-0039

COPY 8: GENERATOR RETAINS

SHIFT TIME

DAY & DATE Tues 12/9/03

JOB # BK 700098

QUOTE / TASK #

CLIENT Salzer Metro (CS) Inc

BILLING ADDRESS

1101 Prospect Ave
Westbury NY

CleanHarbors
ENVIRONMENTAL SERVICES, INC.
(24 HOUR SERVICE)

P.O. #/COD AMOUNT

T&M ☐ CONTRACT ☐ CHANGE ORDER ☐

JOB LOCATION 320 [illegible]

CONTACT: [illegible]

JOB DESCRIPTION: [illegible] of [illegible]
[illegible] of [illegible] from
outside [illegible]

LABOR:

NAME	TITLE	PER DIEM	ST	OT	DT
	SUPERVISOR				
A. Guerrero Jr	FOREMAN		8	2.5	
E. Sanchez	EQ. OPERATOR		8	2.5	
M. Montoya	EQ. OPERATOR		8	2.5	
J.D. Stokes	FIELD TECH		8	2.5	
M. Russell	FIELD TECH		8	2.5	
	FIELD TECH				

COMMENTS:

Arrive at BKgn [illegible] load of [illegible]
call BKgn shop [illegible] on site [illegible]
hoses [illegible] w/ [illegible]
[illegible] load [illegible]
unloading [illegible] Boat [illegible]
[illegible] need [illegible] to [illegible]
to [illegible] [illegible] equipment for
next day

DISPOSAL: Non-haz Motor Gasoline Tank [illegible]

DESTINATION	Buffalo NY	
	AMOUNT	MANIFEST #
LIQUID (BULK)	1,400 GALS.	278 1152155
SOLID (BULK)	TONS/YDS.	

JOB COMPLETED ☐ YES ☑ NO

MATERIAL:

QTY.	DESCRIPTION
	SPEEDI DRI
	DRUM TYPE:
	DRUM TYPE:
	RAIN GEAR

NUMBER OF COMPLETE INITIAL PPE SETS	NUMBER OF EMPLOYEES IN PPE
PPE LEVEL (CIRCLE ONE) A B C D	
PPE TYPE (CIRCLE ONE)	

48-14-1 (3-89)-7f

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

Form Approved OMB No. 2050-0039, Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD 057731663 — Manifest Document No. 74682
2. Page 1 of 1

Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
METCO
325 DUFFY AVE
HICKSVILLE NY 11801-3627
4. Generator's Phone (516) 938-1661

A. State Manifest Document Number NY C 359540-8
B. Generator's ID SAME

5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.
6. US EPA ID Number ILD 984908202
C. State Transporter's ID CT 869
D. Transporter's Phone (516) 842-6311

7. Transporter 2 (Company Name)
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone ( )

9. Designated Facility Name and Site Address 211508
SAFETY-KLEEN CORP.
80 STARR
NO ADDITYVILLE, NY 11701
10. US EPA ID Number NYD 000708198
G. State Facility's ID
H. Facility's Phone (516) 842-6311

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PG III (D001) (D006, D008, D018, D035, D039, D040) (ERG#27)	1	DM	10	G	EPA D001 STATE D039
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
1 (A) D018 D006
a (A) D008, D035, D040
b
c
d

K. Handling Codes for Wastes Listed Above
a R
b
c
d

15. Special Handling Instructions and Additional Information 9525 03101717 794655 2-11-96-(540) 01
EMERGENCY RESPONSE-703-889-4860 24HR
DOT# A: SEQ B: C:

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

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Printed/Typed Name Bill Bocard — Signature — Mo. Day Year 04 15 96

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name Tom Fentz — Signature — Mo. Day Year 04 15 96

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name — Signature — Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name — Signature — Mo. Day Year

NY C 359540-8

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 5-Generator-Mailed by TSD facility

P2SUL005941

2-118-08

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

Form Approved OMB No. 2050-0039, Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD 057731663
Manifest Document No.: 94685
2. Page 1 of 1
Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
METCO
325 DUFFY AVE
HICKSVILLE NY 11801--367
4. Generator's Phone (516) 938-1661

A. State Manifest Document Number: NY C 359540-8
B. Generator's ID: SAME

5. Transporter 1 (Company Name): SAFETY-KLEEN CORP.
6. US EPA ID Number: ILD 984908202
C. State Transporter's ID: CT 869
D. Transporter's Phone: 516 842-6311

7. Transporter 2 (Company Name):
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone ( )

9. Designated Facility Name and Site Address: 211808
SAFETY-KLEEN CORP.
80 SEABRO
NO AMITYVILLE. NY 11701
10. US EPA ID Number: NYD 000708198
G. State Facility's ID:
H. Facility's Phone: 516 842-6311

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII (D001) (D006, D008, D018, D035, D039, D040) (ERG#27)	1	DM	10	G	EPA D001 D039
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
a I(A) D018 D006 (A) D008, D035, D040
b
c
d

K. Handling Codes for Wastes Listed Above
a: X
b:
c:
d:

15. Special Handling Instructions and Additional Information 952B 83181719 794685 2-118-08-1500 01
EMERGENCY RESP#1-708-888-4660 24HR
SKDOT# A: 585 B: C: D:

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

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Printed/Typed Name: Bill Bowmer
Signature:
Mo. Day Year: 07 13 95

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: Tom Rentz
Signature:
Mo. Day Year: 07 13 95

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name:
Signature:
Mo. Day Year:

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name:
Signature:
Mo. Day Year:

NYC 359540-8

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EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 8-Generator-retained by generator

P2SUL005942

2-118-08

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

Form Approved OMB No. 2050-0039. Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NYD 057731663
Manifest Document No.: 94685
2. Page 1 of 1

Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
METCO
325 DUFFY AVE
HICKSVILLE NY 11801--367
4. Generator's Phone (516) 938-1661

A. State Manifest Document Number: NY C 359540-8
B. Generator's ID: SAME

5. Transporter 1 (Company Name): SAFETY-KLEEN CORP.
6. US EPA ID Number: ILD 984908202

C. State Transporter's ID: CT 7869
D. Transporter's Phone: 516 842-6311

7. Transporter 2 (Company Name):
8. US EPA ID Number:

E. State Transporter's ID:
F. Transporter's Phone ( )

9. Designated Facility Name and Site Address: 211808
SAFETY-KLEEN CORP.
80 SEABRO
NO AMITYVILLE. NY 11701
10. US EPA ID Number: NYD 000708198

G. State Facility's ID:
H. Facility's Phone: 516 842-6311

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII (D001) (D006, D008, D018, D035, D039, D040) (ERG#27)	1	DM	10	G	EPA D001 D039
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
I (A) D018 D006
a (A) D008, D035, D040,
b
c
d

K. Handling Codes for Wastes Listed Above
a [X]
b [ ]
c [ ]
d [ ]

15. Special Handling Instructions and Additional Information 9528 83181719 794685 2-118-08-1500 01
EMERGENCY RESP#1-708-889-4660 24HR
SHDOT# A: 585 B: C: D:

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Bill Bowman
Signature:
Mo. Day Year: 071395

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name: Tom Rentz
Signature:
Mo. Day Year: 071395

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name:
Signature:
Mo. Day Year:

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name:
Signature:
Mo. Day Year:

NYC 0009040

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 8-Generator-retained by generator

P2SUL005943

safety-kleen

LAND DISPOSAL RESTRICTION AND WASTE ANALYSIS CRITERIA FORM

PHASE II LDR NOTICE: GENERATOR NOT REQUIRED TO LIST UNDERLYING CONSTITUENTS BECAUSE TREATER WILL MONITOR FOR THE CONSTITUENTS BEFORE LAND DISPOSAL.

TO: SAFETY-KLEEN CORP. (DESIGNATED FACILITY) EPA ID NO. NYD000708198

(DESIGNATED FACILITY)

2-118-08-1500 01 794684 9528

ADDRESS: 80 SEABRO NO AMITYVILLE, NY 11701

Under manifest/sales service number NYC359540-8 the generator noted below is shipping to you a waste determined to be restricted under 40 CFR Part 268. In accordance with 40 CFR Part 268.7, the generator hereby provides notice that the waste is restricted from land disposal. A copy of this form must be kept by the generator and facility for five (5) years from the date of waste shipment. * SEE BELOW MG/KG

PLEASE ✓ THE APPROPRIATE BOXES

WASTE NAME (FOR NON-WASTE WATER)	WASTE CODE	THE WASTE MAY CONTAIN THE FOLLOWING RESTRICTED CONSTITUENTS	TREATMENT STANDARD (mg/l) OR METHOD
☒ Waste Petroleum Naphtha 105	D001	Ignitable Liquid (High TOC Subcategory) Halogenated Organic Compounds (HOC's)≥1000 mg/l	Incineration (INCIN), fuel substitution (FSUBS) or recovery (RORGS)(40 CFR 268.42)(non-waste water) INCIN (40 CFR 268.42)(non-waste water)
	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/L
	D035	Methyl Ethyl Ketone	36 (non-waste water) MG/L
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/L
	D040	Trichloroethylene	6.0 (non-waste water) MG/L
☐ Waste Petroleum Naphtha 140	D001	Ignitable Liquid (High TOC Subcategory)	INCIN, FSUBS, or RORGS (40 CFR 268.42)(non-waste water)
	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/L
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/L
☐ Actrel Solvent (If customer specific TCLP is not available)	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/L
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/L
	D040	Trichloroethylene	6.0 (non-waste water) MG/L
☐ Aqueous Parts Washer	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
☐ Cyclonic, 150 Premium Solvent OR AQUEOUS BRAKE CLEANER	D039	Tetrachloroethylene	6.0 (non-waste water) MG/L
☐ Waste Petroleum Naphtha (sludges from Safety-Kleen Service Center Operations)	D001	Ignitable Liquid (High TOC Subcategory)	INCIN, FSUBS, or RORGS (40 CFR 268.42)(non-waste water)
	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/L
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/L
☐ Waste Compound Cleaning Liquid/ Immersion cleaner 699	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/L
	D027	1, 4-Dichlorobenzene	6.0 (non-waste water) MG/L
	D035	Methyl Ethyl Ketone	36 (non-waste water) MG/L
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/L
	D040	Trichloroethylene	6.0 (non-waste water) MG/L
☐ Waste Gasoline Filters	D001	Ignitable Liquid (High TOC Subcategory)	INCIN, FSUBS, or RORGS (40 CFR 268.42)(non-waste water)
	D018	Benzene	10 (non-waste water) MG/L

OPTIONAL STATE INFO.

MACHINE NUMBER	SPECIFIC GRAVITY	EXCESS FLUID IN DRUM? (MS>2/3)(C>1/3)(Y/N)	OFF-COLOR? (Y/N)	MORE THAN 30% SOLIDS? (Y/N)	UNUSUAL ODOR? (Y/N)	UNUSUAL MATERIALS INCLUDED/ADDED? (Y/N)
301-66861						

SPECIFIC GRAVITY ACCEPTANCE GUIDELINES

SALES REPRESENTATIVE SIGNATURE (FOR OPTIONAL STATE INFORMATION) ** NO SIGNATURE REQUIRED **

The constituent composition is based on knowledge of the waste (via Material Safety Data Sheets for the chemical(s) used, and the process which created the waste).

These treatment standards do not preclude reclamation prior to final disposition.

