COMMONWEALTH OF PUERTO RICO / OFFICE OF THE GOVERNOR

GENERATOR ANNUAL HAZARDOUS WASTE

Environmental Quality Board

This report is for the calendar year ending December 31, 1982 4/14/83

PRD090031410

GENERAL ELECTRIC CONTROLS INC.
~~RAFAEL MARTINEZ PROCESS S~~
PO BOX 328
VEGA ALTA PR 00762

GENERAL INSTRUCTIONS: If you ... label attached to the mailing envel... was enclosed, affix it in the space ... information on the label is incorrect, ... and provide the correct information ... tion below. If the information is correct and comp... Sections I, II, and III below blank. If you did not ... preprinted label, complete all sections. REFER TO ... CIFIC INSTRUCTIONS CONTAINED IN THIS BOOK... BEFORE COMPLETING THIS FORM. The information ... quested in this report is required by law (Section 3002 of t... Resource Conservation Recovery Act).

Please print/type with elite type (12 characters per inch)

I. GENERATOR'S EPA I.D. NUMBER

T/A C

F P R D 0 9 0 0 3 1 4 1 0 1 1

1 2 13 14 15

II. NAME OF INSTALLATION

30 69

III. INSTALLATION MAILING ADDRESS

3

15 16 45

Street or P.O. Box

4

15 16 41 42 47 51

City or Town State Zip Code

IV. LOCATION OF INSTALLATION (if different than section III above)

5 S T R O A D #2 K M 3 0.1

15 16 45

Street or Route number

6 V E G A A L T A P R 0 0 7 6 2

15 16 41 42 47 51

City or Town State Zip Code

V. INSTALLATION CONTACT

2 R I V E R A G I L B E R T O

15 16 45

Name (last and first)

8 0 9 - 8 8 3 - 3 0 0 0

46 55

Phone No. (area code & no.)

475534

VI. 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.

GILBERTO RIVERA LICENCIA PUERTO RICO

Gilberto Rivera Mfg. Process Engineer 4/14/83

Print/Type Name Title Signature of Authorized Representative Date Signed

ENVIRONMENTAL QUALITY BOARD

Generator Annual Hazardous Waste Report (cont.)

This report is for the calendar year ending December 31, 1982

Date rec'd: _____ Rec'd by: _____

VII. GENERATOR'S EPA I.D. NO.

T/A C

G P R D 0 9 0 0 3 1 4 1 0 1

1 2 13 14 15

VIII. FACILITY NAME (specify facility to which all wastes on this page were shipped)

GENERAL ELECTRIC CONTROLS, INC.

IX. FACILITY'S EPA I.D. NO.

F P R D 0 9 0 0 3 1 4 1 0

16 28

X. FACILITY ADDRESS

SAME AS GENERATOR

XI. TRANSPORTATION SERVICES USED (List the name and EPA identification numbers of all transporters whose services were used during 1981. This section to be completed only once. Do not repeat on supplemental sheets.)

NONE

XII. WASTE IDENTIFICATION

Sequence	Line	A. Description of Waste	B. DOT Hazard Code	C. EPA Hazardous Waste No. (see instructions)	D. Amount of Waste	E. Unit of Measure
37	1	Waste Compound, Cleaning, Liquid	0 1 (33 34)	D 0 0 1 (35 38 39 42) (43 46 47 50)	2 0 0 0 (51 59)	P
	2	Waste, 1, 1, 1-Trichloroethane	1 3	F 0 0 1	4 0 0	P
	3	Waste, Solvent, N.O.S.	0 1	D 0 0 1	4 0 0 0	P
	4	Hazardous waste, Liquid, N.O.S.	0 5	F 0 0 6	3 9	T
	5					
	6					
	7					
	8					
	9					
	10					
	11					
	12					

XIII. COMMENTS (enter information by section number—see instructions)

16
X55

COMMONWEALTH OF PUERTO RICO / OFFICE OF THE GOVERNOR

FACILITY ANNUAL HAZARDOUS WASTE REPORT

Environmental Quality Board

This report is for the calendar year ending December 31, 1982

AFFIX LABEL HERE

Please print/type with elite type (12 characters per inch)

GENERAL INSTRUCTIONS: If you rec[illegible]ted label attached to the mailing envelope in [illegible]rm was enclosed, affix it in the space provided. If [illegible] the information on the label is incorrect, draw a line through it and provide the correct information in the appropriate section below. If the information is correct and complete, leave Sections I, II, and III below blank. If you did not receive a preprinted label, complete all sections. REFER TO THE SPECIFIC INSTRUCTIONS CONTAINED IN THIS BOOKLET BEFORE COMPLETING THIS FORM: The information requested in this report is required by law (Section 3004 of the Resource Conservation Recovery Act).

I. FACILITY EPA I.D. NUMBER

T/A C

F P R D 0 9 0 0 3 1 4 1 0 1

1 2 13 14 15

II. NAME OF FACILITY

General Electric Controls Inc.

30 69

III. FACILITY MAILING ADDRESS

3 P O Box 328

15 16 45

Street or P.O. Box

4 Vega Alta | P R | 0 0 7 6 2

15 16 | 41 42 | 47 51

City or Town | State | Zip Code

IV. LOCATION OF FACILITY (if different than section III above)

5 ST Road #2 KM 30.1

15 16 45

Street or Route number

6 Vega Alta | P R | 0 0 7 6 2

15 16 | 41 42 | 47 51

City or Town | State | Zip Code

V. FACILITY CONTACT

2 Gilberto Rivera

15 16 45

Name (last and first)

809-883-3000

46 55

Phone No. (area code & no.)

VI. COST ESTIMATES FOR FACILITIES

$ 132,000

16 19 22

Cost Estimate for Facility Closure.

$ 000

25 28 31

Cost Estimate for Post Closure Monitoring and Maintenance (disposal facilities only)

VII. 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.

Gilberto Rivera MFG. Prod. Eng. [signature] 4/14/83

Print Type Name | Title | Signature of Authorized Representative | Date Signed

GILBERTO RIVERA LICENCIA PUERTO RICO

ENVIRONMENTAL QUALITY BOARD

Generator Annual Hazardous Waste Report (cont.)

This report is for the calendar year ending December 31, 1982

Date rec'd: _____ Rec'd by: _____

VII. GENERATOR'S EPA I.D. NO.

T/A C

G P R D 0 9 0 0 3 1 4 1 0 1 1

1 2 13 14 15

IX. FACILITY'S EPA I.D. NO.

F L A D 0 0 0 6 1 8 2 5 6

16 28

VIII. FACILITY NAME (specify facility to which all waste in this page were shipped)

Browning Ferris Industries

X. FACILITY ADDRESS

Calcasieu Disposal Facilities
Willow Springs Road
West Lake, Lousiana

XI. TRANSPORTATION SERVICES USED (List the name and EPA identification numbers of all transporters whose services were used during 1981. This section to be completed only once. Do not repeat on supplemental sheets.)

Transporte Jorge Díaz PRD 980526834 Browning Ferris Ind. LAD000-618-306
Trailer Marine Transport PRD 000-559-360

XII. WASTE IDENTIFICATION

Sequence	Line	A. Description of Waste	B. DOT Hazard code	C. EPA Hazardous Waste No. (see instructions)	D. Amount of Waste
32	1	Hazardous waste Liquid, N.O.S.	1 5 (33 34)	F0 0 6 (35 38 39 42; 43 46 47 50)	4 1 (51 59)
	2				
	3				
	4				
	5				
	6				
	7				
	8				
	9				
	10				
	11				
	12				

XIII. COMMENTS (enter information by section number—see instructions)

Facility Annual Hazardous Waste Report (cont.)

This report is for the calendar year ending December 31, 1982

VIII. FACILITY'S EPA I.D. NO. T/A C

F P R 0 0 9 0 0 3 1 4 1 0 1 1
1 2 13 14 15

Date received: _____

Received by: _____

IX. GENERATOR'S EPA I.D. NO.

C P R 0 0 9 0 0 3 1 4 1 0
16 28

X. GENERATOR NAME (specify generator from whom all wastes on this page were received)

"ON-SITE"

XI. GENERATOR ADDRESS

XII. WASTE IDENTIFICATION

Sequence # (29–32)	Line #	A. Description of Waste	B. EPA Hazardous Waste No. (see instructions) (33–40)	C. Handling Method (49–51)	D. Amount of Waste (52–60)	E. Unit of Measure (61)
	1	Waste Compound, Cleaning, Liqui	D001	S01	2000	P
	2	Waste, 1,1,1,-Trichloroethane	F001	S01	400	P
	3	Waste, slovent, N.O.S.	D001	S01	4000	P
	4	Hazardous waste, liquid, N.O.S.	F006	S01	39	P
	5					
	6					
	7					
	8					
	9					
	10					
	11					
	12					

XIII. COMMENTS (enter information by section number—see instructions)

12/3/80

HAZARDOUS WASTE MANIFEST

01
MANIFEST DOCUMENT NUMBER

Servicios Carbareon Inc.
NAME OF CARRIER (SCAC)

SHIPPER NUMBER

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	PRQ00044053	General Electric Controls Inc P.O. Box 328 Vega Alta PR 00762	12/3/80
TRANSPORTER # 1	S/R 54 PRD091018622	Servicios Carbareon Inc, Firm Delivery [illegible]	12/3/80
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	RP02 PRD000831487	Carbareon, Inc.	12/3/80
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			

WASTE INFORMATION

O. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
Steel drums		F006	Waste water treatment sludge from electroplating operation			—	Gallons	3960		
steel drums		F002	Spent solvent 111 (Trichloroethane)	UN2831	None	N/A	"	440		

SPECIAL HANDLING INSTRUCTIONS

—

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

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 and the U.S. Environmental Protection Agency.