Generator Company METCO EPA ID NO.: NYD057731663

P2SUL005944

* ALSO IN ACCORDANCE WITH 40 CFR 376.4(C)

Safety-Kleen Corp. manages the waste through its recycling and fuels programs in accordance with all applicable elements of the land disposal restriction.

printed on recycled p

48-14-1 (3-89)-7f

2-118-08

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

Form Approved OMB No. 2050-0039, Expires 9-30-96

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NYD 057731660 — Manifest Document No. 94685
2. Page 1 of 1 — Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
METCO
325 DUFFY AVE
HICKSVILLE NY 11801-3367
4. Generator's Phone (516) 938-1661

A. State Manifest Document Number NYC 359540-8
B. Generator's ID SAME
C. State Transporter's ID CT 869
D. Transporter's Phone (516) 842-6311
E. State Transporter's ID
F. Transporter's Phone ( )
G. State Facility's ID
H. Facility's Phone (516) 842-6311

5. Transporter 1 (Company Name) SAFETY-KLEEN CORP. — 6. US EPA ID Number ILD 934908202
7. Transporter 2 (Company Name) — 8. US EPA ID Number

9. Designated Facility Name and Site Address 311608
SAFETY-KLEEN CORP.
80 SEABRO
NO AMITYVILLE NY 11701
10. US EPA ID Number NYD 000708198

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII (D001) (D006, D008, D018, D035, D039, D040) (ERG#27)	1	DM	10	G	EPA D001 D089
b.					EPA / STATE
c.					EPA / STATE
d.					EPA / STATE

J. Additional Descriptions for Materials Listed Above
I (A) D018 D006
a (A) D008, D035, D040
c
b
d

K. Handling Codes for Wastes Listed Above
a
c
b
d

15. Special Handling Instructions and Additional Information 9538 83181719 794685 2-118-08-1500 01
EMERGENCY RESP#1-708-228-4660 24HR
SHDOT# A: 585 B: C: D:

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Printed/Typed Name — Signature — Mo. Day Year 07 15 15

TRANSPORTER

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name Tom Bentz — Signature — Mo. Day Year 07 15 15

18. Transporter 2 (Acknowledgement of Receipt of Materials)
Printed/Typed Name — Signature — Mo. Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name — Signature — Mo. Day Year

NYC 359540-8

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete

COPY 8-Generator-retained by generator

P2SUL005945

LAND DISPOSAL RESTRICTION AND WASTE ANALYSIS CRITERIA FORM

safety-kleen

PHASE II LDR NOTICE: GENERATOR NOT REQUIRED TO LIST UNDERLYING CONSTITUENTS BECAUSE TREATER WILL MONITOR FOR THE CONSTITUENTS BEFORE LAND DISPOSAL.

TO: SAFETY-KLEEN CORP. (DESIGNATED FACILITY) EPA ID NO. NYDC00708198 (DESIGNATED FACILITY)

2-118-08-1500 01 794684 9528

ADDRESS: 80 SEABRO AVE AMITYVILLE, NY 11701

Under manifest/sales service number NYC35940-8 the generator noted below is shipping to you a waste determined to be restricted under 40 CFR Part 268. In accordance with 40 CFR Part 268.7, the generator hereby provides notice that the waste is restricted from land disposal. A copy of this form must be kept by the generator and facility for five (5) years from the date of waste shipment. * SEE BELOW MG/KG

PLEASE ✓ THE APPROPRIATE BOXES

WASTE NAME (FOR NON-WASTE WATER)	WASTE CODE	THE WASTE MAY CONTAIN THE FOLLOWING RESTRICTED CONSTITUENTS	TREATMENT STANDARD (mg/l) OR METHOD
☒ Waste Petroleum Naphtha 105	D001	Ignitable Liquid (High TOC Subcategory) Halogenated Organic Compounds (HOC's)≥1000 mg/l	Incineration (INCIN), fuel substitution (FSUBS) or recovery (RORGS)(40 CFR 268.42)(non-waste water) INCIN (40 CFR 268.42)(non-waste water)
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	D035	Methyl Ethyl Ketone	36 (non-waste water) MG/L
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/L
	D040	Trichloroethylene	6.0 (non-waste water) MG/L
☐ Waste Petroleum Naphtha 140	D001	Ignitable Liquid (High TOC Subcategory)	INCIN, FSUBS, or RORGS (40 CFR 268.42)(non-waste water)
	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/L
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/L
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☐ Cyclonic, 150 Premium Solvent OR AQUEOUS BRAKE CLEANER	D039	Tetrachloroethylene	6.0 (non-waste water) MG/L
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	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/L
	D039	Tetrachloroethylene	6.0 (non-waste water) MG/L
☐ Waste Compound Cleaning Liquid/ Immersion cleaner 699	D006	Cadmium	1.0 (non-waste water) MG/L
	D008	Lead	5.0 (non-waste water) MG/L
	D018	Benzene	10 (non-waste water) MG/L
	D027	1, 4-Dichlorobenzene	6.0 (non-waste water) MG/L
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	D039	Tetrachloroethylene	6.0 (non-waste water) MG/L
	D040	Trichloroethylene	6.0 (non-waste water) MG/L
☐ Waste Gasoline Filters	D001	Ignitable Liquid (High TOC Subcategory)	INCIN, FSUBS, or RORGS (40 CFR 268.42)(non-waste water)
	D018	Benzene	10 (non-waste water) MG/L

OPTIONAL STATE INFO

MACHINE NUMBER	SPECIFIC GRAVITY	EXCESS FLUID IN DRUM? (MS>2/3)(C>1/3)(Y/N)	OFF-COLOR? (Y/N)	MORE THAN 30% SOLIDS? (Y/N)	UNUSUAL ODOR? (Y/N)	UNUSUAL MATERIALS INCLUDED/ADDED? (Y/N)
301-66861						

SPECIFIC GRAVITY ACCEPTANCE GUIDELINES

SALES REPRESENTATIVE SIGNATURE (FOR OPTIONAL STATE INFORMATION) ** NO SIGNATURE REQUIRED **

The constituent composition is based on knowledge of the waste (via Material Safety Data Sheets for the chemical(s) used, and the process which created the waste).

***These treatment standards do not preclude reclamation prior to final disposition.**

Generator Company METCO EPA ID NO.: NYD057731663

Safety-Kleen Corp. manages the above waste through its recycling and fuels programs in accordance with all applicable elements of the land disposal restriction.

* ALSO IN ACCORDANCE WITH 376.4(C)

R2SUL005946

SULZER METCO

Sulzer Metco (US) Inc.
1101 Prospect Avenue
PO Box 1006
Westbury, NY 11590-0201

Fold at line over top of envelope to the right of the return address

CERTIFIED

Z 314 694 180

MAIL

State of New York
Department of Environmental Conservation
Division of Hazardous Substances Regulation
Hazardous Waste Manifest
P.O. Box 12820
Albany, NY 12212

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1
- Complete items 3,
- Print your name ar

return this card to yo

- Attach this form t

does not permit.

- Write "Return Rece
- The Return Receipt

delivered.

3. Article Addre

tate of New
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azardous Wa
.O. Box 128
lbany, NY

5. Signature (Ad

6. Signature (Ag

PS Form **3811**,

Receipt for Certified Mail

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

UNITED STATES POSTAL SERVICE

Sent to	NYS Dept.of Env. Cons. Div. Hazardous Sub. Rec.
Street and No.	Hazardous Waste Manif.
P.O., State and ZIP Code	P.O. Box 12820 Albany, NY 12212
Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	$
Postmark or Date	

PS Form **3800**, March 1993

wish to receive the
g services (for an extra

] Addressee's Address

] Restricted Delivery

postmaster for fee.

er

694 180

- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

ery

Address (Only if requested
id)

IC RETURN RECEIPT

Thank you for using Return Receipt Service.

P2SUL005948

STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE, CERTIFIED MAIL FEE, AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES (see front).

1. If you want this receipt postmarked, stick the gummed stub to the right of the return address leaving the receipt attached and present the article at a post office service window or hand it to your rural carrier (no extra charge).

2. If you do not want this receipt postmarked, stick the gummed stub to the right of the return address of the article, date, detach and retain the receipt, and mail the article.

3. If you want a return receipt, write the certified mail number and your name and address on a return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends if space permits. Otherwise, affix to back of article. Endorse front of article **RETURN RECEIPT REQUESTED** adjacent to the number.

4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse **RESTRICTED DELIVERY** on the front of the article.

5. Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in item 1 of Form 3811.

6. Save this receipt and present it if you make inquiry.

105603-93-B-0218

Is your RETURN ADDRESS completed on the reverse side?

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
State of New York
Dept. of Env. Conservation
Div.of Hazardous Substances Reg.
Hazardous Waste Manifest
P.O. Box 12820
Albany, NY 12212

4a. Article Number
Z 314 694 180

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

PS Form **3811**, December 1991 ★U.S. GPO: 1993—352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

EPA TIER II

REPORTING YEAR 1994

HAZARDOUS CHEMICALS 10,000# AT ANY TIME DURING CALENDAR YEAR
EXTREMELY HAZARDOUS CHEMICALS 500# OR THRESHOLD PLANNING QUANTITY - WHICHEVER IS LESS

PROSPECT AVENUE FACILITY

	TIER II 94	TIER II 93	TIER II 92	FORM R 93	FORM R 92	FORM R 91
✓ ALUMINUM POWDER/WIRE	04	04	04	04	04	04
✓ ALUMINUM OXIDE POWDER/GRIT	04	04	04	N/A	N/A	04
CHROMIUM	N/A	N/A	N/A	03	03	03
COBALT	N/A	N/A	N/A	03	03	03
COPPER	N/A	N/A	N/A	03	03	03
✓ NICKEL POWDER/WIRE	04	04	04	04	04	03
PHENOL	N/A	N/A	N/A	N/A	N/A	N/A
✓ IRON WIRE	04	04	04	N/A	N/A	N/A

TIER II
02 100 - 999
03 1000 - 9,999
04 10,000 - 99,999
10,000 REPORTABLE EHS

FORM R
02 100 - 999
03 1000 - 9,999
04 10,000 - 99,999
MAXIMUM AMOUNT ON SITE ANYTIME DURING CALENDAR YEAR

TIER II

REPORTING YEAR 1994

PROSPECT AVENUE FACILITY

✓ 1. HALON 1301 IN MIS NOT 10,000# DOES NOT QUALIFY MIS

✓ 2. MINERAL SPIRITS SUPPLIER: SAFETY KLEEN

MAP LAB 1- 5GAL UNIT SAFETY KLEEN RECORDS

LAB SUPPLY 2- 5 GAL UNITS

TOTAL 3 UNITS

✓ 3. DEGREASER IN GRIT BLAST BOOTH

BIODEGRADABLE CLEANER PETER LONGOBARDI

AS PER PETER THE DEGREASER IS NOT IN USE AND HAS NOT BEEN FOR THE LAST YEAR OR MORE.

✓ 4. QA LABORATORY / ENGINEERING LABORATORY

✓ QA LAB - SEE ATTACHED INVENTORY VICTOR DOES NOT QUALIFY

✓ ENGINEERING LAB - KAY DARING

ETHYL ALCOHOL 4- 2L

ACETIC ACID LESS THAN 2L

METHYL ALCOHOL 5GAL

HYDROCHLORIC ACID 2L

NITRIC ACID 2L

OXYALIC ACID 2L

DOES NOT QUALIFY

5. WAREHOUSE JOE MACRI

✓ POWDER: ALUMINUM- AT MOST 80,000 04

ALUMINUM OXIDE 25,000 - 40,000 04

CHROMIUM 4000-6000 AT ANY ONE TIME - DOES NOT QUALIFY

COBALT 4000 - 5000 AT ANY ONE TIME - DOES NOT QUALIFY

COPPER 3000 - 4000 AT ANY ONE TIME - DOES NOT QUALIFY

NICKEL 35,000 - 40,000 04

PROSPECT AVENUE FACILITY

5. WAREHOUSE - CONTINUED JOE MACRI

WIRE:

ALUMINUM WIRE	50-307 50-217	98% AL	27,000 - 10,000	04	COMBINE WITH ALUMINUM POWDER
STAINLESS STEEL	METCOLOY 2,4,5	50-220, 241, 242 65-86% IRON	40,000	04	
STEEL	SPRAYSTEEL 15, 25, 80, 10	50-226, 227, 386, 387 91-98% IRON	10,000	04	
NICKEL ALLOY	405 WIRE	50-215 22% AL 88% NI	1,500	04	COMBINE WITH NICKEL POWDER

GRIT:

ALUMINUM OXIDE	C, F, VF	50-253	AL OXIDE 94%	40,000	COMBINE WITH ALUMINUM POWDER

SEALERS/MASKING PRODUCTS:

PHENOL MINOR CONSTITUENT IN SOME SEALERS - DOES NOT QUALIFY

SUPERSPRAY MASK 200 QUARTS ≅ 51G 423# DOES NOT QUALIFY

FURAN SEALER TPQ 500# 5 CASES @ 1/2 GAL PER CASE 3G 25# DOES NOT QUALIFY

AP SEALER (ETHANOL) 150 QUARTS ≅ 38G 315# DOES NOT QUALIFY

BP SEALER FORMALDEHYDE TPQ 500# DISCONTINUED

ST-1 140 GALLONS 116# DOES NOT QUALIFY

SA 132 CASES 4-1 GAL PER CASE PLUS 50-5 GAL CANS 8.3#/GAL 528G, 250G } 778G 6457# DOES NOT QUALIFY

APT 75 QUARTS 4Q = 1G 75Q ≅ 19G 158# DOES NOT QUALIFY

CLEANING SOLVENT 80 GALLONS 8.3#/GAL 664# DOES NOT QUALIFY

METCOSEAL M NONE ON SITE AT THIS TIME

APRIL 1995 X

SULZER METCO

QUALITY ASSURANCE CHEMICAL LABORATORY
MATERIAL SAFETY DATA SHEETS

MSDS #	MANUFACTURER/SUPPLIER	PRODUCT NAME	COMPOSITION	CAS #	PERCENT QA LAB VICTOR
LB-1	LECO Corporation	Anhydrone/Magnesium Perchlorate	Magnesium Perchlorate, Anhydrous Reagent $Mg(C10_4)_2$	10034-81-8 Moisture	96 4 < 1 Kg
LB-2	LECO Corporation	Lecosorb	Sodium Hydroxide NaOH	1310-73-2	100 < 1 Kg
LB-3	LECO Corporation	Lithium Metaborate	Lithium Metaborate $LiBO_2$	13453-69-5	99 < 2 Kg
LB-4	LECO Corporation	Sodium Iodide	Sodium Oxide		99 < 0.1 Kg
LB-5	LECO Corporation	Lithium Tetraborate	Lithium Tetraborate $Li_2B_4O_7$	12007-60-2	99 < 5 Kg
LB-6	Johnson Matthey Catalog Chemicals AesarGroup/Alfa Products	Lithium Tetraborate, Product Code: 10744	Lithium Tetraborate	10027-60-2	100 < 1 Kg
LB-7	Johnson Matthey/Catalog Chemicals Aesar Group/Alfa Products	Sodium Iodide Puratronic, Product Code: 10871	Sodium Iodide	N/A	100 < 0.1 Kg
LB-8	SPEX Industries Inc.	#1010 Common Element Kit, SPEX Catalog Number: 1010 Kit includes 48 vials, representing 49 elements. Each vial contains 2 grams of 100% of one of the following common elements:	Aluminum Oxide - Al_2O_3 Antimony Oxide - Sb_2O_3 Arsenic Trioxide - AS_2O_3 Barium Carbonate - $BaCO_3$ Beryllium Oxide - BeO Bismuth Oxide - Bi_2O_3 Orthoboric Acid - H_3BO_3 Ammonium Bromide - NH_4Br Cadmium Oxide - CdO Calcium Fluoride - CaF Cerium Oxide - CeO_2 Cesium Nitrate - $CsNO_3$ Ammonium Chloride - NH_4Cl Chromium Oxide - Cr_2O_3 Cobalt Oxide - CoO	1344-28-1 1309-64-4 1327-53-3 513-77-9 1304-56-9 1304-82-1 10043-35-3 12124-97-9 1306-19-0 7789-75-5 1306-38-3 7789-18-6 12125-02-9 1308-38-9 1307-96-6	< 0.005 Kg EACH

MSDS #	MANUFACTURER/SUPPLIER	PRODUCT NAME	COMPOSITION	CAS #	PERCENT
			Copper Oxide - CuO	1317-38-0	< 0.005 Kg EACH
			Gallium Oxide - Ga_2O_3	12024-21-4	
			Germanium Oxide - GeO_2	1301-53-8	
			Ammonium Iodide - NH_4I	12027-06-4	
			Indium Oxide - In_2O_3	1312-43-2	
			Iron Oxide - Fe_2O_3	1309-37-1	
			Lead Oxide - PbO	1317-36-8	
			Lithium Carbonate - Li_2CO_3	554-13-2	
			Magnesium Oxide - MgO	1309-48-4	
			Manganese Oxide - MnO_2	1313-13-9	
			Mercury Oxide - HgO	21908-53-2	
			Molybdenum Oxide - MoO_3	1313-27-5	
			Nickel Oxide - NiO	1313-99-1	
			Niobium Oxide - Nb_2O_5	1313-96-8	
			Ammonium Phosphate - $NH_4H_2PO_4$	7722-76-1	
			Potassium Carbonate - K_2CO_3	584-08-7	
			Rubidium Choride - $RbCl$	7791-11-9	
			Selenium Oxide - SeO_2	7446-08-4	
			Silicon Dioxide - SiO_2	7631-86-9	
			Silver Oxide - Ag_2O	20667-12-3	
			Sodium Carbonate - $NaCO_3$	497-19-8	
			Strontium Carbonate - $SrCO_3$	1632-05-2	
			Tantalum Oxide - Ta_2O_5	1314-61-0	
			Tellurium Oxide - TeO_2	13114-32-5	
			Thallium Oxide - Tl_2O_3	1314-32-5	
			Thorium Oxide - ThO_2	1314-20-1	
			Tin Oxide - SnO_2	18282-10-5	
			Titanium Oxide - TiO_2	13463-67-7	
			Tungsten Oxide - WO_3	1314-35-8	
			Uranium Oxide - U_3O_8	1344-57-6	
			Vanadium Pentoxide - V_2O_5	1314-62-1	
			Zinc Oxide - ZnO	1314-13-2	
			Zirconium Oxide - ZrO_2	1314-23-4	
LB-9	SPEX Industries Inc.	Hafnium Oxide, SPEX Catalog Number: HF20, HF30	Hafnium Oxide	12055-23-1	100 < 0.005 Kg

MSDS #	MANUFACTURER/SUPPLIER	PRODUCT NAME	COMPOSITION	CAS #	PERCENT
LB-10	SPEX Industries Inc.	Yttrium Oxide, SPEX Catalog Number: Y66, Y70, Y73	Y_2O_3	1314-36-9	100 < 0.05 Kg
LB-11	LECO Corporation	Copper Oxide	Copper Oxide Cu_2O Rare Earth Oxide CeO_2	1317-39-1 1306-38-3	80 20 < 0.5 Kg
LB-12	Fisher Scientific	Nitric Acid	Nitric Acid Water	7697-37-2	70 30 < 30 Kg
LB-13	Fisher Scientific	Hydrochloric Acid, Concentrated	Hydrogen Chloride Water	7647-01-0	35-38 62-65 < 30 Kg
LB-14	Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Yttrium oxide, Product Code: 10920	Yttrium oxide	1314-36-9	100 < 0.05 Kg
LB-15	Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Cerium (IV) oxide, Specpure, Product Code: 10905	Cerium (IV) oxide	1306-38-3	100 < 0.05 Kg
LB-16	Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Zirconium oxide, Product Code: 11141	Zirconium oxide	1314-23-4	100 < 0.5 Kg
LB-17	Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Silicon (IV) oxide, Product Code: 10856	Silicon (IV) oxide	7631-86-9	100 < 0.05 Kg
LB-18	Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Aluminum oxide, Product Code: 10627	Aluminum oxide	1344-28-1	100 < 0.05 Kg
LB-19	Johnson Matthey Catalog Chemicals Aesar GroupAlfa Products	Titanium (IV) oxide, Product Code: 13804	Titanium (IV) oxide	13463-67-7	100 < 0.05 Kg
LB-20	Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Iron (III) oxide, Product Code: 14680	Iron (III) oxide	1309-37-1	100 < 0.05
LB-21	Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Uranium (VI) oxide, Product Code: 12106	Uranium (VI) oxide	1344-58-7	100 < 0.01 Kg
LB-22	Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Thorium (IV) oxide, Product Code: 14740	Thorium (IV) oxide	1314-20-1	100 < 0.01 Kg
LB-23	Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Calcium oxide, Product Code: 10684	Calcium oxide	1305-78-8	100 < 0.05 Kg

MSDS #	MANUFACTURER/SUPPLIER	PRODUCT NAME	COMPOSITION	CAS #	PERCENT
LB-24	Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Lithium bromide, Product Code: 35780	Lithium bromide	7550-35-8	100 < 0.05 Kg
LB-25	Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Iodine crystalline, Product Code: 10619	Iodine	7553-56-2	100 < 0.5 Kg
LB-26	Perkin Elmer Corp.	Atomic Spectroscopy Standard	HNO_3	7697-37-2	2-5 < 0.05 Kg
		1,000 ppm scandium in 2% Nitric Acid	SC_2O_3	12060-08-1	0.1-1.0
LB-27	SPEX Industries, Inc.	Single Element Plasma Standard Solution, SPEX Catalog Number: PLSC2-3X 10,000 ppm of Scandium in 5% Nitric Acid	HNO_3 Sc_2O_3 Water	7697-37-2 12060-08-1 7732-18-5	2-5 0.15-1.5 < 1 Kg 94-98
LB-28	Johnson Matthey Catalog Chemicals Aesar/Alfa	Lithium iodide, Product Code: 14694	Lithium iodide	10377-51-2	100 < 0.1 Kg
LB-29	As of April 1, 1994 No Longer Using This Product Johnson Matthey Catalog Chemicals Aesar/Alfa	Uranium Specpure ICP Standard Solution 10,000 ppm, Product Code: 14403	Uranium dinitrate oxide Nitric acid Water	13250-83-7 7697-37-2 7732-18-5	1.2 N/A 5 < 1 Kg Balance
LB-30	As of April 1, 1994 No Longer Using This Product Johnson Matthey Catalog Chemicals Aesar/Alfa	Thorium Specpure ICP Standard Solution 10,000 ppm, Product Code: 14420	Thorium nitrate Nitric acid Water	13823-29-5 7697-37-2 7732-18-5	2.1 N/A 5 < 1 Kg Balance
LB-31	As of April 1, 1994 No Longer Using This Product Johnson Matthey Catalog Chemicals Aesar/Alfa	Sodium Specpure ICP Standard Solution 10,000 ppm, Product Code: 14400	Sodium carbonate Nitric acid Water	497-19-8 7697-37-2 7732-18-5	2.3 N/A 5 < 1 Kg Balance
LB-32	As of April 1, 1994 No Longer Using This Product Johnson Matthey Catalog Chemicals Aesar/Alfa	Nickel Specpure ICP Standard Solution 10,000 ppm, Product Code: 14414	Nickel nitrate Nitric acid Water	13478-00-7 7697-37-2 7732-18-5	3.1 N/A 5 < 1 Kg Balance