[illegible] 12/3/80
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

[illegible] 12-3-80
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

[illegible] 12/3/80
TSDF SIGNATURE DATE

3

STYLE F-50 © LABELMASTER CHICAGO, IL 60626

sheet for
structions
PLEASE TYPE

FILE

COMMONWEALTH OF PUERTO RICO
ENVIRONMENTAL QUALITY BOARD
HAZARDOUS WASTE MANIFEST

12/16/81

PART A: DOCUMENT NO. P. R.

GENERATOR NAME: GENERAL ELECTRIC CONTROLS, INC.	PHONE: 883-3000	EPA ID NO.: PRD090031410
SITE ADDRESS: CARRETERA # 2 KM 30.2 VEGA ALTA, PUERTO RICO 00762		
TRANSPORTER NO. 1: SERVICIOS CARBAREON, INC.	PHONE: 836-2058	PRD091018622
SITE ADDRESS: CARRETERA # 385 BO. TALLABOA, PEÑUELAS, P. R. 00724		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY	PHONE	
SITE ADDRESS		

IF MORE THAN TWO TRANSPORTERS ARE TO BE UTILIZED, FILL OUT THE FOLLOWING AS APPROPIATE

THIS FORM IS NO. ———— OF A TOTAL OF ——— THE FIRST MANIFEST DOCUMENT NO. IS. P. R.

	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS NO.	CONTAINERS TYPE	EQB EPA HAZ CODE	EQB/EPA WASTE TYPE
1	SOLVENT N. O. S.	COMBUSTIBLE	1993	L	00770	GAL.	014		T	
2	Flammable Solid	Flammable	1993	S	00655	GAL	001		I	
3										
4										
5										
6										

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

GENERATOR'S CERTIFICATION: This is to certify tha the above named materials are properly classified, described, marked and labelled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, U.S. EPA and the Commonwealth of P.R. The waste described above were consigned to the Transporter named. The Treatment, Storage or Disposal Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE	TITLE	DATE SHIPPED	EXPECTED ARRIVAL DATE
Rafael A Martinez	Process Spec.	12 16 81 (MO. DAY YR.)	12 16 81 (MO. DAY YR.)

TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest."	TRANSPORTER NO. 1 VEHICLE ID. NO.	DATE RECEIVED
	670344	12 16 81 (MO. DAY YR.)

Edwin [illegible]

TEAR AT THIS PERFORATION

Name of Facility - General Electric Controls
RCRA ID - PRT 000041053
Date of Inspection - August 11, 1981
Type of Inspection: Generator X Transporter Treatment & Storage)
Name of EPA/State Inspector -

Mrs. Anitza Burgos Archilla
Natural Resources Technician
Env. Quality Board
Santurce, Puerto Rico

Findings of Inspection:

General Electric Controls operates a manufacturing plant that produces contactors release. The hazardous wastes are generated from operations such as plating and cleaning of electrical parts and machinery. The waste generated by the plating process is treated in the same plant. From this treatment is generated a sludge which is stored in 55 gallon drums and the effluents are discharged to a river. They have an NPDES permit. They generate about 6-7 drums of sludge weekly.

During the inspection to the treatment plant and hazardous waste storage area the following was observed:

1. The treatment plant is in good conditions, except that the fumes generated by the treatment process have corroded the structure that holds the pipes that conduct the effluent.

2. The hazardous waste storage area is located outdoors. At the time of the inspection there were aproximately 90 drums containing hazardous wastes (sludge and solvents). These drums are placed over wood palets and few of them have inner liners. All the drums were labelled closed and in good conditions. There were no barriers and signs in the hazardous waste storage area.

These wastes have being stored since November 1980. The Company will dispose them in Servicios Carbareón Facility, located in Peñuelas, Puerto Rico.

Action(s) Recommended:

NEW YORK, N.Y. 10007

1. MANIFEST NUMBER
Generator I.D. No. G9547-01
Sequence No. LA 001

STATE OF LOUISIANA
DEPARTMENT OF NATURAL RESOURCES
HAZARDOUS WASTE MANAGEMENT
P. O. BOX 44396
BATON ROUGE, LOUISIANA 70804

For Dept. Use
Index # _____
Date _____

2. WASTE INFORMATION:

HM	SHIPPING DESCRIPTION	HAZARD CLASS	WASTE NUMBER	WEIGHT (TONS)	PACKAGING QTY.	PACKAGING TYPE
X	Hazardous Waste,					
	Liquid, N.O.S.	ORM-E	F 006	12.5	80	Drums

3. GENERATOR INFORMATION: Identification Number: PRD090031410 Telephone: (809) 883-3000
NAME OF COMPANY: General Electric Controls, Inc.
ADDRESS: P. O. Box 328 Vega Alta, Puerto Rico ZIP: 00762
SHIPPING LOCATION: Road No. 2 KM 30.1 Vega Alta, Puerto Rico
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, and the Louisiana Department of Natural Resources.

Generator Signature _____ Date 5/7/82

4. TRANSPORTER INFORMATION: Identification Number: 278-H Telephone: (318) 882-0530
NAME OF COMPANY: Browning-Ferris Ind. DATE OF PICK UP: _____ TIME: _____
CERTIFICATION: This is to certify that the above-named materials were picked up at date and time above and that to the best of the transporter's knowledge, his portion of the manifest is accurately and correctly filled out.

Transporter Signature _____

CERTIFICATION: This is to certify that the above-named materials were delivered without incident to the disposer at the date and time below.

Transporter Signature _____ DATE OF DELIVERY _____ TIME: _____

5. DISPOSER INFORMATION: Identification Number: D-529 Telephone: (318) 527-6857
NAME OF COMPANY: Browning Ferris Industries Calcasieu Disposal Facility
LOCATION WHERE SHIPMENT RECEIVED: Willow Springs Road West Lake, Louisiana
CERTIFICATION: This is to certify acceptance of the hazardous waste, that the waste has been or will be disposed of in accordance with Department of Natural Resources regulations, and that to the best of the disposer's knowledge, his portion is accurately and correctly filled out.

EPA ID# LAD 000-618-256

Disposer Signature _____ Date _____

6. EMERGENCY INFORMATION:
Immediate Response Information: In case of accident or spill, call Louisiana Department of Public Safety Telephone: (504) 925-6595
Special Handling Instructions: _____
Comments: 002298

Transporter #1 Transporte Jorge Díaz Phone: (809) 781-0565 Signature: _____
EPA ID# PRT0000-1970-3 Date Pick-Up 5/7/82 Time: 5:10 PM

Transporter #2 Trailer Marine Transport Phone: (809) 721-1313 Signature: _____
EPA ID# PRD-090-559360 Date Pick-Up _____ Time: _____

REV. 12/79

DNR FORM HM-3 Original—DNR, Green—Generator's 2nd, Yellow—Disposer, Pink—Transporter, Gold—Generator 1st

1. MANIFEST NUMBER
Generator I.D. No. G9547-02
Sequence No. LA 002

STATE OF LOUISIANA
DEPARTMENT OF NATURAL RESOURCES
HAZARDOUS WASTE MANAGEMENT
P.O. BOX 44066
BATON ROUGE, LOUISIANA 70804

For Dept. Use
Index # _____
Date _____

2. WASTE INFORMATION:

HM	SHIPPING DESCRIPTION	HAZARD CLASS	WASTE NUMBER	WEIGHT (TONS)	PACKAGING QTY.	PACKAGING TYPE
X	Hazardous Waste,					
	Liquid, N.O.S.	ORM-E	F 006	12.5	80	Drums

3. GENERATOR INFORMATION: Identification Number: PRD090031410 Telephone: (809)883-3000
NAME OF COMPANY: General Electric Controls, Inc.
ADDRESS: P. O. Box 328 Vega Alta, Puerto Rico ZIP: 00762
SHIPPING LOCATION: Road No. 2 KM 30.1 Vega Alta, Puerto Rico
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, and the Louisiana Department of Natural Resources.

Generator Signature _____ Date 5/28/82

4. TRANSPORTER INFORMATION: Identification Number: 278-H Telephone: (318)882-0530
NAME OF COMPANY: Browning-Ferris Ind DATE OF PICK UP: _____ TIME: _____
CERTIFICATION: This is to certify that the above-named materials were picked up at date and time above and that to the best of the transporter's knowledge, his portion of the manifest is accurately and correctly filled out.

Transporter Signature _____ EPA ID# LAD000-618-306

CERTIFICATION: This is to certify that the above-named materials were delivered without incident to the disposer at the date and time below.

Transporter Signature _____ DATE OF DELIVERY _____ TIME: _____

5. DISPOSER INFORMATION: Identification Number: D-529 Telephone: (318)527-6857
NAME OF COMPANY: Browning Ferris Industries Calcasieu Disposal Facility
LOCATION WHERE SHIPMENT RECEIVED: Willow Springs Road West Lake, Louisiana
CERTIFICATION: This is to certify acceptance of the hazardous waste, that the waste has been or will be disposed of in accordance with Department of Natural Resources regulations, and that to the best of the disposer's knowledge, his portion is accurately and correctly filled out.

EPA ID# LAD 000-618-256

Disposer Signature _____ Date _____

6. EMERGENCY INFORMATION:
Immediate Response Information: In case of accident or spill, call Louisiana Department of Public Safety Telephone: (504)925-6595
Special Handling Instructions: 002299
Comments:

Transporter #1 Transporte Jorge Díaz Phone: (809)781-0565 Signature: _____
EPA ID# PRT0000-1970-3 Date Pick-Up 6/8/82 Time: _____ A.M.

Transporter #2 Trailer Marine Transport Phone: (809)721-1313 Signature: _____
EPA ID# PRD-090-559360 Date Pick-Up _____ Time: _____

DNR FORM HM-3 Original—DNR, Green—Generator's 2nd, Yellow—Disposer, Pink—Transporter, Gold—Generator 1st

1. MANIFEST NUMBER
Generator I.D. No. G9547
Sequence No. 003

STATE OF LOUISIANA
DEPARTMENT OF NATURAL RESOURCES
HAZARDOUS WASTE MANAGEMENT
P.O. BOX 44066
BATON ROUGE, LOUISIANA 70804

For Dept. Use
Index # _____
Date _____

2. WASTE INFORMATION:

HM	SHIPPING DESCRIPTION	HAZARD CLASS	WASTE NUMBER	WEIGHT (TONS)	PACKAGING QTY.	PACKAGING TYPE
X	Hazardous Waste,					
	Liquid, N.O.S.	ORM-E	9547-01	16	80	Drums

3. GENERATOR INFORMATION: Identification Number: G-9547 Telephone: *809-883-3000
NAME OF COMPANY: General Electric Contols, Inc.
ADDRESS: P.O. Box 328, Vega Alta, P. R. ZIP: 00762
SHIPPING LOCATION: Road No. 2, Km 30.2, Vega Alta, Puerto Rico
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, and the Louisiana Department of Natural Resources. EPA ID# PRD090031410

[signature] 11/5/82
Generator Signature Date

4. TRANSPORTER INFORMATION: Identification Number: 288-H Telephone: (318) 882-0530
NAME OF COMPANY: Browning-Ferris Ind. DATE OF PICK UP: _____ TIME: _____
CERTIFICATION: This is to certify that the above-named materials were picked up at date and time above and that to the best of the transporter's knowledge, his portion of the manifest is accurately and correctly filled out.
EPA ID# LAD000-618-306

_____
Transporter Signature

CERTIFICATION: This is to certify that the above-named materials were delivered without incident to the disposer at the date and time below.

_____ DATE OF DELIVERY _____ TIME: _____
Transporter Signature

5. DISPOSER INFORMATION: Identification Number: D-529 GD-251 Telephone: (318) 527-6857
NAME OF COMPANY: Browning Ferris Ind. Calcasieu Disposal Facility
LOCATION WHERE SHIPMENT RECEIVED: Willow Springs Road, West Lake, Louisiana
CERTIFICATION: This is to certify acceptance of the hazardous waste, that the waste has been or will be disposed of in accordance with Department of Natural Resources regulations, and that to the best of the disposer's knowledge, his portion is accurately and correctly filled out. EPA ID# LAD000-618-256

_____ _____
Disposer Signature Date

6. EMERGENCY INFORMATION:
Immediate Response Information: In case of Accident or Spill, Call Louisiana Department of Public Safety Telephone: (504) 925-6595
Special Handling Instructions: 002300
Comments:

Transporter #1: Transporte Jorge Diaz Phone (809) 781-0565 Signature: [signature]
EPAID# ~~[illegible]~~ Date Pick-Up 11/5/82 Time: 2:23 PM
PRD 980526834

Transporter #2: Trailer Marine Transport Phone *809-721-1313 Signature: _____
EPAID# PRD-080-559-360 Date Pick-up _____ Time: _____

DNR FORM HM-3 Original—DNR, Green—Generator's 2nd, Yellow—Disposer, Pink—Transporter, Gold—Generator 1st

On August 11, 1981, I visited General Electric Controls, located in Vega Alta, Puerto Rico. This visit was made in order to perform a Full RCRA Interim Status Inspection. I was attended by Mr. Rafael Martínez, Process Specialist and Mr. Gilberto Rivera.

General Electric Controls operates a manufacturing plant that produces "contactors release". The raw material used are: steel, copper, bronze, plastics, hidraulic and mineral oil and solvents (trichloroetane III, agitene). The oils are used for the machinery.

The hazardous wastes are generated from operations such as plating and cleaning of electrical parts and machinery. The waste generated by the plating process is treated in the same plant. From this treatment is generated a sludge which is stored in 55 gallon drums and the effluents are discharged to a river (Cibuco's river). They have a NPDES permit. They generate about 6-7 drums of sludge weekly and 2-3 drums of used oil on a monthly basis. The oil is recovered by Hydrocarbon Recovery Systems.

They make daily analysis of the effluent before discharging it to the river and the sludge is analized monthly by Caribtec Labs.

During the inspection to the treatment plant and hazardous waste storage area, the following was observed:

1) The treatment plant is in good conditions, except that the fumes generated by the treatment process have corrode the structure that holds the pipes that conduct the effluent.

2) The hazardous waste storage area is located outdoors. At the time of the inspection there were approximately 90 drums containing hazardous wastes (sludge and solvents). These drums are placed over wood palets and few of them have inner liners. All the drums were labeled closed, and in good conditions. There were no barriers and signs in this hazardous waste storage area.

   These wastes have being stored since November, 1980. The Company will dispose them in "Servicios Carbareón Facility", located in Peñuelas, Puerto Rico.

002301

COMMENTS:

1. We will send a letter to Mr. Rafael Martínez, requiring the following:

   a- They must control the corrosion of the structures in the treatment plant caused by the fumes.

2. In reference to the hazardous waste storage facility they must comply with Part 265, Subpart I of the 40 CFR May 19, 1981, and Rule 812 of our Regulations.

General Electric Controls have all the documents required for T&D facilities. The same were evaluated and found to be in compliance with the State and Local requirements.

	Yes	No	Unknown
4) Are food chain crops being grown on the facility property?			
a. If "YES", can the facility operator document that arsenic, lead and mercury:			
- will not be transferred to the crop or ingested by food chain animals or	___	___	___
- will not occur in greater concentrations in the crops grown on the land treatment facility than in the same crops grown on untreated soils.	___	___	___
b. Has notification of the growing of the food chain crops been made to the Regional Administrator?	___	___	___
5) Is there a written and implemented plan for unsaturated zone monitoring?	___	___	___
6) Are there records of the application dates, application rates, quantities and location of each hazardous waste placed in the facility?	___	___	___
7) Do the closure and post-closure plans address:			
a. control of migration of hazardous wastes into the groundwater?	___	___	___
b. control of run-off, release of airborne particulate contaminants?	___	___	___
c. compliance with requirements for the growth of food-chain crops (if they are present)?	___	___	___
8) Is ignitable or reactive waste immediately incorporated into the soil so the resulting waste no longer meets that definition? If "YES", explain	___	___	___
9) Are incompatible wastes placed in the same land treatment a[illegible] If "YES", explain	___	___	___

	YES	NO	DON'T KNOW
10) What is the area of the land receiving hazardous waste treatment?			