MSDS #	MANUFACTURER/SUPPLIER	PRODUCT NAME	COMPOSITION	CAS #	PERCENT
LB-33	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Chromium Specpure ICP Standard	Chromium chloride	10025-73-7	3
	Aesar/Alfa	Solution 10,000 ppm,	Hydrogen chloride	7674-01-0	5
		Product Code: 14408	Water	7732-18-5	Balance
LB-34	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Cobalt Specpure ICP Standard	Cobalt nitrate	10026-22-9	3.1
	Aesar/Alfa	Solution 10,000 ppm,	Nitric acid	7697-37-2	5
		Product Code: 14390	Water	7732-18-5	Balance
LB-35	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Tungsten Specpure ICP Standard	Tungsten fluoride	7783-82-6	1.6
	Aesar/Alfa	Solution 10,000 ppm,	Hydrofluoric acid	7664-39-3	5
		Product Code: 14421	Nitric acid	7697-37-2	Trace
			Water	7732-18-5	Balance
LB-36	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Iron Specpure ICP Standard	Iron nitrate	7782-61-8	4.3
	Aesar/Alfa	Solution 10,000 ppm,	Nitric acid	7697-37-2	5
		Product Code: 14375	Water	7732-18-5	Balance
LB-37	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Silicon Specpure ICP Standard	Dihydrogen hexafluorosilicate	16961-83-4	5.2
	Aesar/Alfa	Solution 10,000 ppm,	Hydrofluoric acid	7664-39-3	5
		Product Code: 14435	Nitric acid	7697-37-2	Trace
		Water	7732-18-5		Balance
LB-38	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Copper Specpure ICP Standard	Copper nitrate	10031-43-3	3.0
	Aesar/Alfa	Solution 10,000 ppm,	Nitric acid	7697-37-2	5
		Product Code: 14372	Water	7732-18-5	Balance
LB-39	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Calcium Specpure ICP Standard	Calcium carbonate	471-34-1	2.5
	Aesar/Alfa	Solution 10,000 ppm,	Nitric acid	7697-37-2	5
		Product Code: 14407	Water	7732-18-5	Balance
LB-40	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Aluminum Specpure ICP Standard	Aluminum chloride	7446-70-0	4.9
	Aesar/Alfa	Solution 10,000 ppm,	Hydrogen Chloride	7674-01-0	10
		Product Code: 14405	Water	7732-18-5	Balance

N/A < 1 Kg

MSDS #	MANUFACTURER/SUPPLIER	PRODUCT NAME	COMPOSITION	CAS #	PERCENT
LB-41	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Boron Specpure ICP Standard	Boric acid	10044-35-3	5.7
	Aesar/Alfa	Solution 10,000 ppm,	Ammonium hydroxide	1336-21-6	1
		Product Code: 14370	Water	7732-18-5	Balance
LB-42	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Molybdenum Specpure ICP Standard	Molybdenum chloride	10241-05-1	2.9
	Aesar/Alfa	Solution 10,000 ppm,	Hydrogen Chloride	7674-01-0	5
		Product Code: 14377	Hydrogen fluoride	7664-39-3	Trace
			Water	7732-18-5	Balance
LB-43	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Zirconium Specpure ICP Standard	Zirconium dichloride oxide	13520-92-8	3.5
	Aesar/Alfa	Solution 10,000 ppm,	Hydrogen Chloride	7674-01-0	5
		Product Code: 14386	Water	7732-18-5	Balance
LB-44	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Lead Specpure ICP Standard	Lead nitrate	10099-74-8	1.6
	Aesar/Alfa	Solution 10,000 ppm,	Nitric acid	7697-37-2	5
		Product Code: 14412	Water	7732-18-5	Balance
LB-45	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Tin Specpure ICP Standard	Tin chloride	7772-99-8	1.6
	Aesar/Alfa	Solution 10,000 ppm,	Hydrogen Chloride	7674-01-0	20
		Product Code: 14384	Water	7732-18-5	Balance
LB-46	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Zinc Specpure ICP Standard	Zinc nitrate	3778-30-8	3
	Aesar/Alfa	Solution 10,000 ppm,	Nitric acid	7697-37-2	5
		Product Code: 14404	Water	7732-18-5	Balance
LB-47	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Tantalum Specpure ICP Standard	Tantalum (V) chloride	7721-01-9	2
	Aesar/Alfa	Solution 10,000 ppm,	Hydrofluoric acid	7664-39-3	2
		Product Code: 14419	Water	7732-18-5	Balance
LB-48	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Indium Specpure ICP Standard	Indium nitrate	13770-61-1	2.6
	Aesar/Alfa	Solution 10,000 ppm,	Nitric acid	7697-37-2	5
		Product Code: 14411	Water	7732-18-5	Balance

MSDS #	MANUFACTURER/SUPPLIER	PRODUCT NAME	COMPOSITION	CAS #	PERCENT
LB-49	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Hafnium Specpure ICP Standard	Hafnium dichloride oxide	14456-34-9	1.5
	Aesar/Alfa	Solution 10,000 ppm,	Hydrogen Chloride	7674-01-0	5
		Product Code: 14374	Water	7732-18-5	Balance
LB-50	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Magnesium Specpure ICP Standard	Magnesium carbonate	7757-69-6	3.5
	Aesar/Alfa	Solution 10,000 ppm,	Nitric acid	7697-37-2	5
		Product Code: 14430	Water	7732-18-5	Balance
LB-51	As of April 1, 1994 No Longer Using This Product				
	Inorganic Ventures, Inc.	Custom Multi-Element Solution Standard, ICP Test Mix II, all elements are below 0.01% w/v	HCl Ba, Be, La, Mn, Ni, Sc, Zn	7647-01-0	1-2
LB-52	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Yttrium Specpure ICP Standard	Yttrium nitrate	10361-93-0	3.1
	Aesar/Alfa	Solution 10,000 ppm,	Nitric acid	7697-37-2	5
		Product Code: 14422	Water	7732-18-5	Balance
LB-53	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Titanium Specpure ICP Standard	Titanium chloride	7550-45-0	4.0
	Aesar/Alfa	Solution 10,000 ppm,	Hydrogen Chloride	7674-01-0	5
		Product Code: 14438	Hydrogen fluoride	7664-39-3	Trace
			Water	7732-18-5	Balance
LB-54	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Manganese Specpure ICP Standard	Manganese nitrate	10377-66-9	3.3
	Aesar/Alfa	Solution 10,000 ppm,	Nitric acid	7697-37-2	5
		Product Code: 14413	Water	7732-18-5	Balance
LB-55	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Phosphorus Specpure ICP Standard	Phosphorus	7723-14-0	1
	Aesar/Alfa	Solution 10,000 ppm,	Nitric acid	7697-37-2	5
		Product Code: 14415	Water	7732-18-5	Balance
LB-56	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Tellurium Specpure ICP Standard	Tellurium chloride	10026-07-0	2.1
	Aesar/Alfa	Solution 10,000 ppm,	Hydrogen Chloride	7674-01-0	20
		Product Code: 14401	Water	7732-18-5	Balance

N/A < 1 Kg

MSDS #	MANUFACTURER/SUPPLIER	PRODUCT NAME	COMPOSITION	CAS #	PERCENT
LB-57	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Selenium Specpure,	Selenium oxide	7446-08-4	1.4
	Aesar/Alfa	Product Code: 14381	Nitric acid	7697-37-2	5
			Water	7732-18-5	Balance
LB-58	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Cerium Specpure ICP Standard	Cerium nitrate	10108-73-3	2.3
	Aesar/Alfa	Solution 10,000 ppm,	Nitric acid	7697-37-2	5
		Product Code: 14371	Water	7732-18-5	Balance
LB-59	SPEX Industries Inc.	10,000 ppm Copper in 5% Nitric Acid,	HNO_3	7697-37-2	2.5
		SPEX Catalog Number: PLCU2-3X	Cu	7440-50-8	0.1-1.0
LB-60	SPEX Industries Inc.	10,000 ppm Nickel in 5% Nitric Acid,	HNO_3	7697-37-2	2.5
		SPEX Catalog Number: PLNI2-3X	Ni	7440-02-0	0.1-1.0
LB-61	SPEX Industries Inc.	10,000 ppm of Aluminum in 5% Hydrochloric Acid, SPEX Catalog Number: PLAL1-3X	HCl	7647-01-0	2.5
			Al	7429-90-5	0.1-1.0
LB-62	SPEX Industries Inc.	100 ppm each of Phosphorus, Sulfur and Potassium and 20 ppm each of Manganese, Molybdenum, Nickel, Scandium, Arsenic, Lanthanum, Sodium and Lithium, all in 2% Hydrochloric Acid, SPEX Catalog Number: CALMIX3	HCl	7647-01-0	2
LB-63	SPEX Industries Inc.	10,000 ppm Silicon in Water, SPEX Catalog Number: PLSI9-3X	$(NH_4)_2SiF_6$	16919-19-0	0.64-6.4
LB-64	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Scandium Specpure ICP Standard	Scandium oxide	13465-60-6	5.2
	Aesar/Alfa	Solution 10,000 ppm,	Nitric acid	7697-37-2	5
		Product Code: 35755	Water	7732-18-5	Balance
LB-65	Fisher Scientific	Sodium Carbonate	Sodium carbonate	497-19-8	100
LB-66	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals	Hydrofluoric Acid,	Hydrogen fluoride	7664-39-3	48-51
	Aesar/Alfa	Product Code: 33258	Water	7732-18-5	Balance

MSDS #	MANUFACTURER/SUPPLIER	PRODUCT NAME	COMPOSITION	CAS #	PERCENT
LB-67	Fisher Scientific	Sodium Hydroxide	Sodium hydroxide	1310-73-2	100 < 5 Kg
LB-68	Fisher Scientific	Hydrofluoric Acid	Hydrogen Fluoride Water	7664-39-3	45.0-51.0 49.0-55.0 < 5 Kg
LB-69	SPEX Industries Inc.	10,000 ppm of Scandium in 5% Nitric Acid, SPEX Catalog Number: PLSC2-3X	HNO_3 Sc_2O_3 Water	7697-37-2 12060-08-1 7732-18-5	2 0.15-1.5 < 1 Kg 94-98
LB-70	SPEX Industries Inc.	10,000 ppm of Iron in 5% Nitric Acid, SPEX Catalog Number: PLFE2-3X	HNO_3 Fe Water	7697-37-2 7439-89-6 7732-18-5	2-5 0.1-1.0 < 1 Kg 90-97
LB-71	SPEX Industries Inc.	10,000 ppm Tungsten in Water, SPEX Catalog Number: PLW9-3X	$(NH_4)_2WO_4$	11120-25-5	0.1-1.0 < 1 Kg
LB-72	SPEX Industries Inc.	10,000 ppm of Cobalt in 5% Nitric Acid, SPEX Catalog Number: PLCO2-3X	HNO3 $CoCO_3$	7697-37-2 513-79-1	2-5 0.2-2.0 < 1 Kg
LB-73	SPEX Industries Inc.	10,000 ppm Beryllium in 5% Nitric Acid, SPEX Catalog Number: PLBE2-3X	HNO3 $Be_4O(C_2H_3O_2)_6$	7697-37-2 19049-40-2	2-5 0.04-0.4 < 1 Kg
LB-74	SPEX Industries Inc.	10,000 ppm of Chromium in 5% Hydrochloric Acid, SPEX Catalog Number: PLCR1-3X	HCl $CrCl_3$-$6H_2O$	7647-01-0 10060-12-5	2-5 0-1 < 1 Kg
LB-75	SPEX Industries Inc.	Lithium Metaborate, SPEX Catalog Number: LI70, LI71	$LiBO_2$	13453-69-5	< 1 Kg
LB-76	SPEX Industries Inc.	Lithium Tetraborate, SPEX Catalog Number: LI95	$Li_2B_4O_7$	12007-60-2	< 1 Kg
LB-77	Fisher Scientific	Hydrogen Peroxide Solutions	Hydrogen Peroxide Water	7722-84-1	30-50 70-50 < 1 Kg
LB-78	Fisher Scientific	Sodium Bicarbonate	Sodium Bicarbonate	144-55-8	100 < 20 Kg
LB-79	Fisher Scientific	Sodium Nitrate	Sodium Nitrate	7631-99-4	100 < 1 Kg
LB-80	Fisher Scientific	Ammonium Hydroxide	Ammonium Hydroxide Water	1336-21-6	28-30 70-72 < 15 Kg