LANDFILLS (§ 265.300)

	YES	NO	DON'T KNOW
1) Is run-on diverted away from the active portions of the landfill?	___	___	___
2) Is run-off from active portions of the landfill collected?	___	___	___
3) Is waste which is subject to wind dispersal controlled? Explain.	___	___	___
4) Does the owner/operator maintain a map with:			
- the exact location and dimensions of each cell	___	___	___
- the contents of each cell and approximate location of each hazardous waste type.	___	___	___
5) Do the closure and post-closure plans address:			
- control of pollutant migration via groundwater?	___	___	___
- control of surface water infiltration?	___	___	___
- prevention of erosion?	___	___	___
6) Is liquid or liquefiable waste treated before being placed in the landfill? Explain how you know?	___	___	___
7) Are precautions taken to insure that incompatible wastes are not placed in the same landfill cells? If "NO", explain	___	___	___

	YES	NO	DON'T KNOW
8) Are bulk or non-containerized wastes containing free liquids placed in the landfill? If "YES",	___	___	___
a. Does the landfill have a liner which is chemically and physically resistant to the added liquid?	___	___	___
b. Is the waste treated and stabilized so that free liquids are no longer present?	___	___	___
9) Are containers holding liquid waste or waste containing free liquids placed in the landfill?	___	___	___
10) Are empty containers (e.g. those containing less than 1/2 inch of liquid) placed in the landfills?	___	___	___
If so, are they crushed flat, shredded or similary reduced in volume before they are buried?	___	___	___
11) What is the approximate area of the hazardous waste landfill?			

INCINERATORS AND THERMAL TREATMENT

(§265.340 and 265.379)

1) What type of incinerator or thermal treatment is on the site (e.g. internal incinerator, boiler, fluidized bed, etc.)?			
2) Was hazardous waste being incinerated or thermally treated during your inspection? If "YES", answer the following question. If "NO", answer the questions 3 and 7.	___	___	___
3) Was waste analysis been performed (and written records kept) on the following:			
- heating value of the waste	___	___	___
- halogen content	___	___	___
- sulfur content	___	___	___

	YES	NO	DON'T KNOW
- concentration of lead	___	___	___
- concentration of mercury	___	___	___

NOTE: Waste analysis need not be performed on each waste load if there are documented data available to show waste characteristics that do not vary. If there are such documented data available, check there /____/.

4) Does it appear that the owner/operator brings his thermal treatment process to steady state (normal) conditions of operation before introducing hazardous wastes?	___	___	___
5) Did it appear during your inspection that there was adequate monitoring and inspection by owner/operator every 15 minutes during hazardous waste incineration for:			
- waste feed	___	___	___
- auxiliary fuel feed	___	___	___
- air flow	___	___	___
- incinerator temperature	___	___	___
- scrubber flow	___	___	___
- scrubber pr[illegible]	___	___	___
- relevant level controls	___	___	___
Every hour for			
- stack [illegible] color and opacity)	___	___	___
6) Is there ope[illegible] of hazardous waste?	___	___	___

a. If [illegible] being burned? (Only burn[illegible] detonation of explosives is permi[illegible]

b. If ope[illegible] detonation of explosives is taking place, approximately what is the distance from the open burning or detonation to the property of others?

	YES	NO	DON'T KNOW
7) Does the incinerator appear to be operating properly? (Do emergency shutdown controls and system alarms seem to be in good working order?) Please explain.	___	___	___
a. Is there any evidence of fugitive emissions?	___	___	___
8) Is the residue from the incinerator treated by the owner as a hazardous waste? Please explain.	___	___	___

9) What types of air pollution control devices (if any) are installed on the incinerator?

CHEMICAL, PHYSICAL AND BIOLOGICAL TREATMENT (S265.400)

1) Does the treatment process system show any signs of ruptures, leaks, or corrosion? Please explain.	___	___	___
2) Is there a means to stop the inflow of continuously-fed hazardous wastes?	___	___	___
3) Is there ignitable or reactive waste fed into the treatment system?	___	___	___
If "YES", has it been treated or protected from any material or conditions which may cause it to ignite or react? If so, explain how.	___	___	___
Are the incompatible wastes placed in the same treatment [illegible]? If "YES", exp[illegible]	___	___	___

4) Describe the [illegible] system at this facility.

MENT, STORAGE AND DISPOSAL

CTION FORM FOR TSD FACILITIES ONLY

EPA I.D. NUMBER:
PRT0000 41053

INSPECTOR'S NAME:
Anita Burgos Archuta

TITLE:
Natural Resource Technician

BRANCH/ORGANIZATION:
Land Pollution Control Program
Environmental Quality Board

DATE OF INSPECTION: August 11, 1981

OTHER ENVIRONMENTAL PERMITS HELD BY FACILITY:

- [x] NPDES
- [ ] AIR
- [ ] OTHER

TIME OF DAY INSPECTION TOOK PLACE: 9:30 a.m.

	YES	NO	DON'T KNOW
		✓	
Aproximately more than 40 drums contain residuals, metalic oils.	✓		
		✓	
	✓		
	✓		
		✓	
		✓	

believe that the facility has hazardous waste

leads you to believe it is hazardous waste?
ate box:

s that its waste is hazardous during the inspection.

the waste is hazardous in its RCRA notification
Permit Application.

terial is listed in the regulations as a hazardous
nonspecific source (S261.31).

terial is listed in the regulations as a hazardous
specific source (S261.32).

or product is listed in the regulations as a dis-
rcial chemical product (S261.33).

002308

	YES	NO	DON'T KNOW
a. If "YES", what are the approximate quantities?			
b. If "YES", have precautions been taken to prevent accidential ignition or reaction of ignitable or reactive waste?		✓	
c. If "YES", explain:			
d. In your opinion, are proper precautions taken so that these wastes do not:			
- generate extreme heat or pressure, fire or explosion, or violent reaction?		✓	
- produce uncontrolled toxic mists, fumes, dusts, or gases in sufficient quantities to threaten human health?	✓		
- produce uncontrolled flammable fumes or gases in sufficient quantities to pose a risk or fire or explosions?	✓		
- damage the structural integrity of the device or facility containing the waste?			
- threaten human health or the environment?		✓	

Please explain your answers, and comment if necessary.

e. Are there any additional precautions which you would recommend to improve hazardous waste handling procedures at the facility? They must segregate the wastes

002309

7) Does the facility comply with preparedness and prevention requirements including maintaining: (S265.32)

- an internal communications or alarm system?	✓		
- a telephone or other device to summon emergency assistance from local authorities?	✓		
- portable fire equipment?			

The sump (before processed) is discharged to holding tanks that are placed in a dike. This dike have an alarm system that indicates when had occured a spill.

	YES	NO	DON'T KNOW
Adequate aisle space?	✓		

In your opinion, do the types of wastes on-site require all of the above procedures, or are some not needed? Explain

In your opinion, do the types of wastes on site require all of the above procedures, or are some not needed? Explain

	YES	NO	DON'T KNOW
8) Have you inspected to verify that the groundwater monitoring wells (if any) mentioned in the facility's groundwater monitoring plan (see no. 19 below) are properly installed?		N/A	

If you have, please comment as appropriate.

	YES	NO	DON'T KNOW
9) a. Is there any reason to believe that groundwater contamination already exists from this facility? If "YES", explain.		N/A	
b. Do you believe that operation of this facility may affect groundwater quality?		✓	

c. If "YES", explain.

002310

RECORDS INSPECTION

	YES	NO	DON'T KNOW
10) Has the facility received hazardous waste from an off-site source since Nov. 19, 1980 (effective date of the regulations)?		✓	
a. If "YES", does it appear that the facility has a copy of a manifest for each hazardous waste load received?		N/A	

	YES	NO	DON'T KNOW
b. ~~How many post-November 19 manifests does it have? (If the number is large, you may estimate).~~			
c. Does each manifest (or a representative sample) have the following information?:			
- a manifest document number	___	___	___
- the generator's name, mailing address, telephone number, and EPA identification number	___	___	___
- the name, and EPA identification number of each transporter	___	___	___
- the name, address and EPA identification number of the designated facility and an alternate facility, if any:	___	N/A	___
- a DOT description of the wastes	___	___	___
- the total quantity of each hazardous waste by units of weight or volume, and the type and number of containers as loaded into or onto the transport vehicle	___	___	___
- a certification that the materials are properly classified, described, packaged, marked, and labeled, and are in proper condition for transportation under regulations of the Department of Transportation and the EPA.	___	___	___
d. Are there any [illegible]cations that unmanifested hazardous [illegible] have been received since Novembe[illegible], 1980? If "YES", explain.	___	___	___
11) Does the facility [illegible] a written waste analysis plan specifying [illegible] methods, sampling methods and sampling freq[illegible] (§265.13)	✓	___	___

a. Does the character of wastes handled at the facility change from day to day, week to week, etc., thus requiring frequent testing? (You may check more than one)
Waste characteristics vary _____
All wastes are basically the same ✓
Company treats all waste as hazardous _____
Don't know _____

b. Does hazardous waste come to this facility from off-site sources? ___ ___ ___

c. If waste comes from an off-site source, are there procedures in the plan to insure that wastes received conform to the accompanying manifest? ___ ___ ___

12) INSPECTIONS (S 265. 15)

a. Does the facility have a written inspection schedule? ✓ ___ ___

b. Does the schedule identify the types of problems to be looked for and the frequency for inspections? ✓ ___ ___

c. Does the owner/operator record inspections in a log? ✓ ___ ___

d. Is there evidence that problems reported in the inspection log have not been remedied? ___ ✓ ___
If "YES", please explain.

The inspection records have the corrections performed on every occasion or emergency

13) PERSONNEL TRAINING (S 265.16)

a. Is there written documentation of the following:

002312

- job title for each position at the facility related to hazardous waste management and the name of the employee filling each job? ✓ ___ ___

- type and amount of training to be given to personnel in jobs related to hazardous waste management? ✓ ___ ___

	YES	NO	DON'T KNOW
actual training or experience received by personnel?	✓		
14) Does the facility have a written contingency plan for emergency procedures designed to deal with fires, explosion or any unplanned release of hazardous waste? (S265.51)	✓		
a. Does the plan describe arrangements made with local authorities?	✓		
b. Has the contingency plan been submitted to local authorities?		✓	
How do you know?			
c. Does the plan list names, addresses, and phone numbers of Emergency Coordinators?	✓		
d. Does the plan have a list of what emergency equipment is available?	✓	xx	
e. Is there a provision for evacuating facility personnel?	✓		
f. Was an Emergency Coordinator present or on call at the time of the inspection?	✓		
15) Does the owner/operator keep a written operating record with: (S265.73)			
- a description of wastes received with methods and dates of treatment, storage or disposal?		N/A	
- location an quantity of each waste?		✓	
- detailed records and results of waste analysis and treatability tests performed on wastes coming into the facility?		N/A	
- detailed operating summary reports and description of all emergency incidents that required the implementation of the facility contingency plan?	✓		

	YES	NO	DON'T KNOW
16) Does the facility have written closure and post-closure plans? (S 265.110)	✓		
a. Does the written closure plan include:			
- a description of how and when the facility will be partially (if applicable) and ultimately closed?		✓	
- an estimate of the maximun inventory of wastes in storage or treatment at any time during the life of the facility?	✓		
- a description of the steps necessary to decontaminate facility equipment during closure?	✓		
- a schedule for final closure including the anticipated date when wastes will no longer be received and when final closure will be completed?		✓	
b. What is the anticipated date for final closure?	They don't know when they will close the industry		
c. Does the owner/operator have a written post-closure plan identifying the activities which will be carried on after closure and the frequency of these activities?		N/A	
d. Does the written post-closure plan include:		N/A	
- a description of planned groundwater monitoring activities and their frenquencies during post-closure?			
- a description of planned maintenance activities and frequencies to ensure integrity of final cover during post-closure?		N/A	
- the name, address and phone number of a person or office to contact during post-closure?			
17) Does the owner/operator have a written estimate of the cost of closing the facility? (265.142) What is it?			
18) Does the owner/operator have a written estimate of the cost for post-closure monitoring and maintenance? What is it (S265.144)		N/A	

	YES	NO	DON'T KNOW
19) Has a groundwater monitoring plan been submitted to the Regional Administrator for facilities containing a surface impoundment, landfill or land treatment process? (This requirement does not apply to recycling facilities). (§265.90)			N/A
a. Does the plan indicate that at least one monitoring well has been installed hydraulically upgradient from the limit of the waste management area?			
b. Does the plan indicate that there are at least three monitoring wells installed hydraulically downgradient at the limit of the waste management area?			

SITE-SPECIFIC

Please circle all appropriate activities and answer questions on indicated pages for all activities circled. When you submit your report, include only those site-specific pages that you have used.

STORAGE	TREATMENT	DISPOSAL
Waste Pile p. 9	Tank p. 8	Landfill pp. 10-11
Surface Impoundment p. 8	Surface Impoundment pp. 8-9	Land Treatment pp. 9, 10
Container p. 7	Incineration pp. 12-13	Surface Impoundment p. 8
Tank, above ground p. 8	Thermal Treatment pp. 12-13	Other _____
Tank, below ground p. 8	Land Treatment pp. 9-10	
Other _____	Chemical, Physical p. 13 and Biological Treatment (other than in tanks, surface impoundment or land treatment facilities)	
	Other _____	

002315

YES NO

CONTAINERS (S265.171)

1) Are there any leaking containers? ___ ✓ ___
If "YES", explain.

2) Are there any containers which appear in danger of leaking? ✓ ___ ___
If "YES", explain.

3) Do wastes appear compatible with container materials? ✓ ___ ___

4) Are all containers closed except those in use? ✓ ___ ___

5) Do containers appear to be opened, handled or stored in a manner which may rupture the containers or cause them to leak? ___ ✓ ___

6) How often does the plant manager claim to inspect container storage areas?
They performed an inspection of the container storage area and treatment area weekly.

7) Does it appear that incompatible wastes are being stored in close proximity to one another? ✓ ___ ___
If "YES", explain.
There were not segregated.

8) Are containers holding ignitable or reactive wastes located at least 15 meters (50 feet) from the facility's property line? ✓ ___ ___

9) What is the approximate number and size of containers with hazardous wastes? Approx. more than 40 drums. (cap 55 gal. each drum).

TANKS (S265.190)

1) Are there any leaking tanks? ___ ___ ___
If "YES", explain

2) Are there any tanks which appear in danger of leaking?
If "YES", explain.

3) Are wastes or treatment reagents being placed in tanks which could cause them to rupture, leak, corrode or otherwise fail? ___ ___ ___
If "YES", explain.

4) Do uncovered tanks have at least 2 feet of freeboard or an adequate containment structure? ___ ___ ___

5) Where hazardous waste in continously fed in a tank, is the tank equipped with a means to stop this inflow? ___ ___ ___

6) Does it appear that incompatible wastes are being stored in close proximity to one another, or in the same tank? ___ ___ ___
If "YES", explain.

7) How often does the plant manager claim to inspect container storage areas?

8) Are ignitable or reactive wastes stored in a manner which protects them from a source of ignition or reaction? ___ ___ ___
If "YES", explain.

9) What is the approximate number and size of tanks containing hazardous wastes?

SURFACE IMPOUNDMENTS (S265.220)

1) Is there at least 2 feet of freeboard in the impoundment? ___ ___ ___

2) Do all earthen dikes have a protective cover to preserve their structural integrity? If "YES", specify type of covering.

3) Is there reason to belive that incompatible wastes are being placed in the same surface impoundment? If "YES", explain.

4) Are ignitable or reactive wastes being placed in surface impoundments without being treated to remove these characteristics? If "YES", explain.

5) Are there any leaks, failures or is there any deteriorization in the impoundments? If "YES", explain.

6) Give the approximate size of surface impoundments (gallons or cubic feet).

WASTE PILES (S265.250)

1) Is the waste pile protected from wind erosion?

a. Does it appear to need such protection?

b. Explain what type of protection exists.

2) Does it appear that incompatible wastes are being stored in the same waste pile? If "YES", explain.

	YES	NO	DON'T KNOW
3) Is leachate run-off from a pile a hazardous waste? If "YES", explain this determination and answer (a) and (b) below.	___	___	___
a. Is the pile placed on a impermeable base that is compatible with the waste?	___	___	___
b. Is the pile protected from precipitation and run-on?	___	___	___
4) In your judgment, are ignitable or reactive wastes managed in such a way that they are protected from any material or conditions which may cause them to ignite? Please explain or indicate if no such wastes are present.	___	___	___
Are they placed on an existing pile so that they no longer meet the definition of ignitable or reactive waste? Please explain.	___	___	___
5) How many waste piles are on site, and approximately how large are they?			

LAND TREATMENT (§ 265.270)

1) Can the facility operator demonstrate that the hazardous waste has been made less or non-hazardous by biological degradation or chemical reactions occuring in or on the soils? Please explain.	___	___	___
2) Is run-on diverted away from the active portions of the land treatment facility?	___	___	___
3) Is run-off collected?	___	___	___

RCRA GENERATOR INSPECTION FORM

COMPANY NAME:
General Electric Controls

EPA I.D. NUMBER:
PRT000041053

COMPANY POSTAL ADDRESS:
P.O Box 328
Vega Alta, PR

INSPECTOR'S NAME/ ORGANIZATION:
Anita Burgos Archilla

COMPANY LOCAL ADDRESS:
Carr No. 2

BRANCH/ORGANIZATION:
Land Pollution Control Program

COMPANY CONTACT OR OFFICIAL/ TITLE:
Mr. Rafael Martinez
Process Specialist

DATE OF INSPECTION:
August 11, 1981

☑ CHECK IF FACILITY IS ALSO A TSD FACILITY.