MSDS #	MANUFACTURER/SUPPLIER	PRODUCT NAME	COMPOSITION	CAS #	PERCENT
LB-81	Johnson Matthey Catalog Chemicals Aesar/Alfa	Sodium Peroxide (ACS), Product Code: 33384	Sodium peroxide Sodium hydroxide	1313-60-6 1310-73-2	93-99 < 1 Kg 1-7
LB-82	Mallinckrodt Inc.	Methanol	Methyl Alcohol	67-56-1	< 5 Kg
LB-83	Mallinckrodt Inc.	Ammonium Chloride	Ammonium Chloride	12125-02-9	< 5 Kg
LB-84	Johnson Matthey Catalog Chemicals	Sodium Carbonate, Product Code: 11552	Sodium Carbonate	497-19-8	100 < 30 Kg
LB-85	SPEX Industries Inc.	Single Element Plasma, SPEX Catalog Number: PLSC2-2X, PLSC2-2Y, PLSC2-3X	HNO_3 Sc_2O_3 Water	7697-37-2 12060-08-1 7732-18-5	2 0.15-1.5 < 1 Kg 98
LB-86	Fisher Scientific	Sodium Peroxide	Sodium Peroxide	1313-60-6	100 < 1 Kg
LB-87	Fisher Scientific	Ammonium Chloride	Ammonium Chloride	12125-02-9	100 < 5 Kg
LB-88	SPEX Industries Inc.	10,000 ppm of Vanadium in 15% Nitric Acid, SPEX Catalog Number: PLV2-3Y	HNO_3 NH_4VO_3 Water	7697-37-2 7803-55-6 7732-18-5	2-10 0.23 < 1 Kg 90-97
LB-89	SPEX Industries Inc.	10,000 ppm of Magnesium in 5% Hydrochloric Acid, SPEX Catalog Number: PLMG1-3X	HCl Mg Water	7647-01-0 7791-18-6 7732-18-5	2-5 0.1-1.0 < 1 Kg 90-97
LB-90	SPEX Industries Inc.	10,000 ppm of Zirconium in 5% Nitric Acid, SPEX Catalog Number: PLZR2-2X	HNO_3 $ZrO(NO_3)_2$ Water	7697-37-2 13826-66-6 7732-18-5	5 0.25-2.5 < 1 Kg 90-98
LB-91	SPEX Industries Inc.	10,000 ppm Titanium in Water, SPEX Catalog Number: PLT19-2X	$(NH_2)_2TiF_6$	16962-40-6	0.4-4.0 < 1 Kg
LB-92	SPEX Industries Inc.	10,000 ppm Molybdenum in Water, SPEX Catalog Number: PLMO9-3X	$(NH_4)_2MoO_4$ Water	13106-76-8 7732-18-5	0.3-3.0 < 1 Kg 90-97
LB-93	As of April 1, 1994 No Longer Using This Product Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Gallium Specpure ICP Standard Solution 10,000 ppm, Product Code: 14427	Gallium nitrate Nitric Acid Water	13494-90-1 7697-37-2 7732-18-5	3.7 5 N/A Balance < 0.5 Kg

MSDS #	MANUFACTURER/SUPPLIER	PRODUCT NAME	COMPOSITION	CAS #	PERCENT
LB-94	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Cadmium Specpure ICP Standard Solution 10,000 ppm, Product Code: 14424	Cadmium nitrate Nitric acid Water	10022-68-1 7697-37-2 7732-18-5	2.1 5 Balance N/A < 0.5 Kg
LB-95	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Arsenic Specpure ICP Standard Solution 10,000 ppm, Product Code: 14369	Arsenic acid Nitric acid Water	7774-41-6 7697-37-2 7732-18-5	2.3 5 Balance N/A < 0.5 Kg
LB-96	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Antimony Specpure ICP Standard Solution 10,000 ppm, Product Code: 14387	Antimony chloride Hydrogen Chloride Water	10025-91-9 7674-01-0 7732-18-5	1.9 20 Balance N/A < 0.5 Kg
LB-97	Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Potassium iodide, Product Code: 87627	Potassium iodide	7681-11-9	100 < 0.5 Kg
LB-98	Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Potassium carbonate, Product Code: 10838	Potassium carbonate	584-08-7	100 < 5 Kg
LB-99	Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Potassium bromide, Product Code: 10982	Potassium bromide	7758-02-3	100 < 1 Kg
LB-100	SPEX Industries Inc.	10,000 ppm of Manganese in 5% Nitric Acid, SPEX Catalog Number: PLMN2-3X	HNO_3 $Mn(C_2H_3O_2)_3$-$2H_2O$ Water	7697-37-2 19513-05-4 7732-18-5	2-5 0.49-4.9 < 1 Kg 90-98
LB-101	SPEX Industries Inc.	10,000 ppm of Phosphorous in Water, SPEX Catalog Number: PLP9-3X	$NH_4H_2PO_4$ Water	7722-76-1 7732-18-5	0.38-3.8 < 1 Kg 90-98
LB-102	SPEX Industries Inc.	10,000 ppm of Niobium in Water with traces of HF, SPEX Catalog Number: PLNB9-3X	NH_4NbF_6 Water	12062-13-4 7732-18-5	0.24-2.4 < 1 Kg 90-97
LB-103	Fisher Scientific	Cleaning Solution (Chromic Acid - Sulfuric Acid)	Sulfuric Acid Chromium Trioxide (Chromic Anhydride Water	7664-93-9 1333-82-0	97.8 0.5 < 11 Kg 1.7

MSDS #	MANUFACTURER/SUPPLIER	PRODUCT NAME	COMPOSITION	CAS #	PERCENT
LB-104	SPEX Industries Inc.	10,000 ppm Boron in Water, SPEX Catalog Number: PLB9-3X	$(NH_4)_2B_4O_7$-$4H_2O$ Water	12007-58-8 7732-18-5	0.44-4.4 < 1 kg 90-97
LB-105	As of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals Aesar/Alfa	Potassium Specpure ICP Standard Solution 10,000 ppm, Product Code: 14379	Potassium Nitrate Nitric Acid Water	7757-79-1 7697-37-2 7732-18-5	2.6 N/A 5 Balance < 1 kg
LB-106	As Of April 1, 1994 No Longer Using This Product				
	Johnson Matthey Catalog Chemicals Aesar/Alfa	Molybdenum ICP Standard Solution, Specpure 10,000 ppm, Product Code: 35766	Ionic Molybdenum Salt Nitric Acid Hydrogen Fluoride Water	N/A 7697-37-2 7664-39-3 7732-18-5	1 5 N/A Trace < 1 kg Balance
LB-107	Fisher Scientific	Sulfuric Acid	Sulfuric Acid Water	7664-93-9	70.0-100.0 < 5 kg 0-30.0
LB-108	Fisher Scientific	Methyl Red	Methyl Red	493-52-7	100 < 0.1 kg
LB-109	Fisher Scientific	Potassium Periodate	Potassium Periodate	7790-21-8	100 < 0.5 kg
LB-110	J.T. Baker, Inc.	Hydrofluoric Acid	Hydrofluoric Acid Water	7664-39-3 7732-18-5	45-55 < 10 kg 45-55
LB-111	J.T. Baker, Inc.	Nitric Acid	Nitric Acid Water	7697-37-2 7732-18-5	65-71 < 15 kg 29-35
LB-112	J.T. Baker, Inc.	Hydrochloric Acid	Hydrochloric Acid Water	7647-01-0 7732-18-5	33-40 < 30 kg 60-67
LB-113	EM Science A Division of EM Industries	Ammonium Hydroxide	Ammonium Hydroxide Water	1336-21-6 7732-18-5	25-30 < 15 kg 70-75
LB-114	Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Magnesium Oxide Product Code: 10800	Magnesium Oxide	1309-48-4	100 < 0.5 kg
LB-115	Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Boric Acid, Puratronic Product Code: 10659	Boric Acid	10043-35-3	100 < 0.5 kg
LB-116	Johnson Matthey Catalog Chemicals Aesar Group/Alfa Products	Carbon Powder, Briquetting Grade Product Code: 14735	Carbon	7440-44-0	100 < 0.5 kg

MSDS #	MANUFACTURER/SUPPLIER	PRODUCT NAME	COMPOSITION	CAS #	PERCENT
LB-117	Perkin Elmer Corp.	Magnetic Calibration Standards Kit	Iron Nickel	7439-89-6 7440-02-0	N/A N/A < 0.5 Kg
LB-118	SPEX Industries Inc.	10,000 ppm of Iron in 5% Hydrochloric Acid, SPEX Catalog Number: PLFE1-3X	HCl $FeCl_2$-$4H_2O$	7647-01-0 13478-10-9	2-5 0.4-4.0 < 1 Kg
LB-119	SPEX Industries Inc.	10,000 ppm of Silver in 5% Nitric Acid, SPEX Catalog Number: PLAG2-3X	HNO_3 Ag Water	7697-37-2 7440-22-4 7732-18-5	2-5 0.1-1.0 < 1 Kg 90-97
LB-120	SPEX Industries Inc.	10,000 ppm Arsenic in 5% Nitric Acid, Spex Catalog Number: PLAS2-3X	HNO_3 H_3AsO_4-$1/2H_2O$ Water	7697-37-2 7778-39-4 7732-18-5	2-5 0.2-2 < 1 Kg 90-97
LB-121	SPEX Industries Inc.	10,000 ppm Barium in 5% Nitric Acid, SPEX Catalog Number: PLBA2-3X	HNO_3 $BaCO_3$ Water	7697-37-2 513-77-9 7732-18-5	2-5 0.14-1.4 < 1 Kg 90-97
LB-122	SPEX Industries Inc.	10,000 ppm of Calcium in 5% Nitric Acid, SPEX Catalog Number: PLCA2-3X	HNO_3 $CaCO_3$ Water	7697-37-2 1317-65-3 7732-18-5	2-5 0.25-2.5 < 1 Kg 90-97
LB-123	SPEX Industries Inc.	10,000 ppm of Bismuth in 10% Nitric Acid, SPEX Catalog Number: PLBI4-3X	HNO_3 Bi Water	7697-37-2 7440-69-9 7732-18-5	10 0.1-1 < 1 Kg 89-90
LB-124	SPEX Industries Inc.	10,000 ppm Cadmium in 5% Nitric Acid, SPEX Catalog Number: PLCD2-3X	HNO_3 Cd Water	7697-37-2 10022-68-1 7732-18-5	2-5 0.1-1.0 < 1 Kg 90-97
LB-125	SPEX Industries Inc.	10,000 ppm of Cerium in 5% Nitric Acid, SPEX Catalog Number: PLCE2-3X	HNO_3 $Ce(NO_3)_3$-$6H_2O$ Water	7697-37-2 10294-41-4 7732-18-5	10 0.3-3 < 1 Kg 90-97
LB-126	SPEX Industries Inc.	10,000 ppm of Hafnium in 5% Hydrochloric Acid, SPEX Catalog Number: PLHF1-3X	HCl $HfOCl_2$-$8H_2O$ Water	7647-01-0 14456-34-9 7732-18-5	2-5 0.23-2.3 < 1 Kg ~95-98

MSDS #	MANUFACTURER/SUPPLIER	PRODUCT NAME	COMPOSITION	CAS #	PERCENT
LB-127	SPEX Industries Inc.	10,000 ppm Lithium in 5% Nitric Acid, SPEX Catalog Number: PLLI2-3X	HNO_3 Li_2CO_3 Water	7697-37-2 554-13-2 7732-18-5	2-5 0.54-5.4 < 1 Kg 90-97
LB-128	SPEX Industries Inc.	10,000 ppm Magnesium in 5% Nitric Acid, SPEX Catalog Number: PLMG2-3X	HNO_3 Mg Water	7697-37-2 7439-95-4 7732-18-5	2-5 0.1-1 < 1 Kg 90-97
LB-129	SPEX Industries Inc.	10,000 ppm of Sodium in a solution of 5% Nitric Acid, SPEX Catalog Number: PLNA2-3X	HNO_3 Na_2CO_3 Water	7697-37-2 497-91-8 7732-18-5	2-5 01.-1 < 1 Kg 90-97
LB-130	SPEX Industries Inc.	10,000 ppm of Lead in 5% Nitric Acid, SPEX Catalog Number: PLPB2-3X	HNO_3 Pb Water	7697-37-2 7439-92-11 7732-18-5	2-5 0.1-1.0 < 1 Kg 94-98
LB-131	SPEX Industries Inc.	10,000 ppm Antimony in 6% Tartaric Acid and Water with trace amounts of Nitric Acid, SPEX Catalog Number: PLSB7-3Y	d-Tartaric Acid $(HOCO(CHOH)_2COOH$ Sb_2O_4 HNO_3 Water	87-69-4 1332-81-6 7697-37-2 7732-18-5	1-20 < 1 Kg 1.2 0.1-0.5 < 1 Kg ~80-90
LB-132	SPEX Industries Inc.	10,000 ppm of Selenium in 5% Nitric Acid, SPEX Catalog Number: PLSE2-3X	HNO_3 Se Water	7697-37-2 7782-49-2 7732-18-5	2-5 0.1-1.0 < 1 Kg 90-97
LB-133	SPEX Industries Inc.	10,000 ppm of Tin in 20% Hydro-chloric Acid, SPEX Catalog Number: PLSN5-3Y	HCl Sn Water	7647-01-0 7440-31-5 7732-18-5	20 0.1-1 < 1 Kg 80
LB-134	SPEX Industries Inc.	10,000 ppm of Tantalum in Water SPEX Catalog Number: PLTA9-3X	NH_4TaF_6 Water	33380-11-9 7732-18-5	0.17-1.7 < 1 Kg 90-97
LB-135	SPEX Industries Inc.	10,000 ppm of Tellurium in 20% Nitric Acid, SPEX Catalog Number: PLTE6-3Y	HNO_3 Te Water	7697-37-2 13494-80-11 7732-18-5	20 1 < 1 Kg ~75-80