☐ CHECK IF FACILITY IS ALSO TRANSPORTER.

	YES	NO	DON'T KNOW
(1) Is there a reason to believe that the facility has hazardous waste on site?	✓		

a. If yes, what leads you to believe it is hazardous waste: Check appropriate box:

☐ Company admits that its waste is hazardous during the inspection.

☑ Company admits the waste is hazardous in its RCRA notification and/or Part B Permit Application.

☑ The waste material is listed in the regulations as a hazardous waste from a nonspecific source (S 261.31)

002320

	YES	NO	DON'T KNOW
☐ The waste material is listed in the regulations as a hazardous waste from a specific source (S 261.32)			
☐ The material or product is listed in the regulations as a discarded commercial chemical product (S 261.33)			
☑ EPA testing has shown characteristics of ignitability, corrosivity, reactivity or extraction procedure toxicity, or has revealed hazardous constituents (please attach analysis report)			
☐ Company is unsure but there is reason to believe that waste materials are hazardous. (Explain)			
b. Is there reason to believe that there are hazardous wastes on-site which the company claims are merely products or raw materials?	___	✓	___

Please explain:

	YES	NO	DON'T KNOW
c. Identify the hazardous wastes that are on-site, and estimate approximate quantities of each. At the time of the inspection there were aproximately 90 drums (55 gallon) containing sludge and solvents.			
d. Describe the activities that result in the generation of hazardous waste.			
(2) Is hazardous waste stored on site?	✓		
a. What is the longest period that it has been accumulated? More than 90 days. The waste that is on-site had been storage since November 1980.			
b. Is the date when drums were placed in storage marked on each drum?	✓		
(3) Has hazardous waste been shipped from this facility since November 19, 1980?			
a. If "yes", approximately how many shipments were made? The only waste that has been shipped is oil for recovery.			

002322

	YES	NO	DON'T KNOW
(4) Approximately how many hazardous waste shipments off site have been made since November 19, 1980?			
a. Does it appear from the available information that there is a manifest copy available for each hazardous waste shipment that has been made?	✓		
b. If "no" or "don't know", please elaborate.			
c. Does each manifest (or a representative sample) have the following information?			
- a manifest document number	✓		
- the generator's name, mailing address, telephone number and EPA identification number.	✓		
- the name, and EPA identification number of each transporter.	✓		
- the name, address and EPA identification number of the designated facility and an alternate facility, if any:	✓		
- a description of the wastes (DOT)	✓		
- the total quantity of each hazardous waste by units of weight or volume, and the type and number of containers as loaded into or onto the transport vehicle.	✓		

	YES	NO	DON'T KNOW
- a certification that the materials are properly classified, describe, packaged, marked and labeled, and are in proper condition for transportation under regulations of the Department of Transportation and the EPA.	___	___	___
(5) Were there any hazardous wastes stored on site at the time of the inspection?	✓	___	___
a. If "yes" do they appear properly packaged (if in containers) or, if in tanks, are the tanks secure? → 55 gallon drums	✓	___	___
b. If not properly packaged or in secure tanks, please explain.			
c. Are containers clearly marked and labelled?	✓	___	___
d. Do any containers appear to be leaking?	___	✓	___
e. If "yes", approximately how many? → Only one is corroded. They will change the waste to [illegible]			
* (6) Has the generator submitted and annual report to EPA covering the previous calendar year?	___	✓	___
a. How do you [illegible]			

002324

	YES	NO	DON'T KNOW
(7) Has the generator received signed copies (from the TSD facility) of all manifests for wastes shipped off site more than 35 days ago?	___	___	✓
a. If "no", have Exception Reports been submitted to EPA covering these shipments?	___	___	___

(8) General comments.

* The effective date for this requirement is March 1, 1982.

CARIBTC LABORATORIES, Inc.
P.O. BOX 3242
SAN JUAN, PUERTO RICO 00936

COLLECTED BY: [illegible]
DATE: [illegible]

		Wastewater Treatment Sludge		
G.E. Control, Inc.		15145		
Arsenic,	mg/l	0.0669	E.P. Toxicity	
Barium,	mg/l	<0.1	"	"
Cadmium,	mg/l	1.17	"	"
Lead,	mg/l	<0.1	"	"
Mercury,	mg/l	5.0×10^{-4}	"	"
Selenium,	mg/l	0.0396	"	"
Silver,	mg/l	<0.01	"	"
Chromium,	mg/l	0.83	"	"
Iron,	mg/l	2950	Total Metals	
Chromium Total,	mg/l	83.5	"	"
Copper,	mg/l	46.8	"	"
Nickel,	mg/l	29.3	"	"
Zinc,	mg/l	71.3	"	"
Tin,	mg/l	1857.5	"	"
Silver,	mg/l	5.0	"	"

RITA E. KOETT
QUIMICO
LIC. 2084
PUERTO RICO

002326

Rita E. Koett

DATE REPORTED: 8/10/81

Caribtec Laboratories, Inc.
g.p.o. box 2242
san juan, puerto rico 00936
tels. 754-7622 - 754-7566
telex - 385-9397

REPORT OF NPDES SAMPLING

SOURCE 15080 G.E. Controls Effluent

START: Date _____ Time _____ Flow _____ By _____

FINISH: Date _____ Time _____ Flow _____ By _____

GRAB: Date 7/21/81 Time 10:30 AM Flow _____ By CTient

PARAMETERS	RESULTS	DATE OF ANALYSIS	REMARKS
Cyanide Total, mg/l	0.08	7/23/81	
Total Suspended Solids, mg/l	3	7/23/81	
Silver, mg/l	< 0.01	7/23/81	
Copper, mg/l	0.13	7/23/81	
Nickel, mg/l	< 0.01	7/23/81	
Zinc, mg/l	< 0.01	7/23/81	
Tin, mg/l	< 0.1	7/23/81	
Chromium Total, mg/l	< 0.01	7/23/81	
Chromium Hexavalent, mg/l	< 0.01	7/23/81	

SAMUEL BARRERA, M.
LICENCIA
QUIMICO
1742
COLEGIO QUIMICOS DE P.R.

002327

DATE REPORTED 7/30/81 BY [signature]

ALL ANALYSES ARE PERFOMED USING STANDARD METHODS OR OTHER E.P.A. APPROVED METHODS

(SEE OVER)

CORRECTED

CARIBTEC LABORATORIES, Inc.
[illegible]
SAN JUAN, PUERTO RICO 00936

WATER ANALYSIS REPORT

SAMPLED BY: CLIENT
DATE RECD: 2/10/81

SOURCE: #14203 GENERAL ELECTRIC CONTROL	Cyanide Sample C	Alkaline D	Acid Dump F			
Alkalinity mg/l						
Aluminum, mg/l						
Arsenic, mg/l						
Barium, mg/l						
Cadmium, mg/l						
Calcium, mg/l						
Chloride, mg/l						
Chromium, Total mg/l						
Color, Pt -Co units						
Conductivity, mmhos						
Copper, mg/l						
Cynanide, mg/l						
Fluoride, mg/l						
Hardness, mg/l						
Iron, mg/l						
Lead, mg/l						
MBAS, mg/l						
Magnesium, mg/l						
Manganese, mg/l						
Mercury, Ug/l						
Nickel, mg/l						
Nitrate, mg/l						
Nitrite, mg/l						
pH						
Phosphorous, Total mg/l						
Potassium, mg/l						
Selenium, mg/l	0.002	0.004	0.02			
Silica, mg/l						
Silver, mg/l						
Sodium, mg/l						
Solids, Dissolved mg/l						
Solids, Suspended mg/l						
Solids, Total mg/l						
Sulfate, mg/l						
T.O.C., mg/l						
Turbidity, J.U.						
Zinc, mg/l						
Coliform Total No/100ml						
Coliform Fecal No/100ml						

002329

SAMUEL BARRERA, M.
LICENCIA
QUIMICO
1742
COLEGIO QUIMICOS DE P.R.

DATE REPORTED: 3/5/81

BY: [signature]

[illegible] LABORATORIES, INC.