MSDS #	MANUFACTURER/SUPPLIER	PRODUCT NAME	COMPOSITION	CAS #	PERCENT
LB-136	SPEX Industries Inc.	10,000 ppm of Thorium in 5% Nitric Acid, SPEX Cataolog Number: PLTH2-3Y	HNO_3 $TH(NO_3)_4H_2O$ Water	7697-37-2 13823-29-5 7732-18-5	2-5 0.19-1.9 < 1 Kg ~95-98
LB-137	SPEX Industries Inc.	10,000 ppm of Uranium in 5% Nitric Acid, SPEX Catalog Number: PLU2-3X	HNO_3 U_3O_8 Water	7697-37-2 1344-59-8 7732-18-5	2-5 0.1-1 < 1 Kg 90-97
LB-138	SPEX Industries Inc.	10,000 ppm of Ytrrium in 5% Nitric Acid, SPEX Catalog Number: PLY2-3X	HNO_3 Y_2O_3 Water	7697-37-2 1314-36-9 7732-18-5	2-5 0.12-1.2 < 1 Kg 90-97
LB-139	SPEX Industries Inc.	10,000 ppm Zinc in 5% Nitric Acid, SPEX Catalog Number: PLZN2-3X	HNO_3 Zn	7697-37-2 7440-66-6	2-5 0.1-1 < 1 Kg
LB-140	SPEX Industries Inc.	10,000 ppm Tungsten in 2% Nitric Acid + 5% Hydrofluoric Acid, SPEX Catalog Number: PLW2-3X	HNO_3 HF W Water	7697-37-2 7664-39-3 7440-33-7 7732-18-5	5 2-5 < 1 Kg 0.1-1.0 90-94
LB-141	SPEX Industries Inc.	10,000 ppm Chromium in 5% Nitric Acid, SPEX Catalog Number: PLCR2-3X	HNO_3 $Cr(NO_3)_3$-$9H_2O$ Water	7697-37-2 7789-02-8 7732-18-5	2-5 0.77-7.7 < 1 Kg ~88-98
LB-142	SPEX Industries Inc.	10,000 ppm of Indium in 5% Nitric Acid, SPEX Catalog Number: PLIN2-3X	HNO_3 In Water	7697-37-2 7440-74-6 7732-18-5	2-5 0.1-1.0 < 1 Kg ~90-98
LB-143	SPEX Industries Inc.	10,000 ppm of Vanadium in 15% Nitric Acid, SPEX Catalog Number: PLV4-3Y	HNO_3 NH_4VO_3 Water	7697-37-2 7803-55-6 7732-18-5	2-10 0.23 < 1 Kg 90-97
LB-144	SPEX Industries Inc.	10,000 ppm of Zirconium in 5% Nitriv Acid, SPEX Catalog Number: PLZR2-3X	HNO_3 $ZrO(NO_3)_2$ Water	7697-37-2 13826-6-66 7732-18-5	2-5 < 1 Kg 0.25-2.5 90-97
LB-145	SPEX Industries Inc.	10,000 ppm Titanium in Water, SPEX Catalog Number: PLTI9-3X	$(NH_2)_2TiF_6$ Water	16962-40-6 7732-18-5	0.4-4.0 < 1 Kg 90-96

MSDS #	MANUFACTURER/SUPPLIER	PRODUCT NAME	COMPOSITION	CAS #	PERCENT
LB-146	SPEX Industries Inc.	10,000 ppm Phosphorous in Water, SPEX Catalog Number: PLP9-3X	$NH_4H_2PO_4$ Water	7722-76-1 7732-18-5	0.38-3.8 < 1 kg 90-97
LB-147	SPEX Industries Inc.	10,000 ppm of Copper in 5% Nitric Acid, SPEX Catalog Number: PLCU2-3X	HNO_3 Cu Water	7697-37-2 7440-50-8 7732-18-5	2-5 0.1-1.0 < 1 kg 90-97
LB-148	SPEX Industries Inc.	10,000 ppm Berylliumin 5% Nitric Acid, SPEX Catalog Number: PLBE2-3Y	HNO_3 $Be_4O(C_2H_3O_2)_6$ Water	7697-37-2 19049-40-2 7732-18-5	2-5 0.04-0.4 < 1 kg 90-98
LB-149	SPEX Industries Inc.	10,000 ppm of Maganese in 5% Nitric Acid, SPEX Catalog Number: PLMN2-3X	HNO_3 $Mn(C_2H_3O_2)_{-3}2H_2O$ Water	7697-37-2 19513-05-4 7732-18-5	2-5 0.49-4.9 < 1 kg 90-97
LB-150	SPEX Industries Inc.	10,000 ppm Boron in Water, SPEX Catalog Number: PLB9-3X	$(NH_4)_2B_4O_7$-$4H_2O$ Water	12007-58-5 7732-18-5	0.44-4.4 90-97 < 1 kg
LB-151	Barnstead/Thermolyne Corp.	Cartridge #D0803 MSDS C,F Ion Exchange Resin	Benzene, Diethenylpolymer With Ethenylbenzene and Ethenylethylbenzene, Sulfonated (Hydrogen Form) Water Sulfonated Copolymer of Styrene and Divinylbenzene in Hydrogen Form. Polyamine Functionalized Chloromethylated Copolymer of Polyacrylic and Divinyl-benzene in free base form. Water	69011-20-7 7732-18-5 69011-20-7 69011-41-2 7732-18-5	50-60 < 10 kg 40-50 5-10 35-45 50-60
LB-152	Barnstead/Thermolyne Corp.	Cartridge #D0836 MSDS G,L CPG-LF/TOG Activated Carbon	Carbon Strene/Divinylbenzene Ion Exchange Resin Water	7440-44-0 N/A N/A	100 20-30 < 10 kg 70-80

MSDS #	MANUFACTURER/SUPPLIER	PRODUCT NAME	COMPOSITION	CAS #	PERCENT
LB-153	Barnstead/Thermolyne Corp.	Cartridge #D5027 MSDS D Ion Exchange Resin	Sulfonated Copolymer of Styrene and Divinylbenzene in Hydrogen Form.	69011-20-7	20-30 < 10 Kg
			Trimethylamine functionalized Chloromethylated copolymer of Styrene and Divinylbenzene in Hydrogen Form.	69011-18-3	15-30
			Water	7732-18-5	50-60
LB-154	SPEX Industries Inc.	10,000 ppm of Thallium in 5% Nitric Acid, SPEX Catalog Number: PLTL2-3Y	HNO_3	7697-37-2	2-5
			$TlNO_3$	10102-45-1	0.1-1 < 1 Kg
			Water	7732-18-5	90-97
LB-155	SPEX Industries Inc.	10,000 ppm of Strontium in 5% Nitric Acid, SPEX Catalog Number: PLSR2-3X	HNO_3	7697-37-2	2-5
			$Sr(NO_3)_2$	10042-76-9	0.24-2.4 < 1 Kg
			Water	7732-18-5	90-97
LB-156	SPEX Industries Inc.	10,000 ppm of Lanthanum in 5% Nitric Acid, SPEX Catalog Number: PLLA2-3X	HNO_3	7697-37-2	2-5
			La_2O_3	1312-81-8	0.1-1 < 0.5 Kg
LB-157	LECO Corporation	Silicon Nitride	Silicon Nitride	12033-89-5	99.9 < 0.5 Kg
LB-158	Fisher Scientific	Magnesium Sulfate Heptahydrate	Magnesium Sulfate Heptahydrate	10034-99-8	100 < 5 Kg
LB-159	Fisher Scientific	Sodium Peroxide	Sodium Peroxide	1313-60-6	100 < 0.5 Kg
LB-160	SPEX Industries Inc.	10,000 ppm of Potassium in 5% Nitric Acid, SPEX Catalog Number: PLK2-3X	HNO_3	7697-37-2	2-5
			KNO_3	7757-79-1	0.26-2.6 < 0.5 Kg
			Water	7732-18-5	80-90

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Form Approved OMB No 2050 0072

Tier Two
EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: SULZER METCO (US) INC.
Street: 1101 PROSPECT AVENUE
City: WESTBURY County: NASSAU State: NY Zip: 11590
SIC Code: 3542 Dun & Brad Number: 87-429-0349

FOR OFFICIAL USE ONLY
ID #
Date Received

Owner/Operator Name
Name: JOSEPH REARDON, Ph.D. Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY NY 11590

Emergency Contact
Name: JOSEPH REARDON Title: SENIOR MANAGER
Phone: (516) 334-1300 X2316 24 Hr Phone: (800) 424-9300 CHEMTREC
Name: CONSTANCE CONROY Title: SUPERVISOR
Phone: (516) 334-1300 X2337 24 Hr Phone: (800) 424-9300 CHEMTREC

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 94

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7429 90 5 Trade Secret ☐ Chem. Name: ALUMINUM Check all that apply: Pure ☒ Mix ☒ Solid ☒ Liquid ☐ Gas ☐ EHS ☐ EHS Name:	Fire ☒ Sudden Release of Pressure ☐ Reactivity ☒ Immediate (acute) ☒ Delayed (chronic) ☒	Max. Daily Amount (code): 04 Avg. Daily Amount (code): 04 No. of Days On-site (days): 365	Container Type / Pressure / Temperature N 1 4 ENGINEERING LABORATORIES, WAREHOUSE D 1 4 WAREHOUSE	☐
CAS 1344 28 1 Trade Secret ☐ Chem. Name: ALUMINUM OXIDE Check all that apply: Pure ☐ Mix ☒ Solid ☒ Liquid ☐ Gas ☐ EHS ☐ EHS Name:	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☒ Delayed (chronic) ☒	Max. Daily Amount (code): 04 Avg. Daily Amount (code): 04 No. of Days On-site (days): 365	N 1 4 WAREHOUSE, ENGINEERING LABORATORIES D 1 4 WAREHOUSE	☐
CAS 7439 89 6 Trade Secret ☐ Chem. Name: IRON Check all that apply: Pure ☒ Mix ☒ Solid ☒ Liquid ☐ Gas ☐ EHS ☐ EHS Name:	Fire ☒ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☒ Delayed (chronic) ☒	Max. Daily Amount (code): 04 Avg. Daily Amount (code): 04 No. of Days On-site (days): 365	N 1 4 WAREHOUSE, ENGINEERING LABORATORIES D 1 4 WAREHOUSE	☐

INFO ONLY
AL WIRE

WIRE
SPRAY STICK LS.
25, 80, 10

INFO ONLY

WAREHOUSE
D STEEL DRUM
E PLASTIC DRUM
I FIBER DRUM

FLOOR
D STEEL DRUM
E PLASTIC DRUM
N PLASTIC JUG
I FIBER DRUM
R OTHER HOPPERS

PRESSURE
1 AMBIENT

TEMPERATURE
4 AMBIENT

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 2 and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

JOSEPH REARDON, Ph.D. SENIOR MANAGER
Name and official title of owner/operator OR owner/operator's authorized representative

Signature

04-27-95
Date signed

Optional Attachments
☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

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Form Approved OMB No 2050 0072

Tier Two

EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

Specific Information by Chemical

Facility Identification

Name: SULZER METCO (US) INC.
Street: 1101 PROSPECT AVENUE
City: WESTBURY County: NASSAU State: NY Zip: 11590
SIC Code: 3542 Dun & Brad Number: 87-429-0349

FOR OFFICIAL USE ONLY
ID #
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Owner/Operator Name
Name: JOSEPH REARDON, Ph.D. Phone: (516) 334-1300
Mail Address: 1101 PROSPECT AVENUE, WESTBURY NY 11590

Emergency Contact
Name: JOSEPH REARDON Title: SENIOR MANAGER
Phone: (516) 334-1300 X2316 24 Hr Phone: (800) 424-9300 CHEMTREC
Name: CONSTANCE CONROY Title: SUPERVISOR
Phone: (516) 334-1300 X2337 24 Hr Phone: (800) 424-9300 CHEMTREC

Important: Read all instructions before completing form

Reporting Period From January 1 to December 31, 19 94

☐ Check if information below is identical to the information submitted last year.

Chemical Description	Physical and Health Hazards (check all that apply)	Inventory	Container Type	Pressure	Temperature	Storage Codes and Locations (Non-Confidential) Storage Locations	Optional
CAS 7440020 Trade Secret ☐ Chem. Name NICKEL Check all that apply: Pure ☐ Mix X Solid X Liquid ☐ Gas ☐ EHS ☐ EHS Name	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) X Delayed (chronic) X	Max. Daily Amount (code) 04 Avg. Daily Amount (code) 04 No. of Days On-site (days) 365	N D	1 1	4 4	WAREHOUSE, ENGINEERING LABORATORIES WAREHOUSE	☐
CAS ☐ Trade Secret ☐ Chem. Name Check all that apply: Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas ☐ EHS ☐ EHS Name	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic) ☐	Max. Daily Amount (code) Avg. Daily Amount (code) No. of Days On-site (days)					☐
CAS ☐ Trade Secret ☐ Chem. Name Check all that apply: Pure ☐ Mix ☐ Solid ☐ Liquid ☐ Gas ☐ EHS ☐ EHS Name	Fire ☐ Sudden Release of Pressure ☐ Reactivity ☐ Immediate (acute) ☐ Delayed (chronic) ☐	Max. Daily Amount (code) Avg. Daily Amount (code) No. of Days On-site (days)					☐

Certification *(Read and sign after completing all sections)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through 2 and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

JOSEPH REARDON, Ph.D. SENIOR MANAGER — Name and official title of owner/operator OR owner/operator's authorized representative
X — Signature
04-27-95 — Date signed

Optional Attachments
☐ I have attached a site plan
☐ I have attached a list of site coordinate abbreviations
☐ I have attached a description of dikes and other safeguard measures

TRK-99014
548722W

07-97624-
97713

#10742

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number:
2. Page 1 of 1
3. Emergency Response Phone: 410-377-3742
4. Manifest Tracking Number: 001251031 JJK

5. Generator's Name and Mailing Address: SULZER METCO (US)
1101 PROSPECT AVE
WESTBURY, NY 11590
Generator's Phone: 516-338-2337
Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: BEDROCK DRA, TRI-STATE MOTOR TRANSIT
U.S. EPA ID Number: MOD 095 038 998

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: WASTE CONTROL SPECIALISTS
9998 W. HWY 176
ANDREWS, TX 79714
Facility's Phone: 505-394-4300
U.S. EPA ID Number:

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	1. RADIOACTIVE MATERIAL, EXCEPTED PACKAGE, LTD QTY OF MATERIAL, UN2910	50	DM	5,166	K	NONE
	2. RADIOACTIVE MATERIAL, EXCEPTED PACKAGE, LTD QTY OF MATERIAL, UN2910	40	DM	4,383	K	NONE
	3.					
	4.					

14. Special Handling Instructions and Additional Information: 9b 1. NRC MANIFEST 70917-03
9b 2. NRC MANIFEST 70806-04

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: JOHN E. MONSALVE
Signature:
Month 09 Day 18 Year 07

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Ed YANKEY
Signature:
Month 9 Day 18 Year 07

Transporter 2 Printed/Typed Name:
Signature:
Month Day Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1. H132
2.
3.
4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name: Bill Thompson
Signature:
Month 9 Day 28 Year 07

EPA Form 8700-22 (Rev. 3-05). Previous editions are obsolete.

DESIGNATED FACILITY TO GENERATOR

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0455
RUN DATE: 08/03/93

C 282200 1828 00047 W I
LOCATION FAC EP

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

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CONTINUED FROM PREVIOUS PAGE

GENERAL CONDITIONS
THE EXPIRATION OF THIS CERTIFICATE TO OPERATE.

SPECIAL CONDITIONS (151)CONDITION 1. AG-1 COMPLIANCE REQUIRED

(0722) --- OPERATIONS. 4 GRIT ---
(0723) 4 GRIT ----- (UNITS).

(15)PRIOR COMMENTS (16)BY 428VSI (17)DATE 09/07/91	(18)CURRENT COMMENTS (19)BY 428 VSI (20)DATE 10/21/93	
1.	1. 4:00 PM- OPER SATIS	(27)LAST INSPECTION DATE 10/21/93
2.	2. ADD ADDITIONAL GRIT CHAMBER UNIT -	(21)INSPECTION STATUS 5
3.	3. CERTIFICATE TO BE MODIFIED	(22)DATE OF NEXT ACTION / /
4.	4.	(23)ISSUE DATE 11/16/93
5.	5.	(24)EXPIRATION DATE 11/15/94
		(25)CO FEE $300

FIRM REP'S SIGNATURE: Joseph Maiu DATE: 10/21/93 ISSUING OFFICER'S SIGNATURE: Marianna M. Hamann DATE: JAN 10 1994

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: I-R-0454
RUN DATE: 08/03/93

C 282200 1828 00047 W I
LOCATION FAC EP

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

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CONTINUED FROM PREVIOUS PAGE

FACILITY EMIS-CLASS / PGM-CODE: A2 POINT EMIS-CLASS / PGM-CODE:

EMISSION POINT 00047
(41)UTM-E: 622.2 KM. (42)STACK HEIGHT: 32 FT. (43)EXIT VELOCITY: 46.00 FT/SEC (44)SIC: 3569 (45)AGENCY-CODE-1: C (COUNTY)
(46)UTM-N: 513.4 KM. (47)HT ABV STRUC: 11 FT. (48)EXIT FLOW: 1820.00 ACFM (49)CO FEE: $225.00 (50)AGENCY-CODE-2: C (COUNTY)
(51)GRND ELEV: 140 FT. (52)STK DIAM: 11 IN. (53)EXIT TEMP: 70 DEGR F (54)CO CONDITIONS: 1 3

UNIT I
(55)HOURS/DAY: 4.0 (56)DAYS/YEAR: 251 (57)% OP BY SEASON: 25 25 25 25 (58)SOURCE CODE: 1105 SAND BLASTING- ENCLO
(59)BLDG: (60)FLOOR NAME: (61)RULE 1: 212.00 (62)RULE 2:

PROCESS/UNIT DESCRIPTION (72)DESCRIPTION
1. THIS UNIT PROVIDES VENTILATION FOR A GRIT BLAST BOOTH
2. USED FOR DEMONSTRATION OPERATIONS. X GRIT CHAMBERS.
3. 3 GRIT CHAMBERS (UNITS) 4

CONTROL EQUIPMENT (73)TYPE: 098 OTHER (74)MFG: METCO WET COLLECTOR, 4CW (75)ID: 47 (76)DATE INSTALLED: 06/89
(77)DISPOSAL METHOD: 06 SOLD (78)USEFUL LIFE: 20 YEARS

AIR CONTAMINANTS	CAS NUMBER	ENV RATING	EMISSIONS ACTUAL	UNIT	HOW DET	PERMISSIBLE	% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR	ANNUAL EMISSIONS (LBS/YEAR) ACTUAL	10×	PERMISSIBLE
PARTICULATES(METAL)	(085) NY075-00-2	(086) C	(087) .078	(088) 01	(089) 06	(090) .078	(091) 90.0	(092) .078	(093) 7.821	(094) 1	(095) 7.821
ALUMINUM OXIDE	(096) 01344-28-1	(097) C	(098) .479	(099) 01	(100) 06	(101) .479	(102) 90.0	(103) .479	(104) 4.720	(105) 2	(106) 4.720
PARTICULATES	(107) NY075-00-0	(108) B	(109) .002	(110) 01	(111) 06	(112) .002	(113) 90.0	(114) .002	(115) 2.400	(116) 0	(117) 2.400

GENERAL CONDITIONS

1. SHOULD SIGNIFICANT NEW SCIENTIFIC EVIDENCE FROM A RECOGNIZED INSTITUTION RESULT IN A DECISION BY DEC THAT LOWER AMBIENT POLLUTION LEVELS MUST BE ESTABLISHED, IT MAY BE NECESSARY TO REDUCE EMISSIONS FROM THIS SOURCE PRIOR TO

CONTINUED ON NEXT PAGE

N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0451
RUN DATE: 08/03/93

C 282200 1828 00047 W I01
LOCATION FAC EP UNIT

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

FACILITY EMIS-CLASS / PGM-CODE: A2 POINT EMIS-CLASS / PGM-CODE:

EMISSION POINT 00047
(41)UTM-E: 622.2 KM. (42)STACK HEIGHT: 32 FT. (43)EXIT VELOCITY: 46.00 FT/SEC (44)SIC: 3569 (45)AGENCY-CODE-1: C (COUNTY)
(46)UTM-N: 513.4 KM. (47)HT ABV STRUC: 11 FT. (48)EXIT FLOW: 1820.00 ACFM (49)CO FEE: $225.00 (50)AGENCY-CODE-2: C (COUNTY)
(51)GRND ELEV: 140 FT. (52)STK DIAM: 11 IN. (53)EXIT TEMP: 70 DEGR F (54)CO CONDITIONS: 1 3

UNIT I01 (55)HOURS/DAY: 3.0 (56)DAYS/YEAR: 251 (57)% OP BY SEASON: 25 25 25 25 (58)SOURCE CODE: 1105 SAND BLASTING- ENCLO

PROCESS/UNIT DESCRIPTION (72)DESCRIPTION I. THIS UNIT PROVIDES VENTILATION FOR A GRIT BLASTER

CONTROL EQUIPMENT (73)TYPE: 099 NONE

AIR CONTAMINANTS		CAS NUMBER	EMISSIONS ACTUAL		UNIT		HOW DET		% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR		ANNUAL EMISSIONS (LBS/YEAR) ACTUAL		10x	
PARTICULATES(METAL)	(085)	NY075-00-2	(087)	.319	(088)	01	(089)	06	(091)	(092)	.319	(093)	240.200	(094)	0
ALUMINUM OXIDE	(096)	01344-28-1	(098)	2.870	(099)	01	(100)	06	(102)	(103)	2.870	(104)	2161	(105)	0

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N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0452
RUN DATE: 08/03/93

C 282200 1828 00047 W I02
LOCATION FAC EP UNIT

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

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CONTINUED FROM PREVIOUS PAGE

FACILITY EMIS-CLASS / PGM-CODE: A2 POINT EMIS-CLASS / PGM-CODE:

EMISSION POINT 00047
(41)UTM-E: 622.2 KM. (42)STACK HEIGHT: 32 FT. (43)EXIT VELOCITY: 46.00 FT/SEC (44)SIC: 3569 (45)AGENCY-CODE-1: C (COUNTY)
(46)UTM-N: 513.4 KM. (47)HT ABV STRUC: 11 FT. (48)EXIT FLOW: 1820.00 ACFM (49)CO FEE: $225.00 (50)AGENCY-CODE-2: C (COUNTY)
(51)GRND ELEV: 140 FT. (52)STK DIAM: 11 IN. (53)EXIT TEMP: 70 DEGR F (54)CO CONDITIONS: 1 3

UNIT I02 (55)HOURS/DAY: .5 (56)DAYS/YEAR: 251 (57)% OP BY SEASON: 25 25 25 25 (58)SOURCE CODE: 1105 SAND BLASTING- ENCLO

PROCESS/UNIT DESCRIPTION (72)DESCRIPTION 1. THIS UNIT PROVIDES VENTILATION FOR GRIT BLASTER

CONTROL EQUIPMENT (73)TYPE: 099 NONE

AIR CONTAMINANTS		CAS NUMBER	EMISSIONS ACTUAL		UNIT		HOW DET		% CONTROL EFFICIENCY		HRLY ACTUAL LBS/HOUR		ANNUAL EMISSIONS (LBS/YEAR) ACTUAL		10x	
PARTICULATES(METAL)	(085)	NY075-00-2	(087)	.230	(088)	01	(089)	06	(091)		(092)	.230	(093)	28.870	(094)	0
ALUMINUM OXIDE	(096)	01344-28-1	(098)	.960	(099)	01	(100)	06	(102)		(103)	.960	(104)	120.500	(105)	0
PARTICULATES	(107)	NY075-00-0	(109)	.012	(110)	01	(111)	06	(113)		(114)	.012	(115)	1.506	(116)	0

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N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
NASSAU COUNTY DEPARTMENT OF HEALTH

SEQNC NO: 1-R-0453
RUN DATE: 08/03/93

C 282200 1828 00047 W I03
LOCATION FAC EP UNIT

CERTIFICATE TO OPERATE AN AIR CONTAMINATION SOURCE
PROCESS, EXHAUST OR VENTILATION SYSTEM UNIT
RENEWAL APPLICATION

OWNER	FACILITY	
(1) METCO INC	(6) METCO INC	(11) CONFIDENTIAL STATUS NON-CONFIDNTL
(2) 1101 PROSPECT AVE	(7) 1101 PROSPECT AVE	(12) APPLICATION STATUS IN COMPLIANCE
(3) WESTBURY (4) NY	(8) WESTBURY (9) 11590	DATE OF LAST CHANGE 10/26/92
(5) 11590	(10) REP: PATRICK TIGHE 334-1300	PRIOR CO ISSUE DATE 11/16/92
		PRIOR CO EXPIRATION DATE 11/15/93

PAGE 3
CONTINUED FROM PREVIOUS PAGE

FACILITY EMIS-CLASS / PGM-CODE: A2 POINT EMIS-CLASS / PGM-CODE:

EMISSION POINT 00047
(41)UTM-E: 622.2 KM. (42)STACK HEIGHT: 32 FT. (43)EXIT VELOCITY: 46.00 FT/SEC (44)SIC: 3569 (45)AGENCY-CODE-1: C (COUNTY)
(46)UTM-N: 513.4 KM. (47)HT ABV STRUC: 11 FT. (48)EXIT FLOW: 1820.00 ACFM (49)CO FEE: $225.00 (50)AGENCY-CODE-2: C (COUNTY)
(51)GRND ELEV: 140 FT. (52)STK DIAM: 11 IN. (53)EXIT TEMP: 70 DEGR F (54)CO CONDITIONS: 1 3

UNIT I03 (55)HOURS/DAY: .5 (56)DAYS/YEAR: 251 (57)% OP BY SEASON: 25 25 25 25 (58)SOURCE CODE: 1105 SAND BLASTING- ENCLO

PROCESS/UNIT DESCRIPTION (72)DESCRIPTION 1. UNIT PROVIDES VENTILATION FOR A GRIT BLASTER

CONTROL EQUIPMENT (73)TYPE: 099 NONE

AIR CONTAMINANTS		CAS NUMBER	EMISSIONS ACTUAL		UNIT		HOW DET		% CONTROL EFFICIENCY	HRLY ACTUAL LBS/HOUR		ANNUAL EMISSIONS (LBS/YEAR) ACTUAL		10x	
PARTICULATES(METAL)	(085)	NY075-00-2	(087)	.230	(088)	01	(089)	06	(091)	(092)	.230	(093)	126.000	(094)	0
ALUMINUM OXIDE	(096)	01344-28-1	(098)	.960	(099)	01	(100)	06	(102)	(103)	.960	(104)	120.500	(105)	0
PARTICULATES	(107)	NY075-00-0	(109)	.012	(110)	01	(111)	06	(113)	(114)	.012	(115)	1.506	(116)	0

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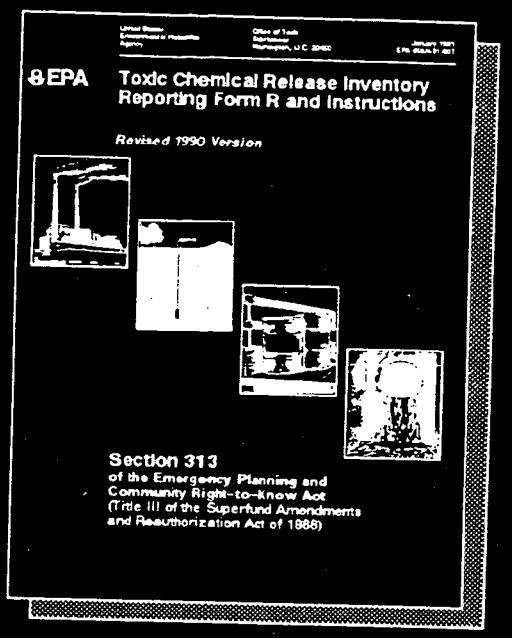
United States
Environmental Protection
Agency

Office of Toxic
Substances, TS-793
Washington, D.C. 20460

January 1991
EPA 560/4-91-001

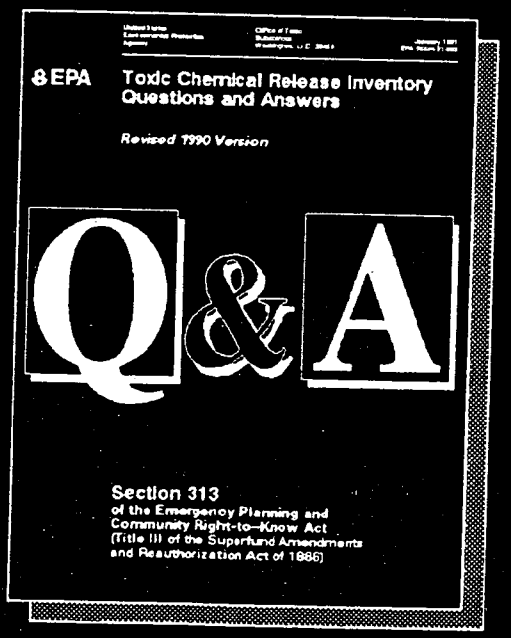
EPA

Toxic Chemical Release Inventory Reporting Package for 1990



Toxic Chemical Release Inventory Reporting Form R and Instructions

- Reporting Form R
- Reporting Codes Form R
- Example of Reporting Form R Preparation
- Common Errors Found on Form Reports
- Supplier Notification Requirements
- How to Determine Latitude and Longitude
- State Designated Section 313 Contacts
- Section 313 EPA Regional Contacts
- Section 313 Document Request Form



Toxic Chemical Release Inventory Questions and Answers

- Threshold Determinations
- Chemical Specific Issues
- Mixtures and Solutions
- Exemptions
- Releases of the Chemical
- Policy Directives
  - Article Exemption
  - De Minimis Exemption
  - Recycle/Reuse Exemptions
  - Ammonia and Ammonia Salts

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EPA

Toxic Chemical Release Inventory Reporting Package for 1990

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, D.C. 20460

January, 1991

OFFICE OF
PESTICIDES AND TOXIC
SUBSTANCES

Dear Facility Compliance Manager:

This Toxic Chemical Release Inventory Reporting Package contains complete instructions for preparing and submitting your TRI reports. Except for a few minor changes, Form R remains essentially the same as last year. Instructions for determining longitude and latitude have been revised (Appendix F). The section describing common errors in completing Form R has also been greatly expanded (Appendix D).

EPA is continuing its efforts to reduce the burden of TRI reporting, given the complexity of the task. This year we are providing to you the "Toxic Chemical Release Inventory Reporting System," software that will enable you to prepare TRI reports in electronic format. It is an easy-to-use, DOS-based, computer program that will prompt you to enter data onto an electronic Form R, and produce a floppy disk containing your report. When EPA receives your floppy disk, the data will be transferred directly to the computer, thus eliminating the need for EPA to key the data and eliminating the possibility of keypunch errors. "Overlays" are provided with the software to enable you to produce hard copy reports for your own files and for submission to your state if it does not accept magnetic media. Of course, we will continue to accept printed Form R's, but I would encourage you to report in electronic form. (TRI reporting software is also available from several commercial sources. See the next page for a list of potential suppliers.)

As we prepare for the fourth year of Toxic Chemical Release Inventory (TRI) reporting, I am struck by the increasing reliance on TRI and similar data as the yardstick by which progress on other environmental initiatives is measured. For example, the new Clean Air Act Amendments contain provisions for voluntary reduction of air emissions; TRI data may be used as a baseline for evaluating achievements towards this goal. The Pollution Prevention Act of 1990 will significantly impact TRI reporting for the 1991 reporting year, making reporting mandatory on a variety of waste minimization and pollution prevention activities.

We appreciate your help in making TRI a valuable tool for looking at toxic chemical issues. In view of the soon-to-be mandatory pollution prevention reporting, we would encourage you to submit the voluntary waste minimization parts of the form this year.

Sincerely,

Mark A. Greenwood

Mark A. Greenwood, Director
Office of Toxic Substances

Printed on Recycled Paper

TRI REPORTING SOFTWARE from COMMERCIAL VENDORS *

AMOCO
200 E. Randolph Drive
P.O. Box 87707
Chicago, IL 60680-0707
Lisa A. Smith/(312) 856-6549

BAKER/TSA INC.
420 Rouser Rd., AOP Bldg. 3
Carapolis, PA 15108
Jeffrey G. Bland/(412) 269-6000

CORBUS, INC.
204C Line Road
Kennett Square, Pennsylvania 19348
Jim J. Haag/(215)444-5691

DU PONT COMPANY
P.O. Box 6090
Newark, DE 19714-6090
Clare M. Ownings/1-800-526-1699

ERM COMPUTER SERVICES INC.
855 Springdale Drive
Exton, PA 19341
William Hope/(215) 524-3600

MONSANTO
800 N. Lindberg Blvd. - MS FIEG
St. Louis, MO 63167
Gale Crenshaw/(314) 694-8766

A.V. SYSTEMS, INC.
924 Woodlawn Street
Ann Arbor, MI 48104
Marie H. Shih/(313) 662-0355

CHEM-TOX SYSTEM DIVISION
RESOURCE CONSULTANTS
7121 Cross Roads Blvd.
P.O. Box 1848
Brentwood, TN 37024-1848
James L. Wood/(615) 373-5040

DLS ASSOCIATES
P.O. Box 8406
St. Louis, MO 63132
David Shapiro/(314) 532-0769

ENVIRO BASE SYSTEMS
9085 E. Mineral Circle
Suite 230
Englewood, CO 80112
Richard L. Sayrs/(303) 790-8396

MEIBURGER ENVIRONMENTAL
SERVICES
93 Centre Pointe Drive
St. Charles, MO 63303
Paul Meiburger/(314) 928-6424

SOFTWARE INNOVATIONS
(aka Geesman Software)
1818 Vermont Ave., NW.
Washington, D.C. 20001
Bruce Giesert/(202) 332-2858

* The packages listed here were approved for submission of 1989 forms. Please check with the vendor to determine if a 1990 package will be available.