WATER ANALYSIS REPORT

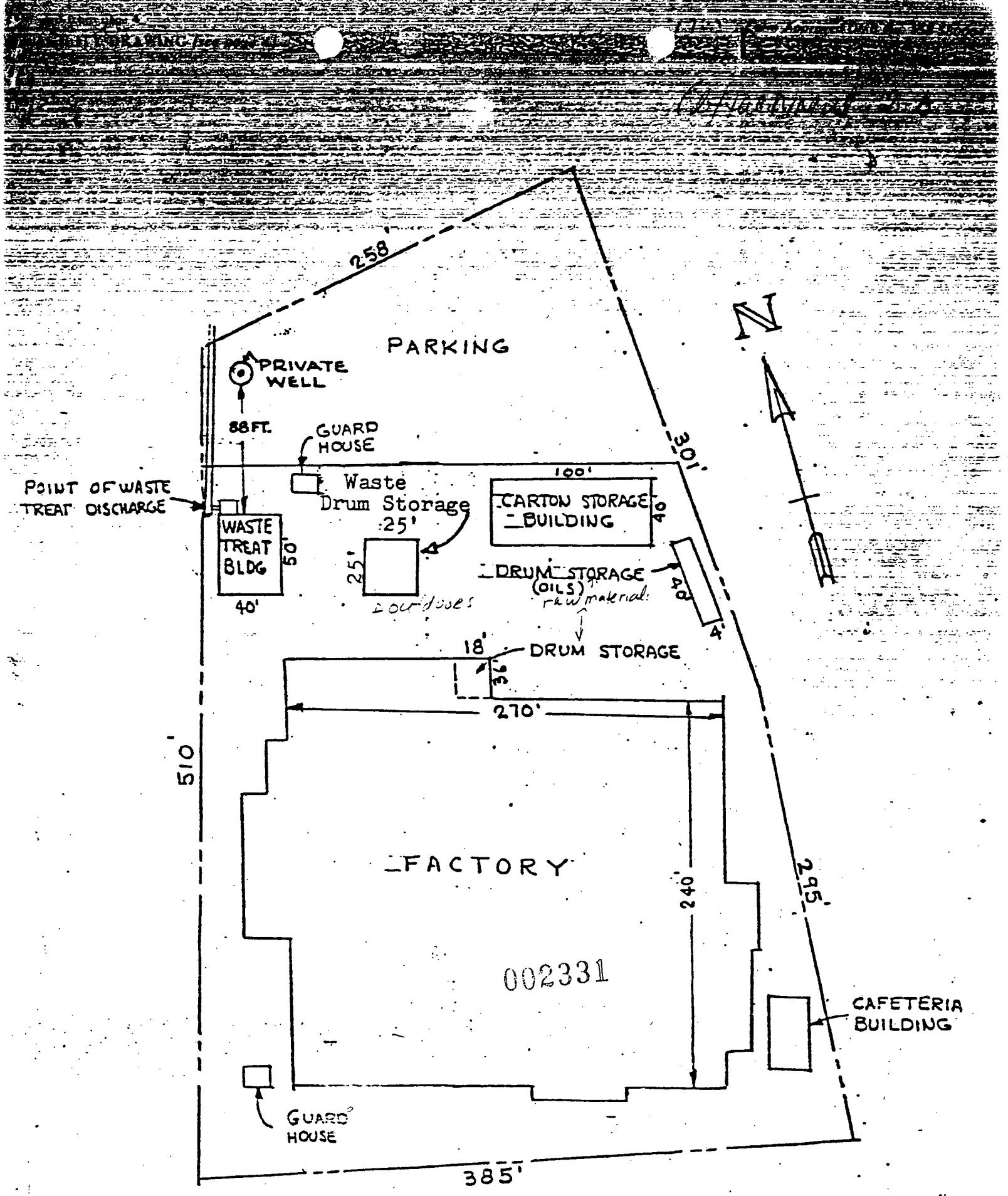
DATE RECD: 2/20/81

SOURCE: General Electric Control Rinse	Phosphate Dump A	Chrome Dump B	Cyanide Sample C	Alkaline D	Chrome Rinse E	Acid Dump F
Alkalinity, mg/l						
Aluminum, mg/l						
Arsenic, mg/l	0.020	0.020	0.013	0.046	0.013	0.066
Barium, mg/l	<0.1	*	<0.1	<0.1	<0.1	0.5
Cadmium, mg/l	0.05	0.63	0.36	0.01	<0.01	0.78
Calcium, mg/l						
Chloride, mg/l						
Chromium, Total mg/l	<0.01	42400	1.84	10.75	107.50	3.50
Color, Pt-Co units						
Conductivity, mmhos						
Copper, mg/l						
Cynanide, mg/l	4.70	0.05	60.00	3.30	0.50	3.00
Fluoride, mg/l						
Hardness, mg/l						
Iron, mg/l						
Lead, mg/l	0.19	0.23	<0.01	0.54	<0.01	7.18
MBAS, mg/l						
Magnesium, mg/l						
Manganese, mg/l						
Mercury, Ug/l	$<1.0\times10^{-4}$	3.0×10^{-4}	8.0×10^{-4}	4.0×10^{-4}	3.3×10^{-3}	3.0×10^{-4}
Nickel, mg/l						
Nitrate, mg/l						
Nitrite, mg/l						
pH	2.78	1.26	9.20	12.24	6.64	1.09
Phosphorous, Total mg/l						
Potassium, mg/l	NOTE SEE CORRECTION OF 3/5/81					
Selenium, mg/l	<0.01	<0.01	0.186	6.50	<0.01	2.15
Silica, mg/l						
Silver, mg/l	<0.01	0.97	117.5	0.14	<0.01	0.76
Sodium, mg/l						
Solids, Dissolved mg/l						
Solids, Suspended mg/l						
Solids, Total mg/l						
Sulfate, mg/l						
T.O.C., mg/l						
Turbidity, J.U.						
Zinc, mg/l						
Sulfide, mg/l	3.8	1.7×10^{6}	0.6	1.8×10^{6}	11.2	1.3×10^{3}
** Flash Point, °C	N/A	N/A	N/A	N/A	N/A	N/A
Coliform Total No/100ml						
Coliform Fecal No/100ml						

002330

SAMUEL BARRERA M. LICENCIA QUIMICO 1742 COLEGIO DE QUIMICOS

DATE REPORTED: 2/23/81 BY: [signature]



GENERAL ELECTRIC CONTROLS PLANT

VEGA ALTA, PUERTO RICO

LOGITUDE - 66° 19' 25"

LATITUDE - 18° 25' [illegible]"

002332

EPA

ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act *(RCRA)*. Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER → PRD090031410

GENERAL ELECTRIC CONTROLS INC
PO BOX 328
VEGA ALTA PR 00762

INSTALLATION ADDRESS → STATE HIGHWAY NO 2 KM 30.1
VEGA ALTA PR 00762

EPA Form 8700-12B (4-80) 11/07/80

PRD090031410

Please print or type with ELITE type (12 characters per inch).

GSA No. 12345-XX
Form Approved OMB No. 158-R00XX

EPA U.S. ENVIRONMENTAL PROTECTION AGENCY
HAZARDOUS WASTE REPORT

PLEASE PLACE LABEL IN THIS SPACE

I. TYPE OF HAZARDOUS WASTE REPORT

PART A: GENERATOR ANNUAL REPORT
THIS REPORT IS FOR THE YEAR ENDING DEC. 31, 1981

PART B: FACILITY ANNUAL REPORT
THIS REPORT FOR YEAR ENDING DEC. 31, 1981

PART C: UNMANIFESTED WASTE REPORT
THIS REPORT IS FOR A WASTE RECEIVED (day, mo., & yr.) - - 19

INSTRUCTIONS: You may have received a preprinted label attached to the front of this pamphlet; affix it in the designated space above—left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Sections II, III, and IV below blank. If you did not receive a preprinted label, complete all sections. "Installation" means a single site where hazardous waste is generated, treated, stored, or disposed of. Please refer to the specific instructions for generators or facilities before completing this form. The information requested herein is required by law (Section 3002/3004 of the Resource Conservation and Recovery Act).

II. INSTALLATION'S EPA I.D. NUMBER
F PRD090031410 1

III. NAME OF INSTALLATION
GENERAL ELECTRIC CONTROLS INC

IV. INSTALLATION MAILING ADDRESS
STREET OR P.O. BOX
3 P O BOX 328

CITY OR TOWN | ST. | ZIP CODE
4 VEGA ALTA | PR | 00762

V. LOCATION OF INSTALLATION
STREET OR ROUTE NUMBER
5 ROAD 2 KM 30.2

CITY OR TOWN | ST. | ZIP CODE
6 VEGA ALTA | PR | 00762

VI. INSTALLATION CONTACT
NAME (last and first) | PHONE NO. (area code & no.)
2 RIVERA GILBERTO | 809-883-3000

VII. TRANSPORTATION SERVICES USED (for Part A reports only)
List the EPA Identification Numbers for those transporters whose services were used during the reporting year represented by this report.

PRD091018622

002333

VIII. COST ESTIMATES FOR FACILITIES (for Part B reports only)

A. COST ESTIMATE FOR FACILITY CLOSURE
G $ 0000

B. COST ESTIMATE FOR POST CLOSURE MONITORING AND MAINTENANCE (disposal facilities only)
$

IX. 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.

GILBERTO RIVERA
A. PRINT OR TYPE NAME

B. SIGNATURE

3/17/82
C. DATE SIGNED

EPA Form 8700-13 (6-80)

002334

Please print or type with ELITE type (12 characters/inch).

GSA No. 12345-XX
Form Approved OMB No. 158-R00XX

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY
GENERATOR ANNUAL REPORT – PART A
(Collected under the authority of Section 3002 of RCRA.)

FOR OFFICIAL USE ONLY (Items I and II)

I. DATE RECEIVED: – – 19

II. TYPE OF REPORT:

X. GENERATOR'S EPA I.D. NO.: GPRD090031410 1

XI. FACILITY'S EPA I.D. NO.: PRD091018622

XII. FACILITY NAME (specify): SERVICIOS CARBAREON, INC.

XIII. FACILITY ADDRESS (street or P.O. box, city, state, & zip code):
ROAD 385 KM 3.5 BO. TALLABOA
PEÑUELAS, PUERTO RICO 00724

XIV. WASTE IDENTIFICATION

LINE NUMBER	A. DESCRIPTION OF WASTE	B. DOT HAZARD CLASS	C. EPA HAZARDOUS WASTE NUMBER (see instructions)	D. AMOUNT OF WASTE	UNIT OF MEASURE (enter code)
1	SPENT HALOGENATED SOLVENTS	01	F002	8532	P
2	PAINT WASTE	08		440	P
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

XV. COMMENTS (enter information by line number — see instructions)

002335

EPA Form 8700-13A (5-80)

BILLING CODE 6560-01-C

Please print or type with ELITE type (12 characters/inch).

GSA No. 12345-XX
Form Approved OMB No. 158-R00XX

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY
FACILITY REPORT – PARTS B & C
(Collected under the authority of Section 3004 of RCRA.)

FOR OFFICIAL USE ONLY (Items 1 & 2)
1. DATE RECEIVED: 1 9
2. RECEIVED BY

XVI. TYPE OF REPORT (enter an "X"): ☒ PART B ☐ PART C

XVII. FACILITY'S EPA I.D. NO.: CPRD090031410 1

XVIII. GENERATOR'S EPA I.D. NO.:

XIX. GENERATOR NAME (specify): "ON - SITE"

XX. GENERATOR ADDRESS (street or P.O. box, city, state, & zip code):

XXI. WASTE IDENTIFICATION

LINE NUMBER	A. DESCRIPTION OF WASTE	B. EPA HAZARDOUS WASTE NUMBER (see instructions)	C. HANDLING METHOD (enter code)	D. AMOUNT OF WASTE	UNIT OF MEASURE (enter code)
1	WASTE WATER TREATMENT SLUDGE	F006	S01	15	T
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

XXII. COMMENTS (enter information by line number – see instructions)

002336

EPA Form 8700-13B (6-80)
BILLING CODE 6560-01-C

Please print or type with ELITE type *(12 characters/inch)* in the unshaded areas only.

Form Approved OMB No. 158-S79018
GSA No. 0246-EPA-OT

EPA — NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTALLATION EPA I.D. NO.

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law *(Section 3010 of the Resource Conservation and Recovery Act).*

I. NAME OF INSTALLATION

II. INSTALLATION MAILING ADDRESS

III. LOCATION OF INSTALLATION

E.P.A. REGION II
INFORMATION SERVICE CENTER
26 FEDERAL PLAZA
N.Y., N.Y. 100017

DETACH

FOR OFFICIAL USE ONLY

COMMENTS

C

INSTALLATION'S EPA I.D. NUMBER | APPROVED | DATE RECEIVED (yr., mo., & day)

F

I. NAME OF INSTALLATION

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

3

CITY OR TOWN | ST. | ZIP CODE

4

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

5

CITY OR TOWN | ST. | ZIP CODE

6

IV. INSTALLATION CONTACT

NAME AND TITLE *(last, first, & job title)* | PHONE NO. *(area code & no.)*

2 MARTINEZ RAFAEL A PROCESS SPEC 809-883-3000

V. OWNERSHIP

NAME OF INSTALLATION'S LEGAL OWNER

8 GENERAL ELECTRIC CO.

DETACH

A. TYPE OF OWNERSHIP *(enter the appropriate letter into box)*

F = FEDERAL
M = NON-FEDERAL

M

B. TYPE OF HAZARDOUS WASTE ACTIVITY *(enter "X" in the appropriate box(es))*

☒ A. GENERATION
☒ B. TRANSPORTATION *(complete Item VII)*
☒ C. TREAT/STORE/DISPOSE
☐ D. UNDERGROUND INJECTION

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VII. MODE OF TRANSPORTATION *(transporters only — enter "X" in the appropriate box(es))*

☐ A. AIR ☐ B. RAIL ☐ C. HIGHWAY ☐ D. WATER ☐ E. OTHER *(specify)*:

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA I.D. Number in the space provided below.

☐ A. FIRST NOTIFICATION ☒ B. SUBSEQUENT NOTIFICATION *(complete Item C)*

C. INSTALLATION'S EPA I.D. NO. 0 R 7 0 0 0 0 4 1 0 5 3

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

EPA Form 8700-12 (6-80)

CONTINUE ON REVERSE

DATE RETURNED

ACKNOWLEDGEMENT

INTERNAL CHECKLIST ID # PRD070031970

Complete

1. Interim Regulatory Requirements

A. (1) FORM 1 MISSING ☐

(2) FORM 3 MISSING ☐

B. POSTMARK after NOVEMBER 19, 1980 ☐ Valid ☐

C. (1) DATE of OPERATION MISSING ☐

(2) DATE of OPERATION after NOVEMBER 19, 1980 ☐

D. (1) NON-NOTIFIER ☐
(2) NOTIFIED after AUGUST 18, 1980 ☐ Valid ☐

E. (1) FORM 1, XIII B SIGNATURE MISSING ☐

(2) FORM 3, IX B SIGNATURE MISSING ☐

2. A. HANDLER ☐

B. NONREGULATED ☐

C. UNSURE ☐

D. UNKNOWN FACILITY ☐
(missing name and address on Form 3)

E. NEW FACILITY > NOV. 19, 1980 ☐

F. CORE ITEM(S) MISSING ☐

G. NON-CORE ITEM(S) MISSING ☐

H. OTHER ☐

002338

MISSING

MAP ☐

DRAWING ☐

PHOTO ☐

OK

002339

EPA

ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act *(RCRA)*. Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER ➤ PRD0900[illegible]

General Electric Controls
PO Box 328
Vega Alta, Puerto Rico 00762

ATTN R. MARTINEZ

INSTALLATION ADDRESS ➤ transp added

St. HGWY NO 2 KM 30 1
Vega Alta PR 00762

EPA Form 8700-12B (4-80)

Sent 5/18/87

Please print or type with ELITE type (12 characters/inch) in the unshaded areas only.

Form Approved OMB No. 158-S79016
GSA No. 0246-EPA-OT

EPA — U.S. ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTALLATION EPA I.D. NO.	
I. NAME OF INSTALLATION	
II. INSTALLATION MAILING ADDRESS	PLEASE PLACE LABEL IN THIS SPACE
III. LOCATION OF INSTALLATION	

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law *(Section 3010 of the Resource Conservation and Recovery Act).*

DETACH

FOR OFFICIAL USE ONLY

COMMENTS: C

INSTALLATION'S EPA I.D. NUMBER	APPROVED	DATE RECEIVED (yr., mo., & day)
F PRD 090 031 1		800811

I. NAME OF INSTALLATION

GENERAL ELECTRIC CONTROLS INC

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX	CITY OR TOWN	ST.	ZIP CODE
3 PO BOX 328	4 VEGA ALTA	PR	00762

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER	CITY OR TOWN	ST.	ZIP CODE
5 STATE HIGHWAY NO 2 KM 30.1	6 VEGA ALTA	PR	00762

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)	PHONE NO. (area code & no.)
7 MARTINEZ RAFAEL METHODS SPEC	809-883-3000

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER: 8 GENERAL ELECTRIC CO

B. TYPE OF OWNERSHIP (enter the appropriate letter into the box): F = FEDERAL; M = NON-FEDERAL: F

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

- [X] A. GENERATION 002340
- [ ] B. TRANSPORTATION (complete item VII)
- [X] C. TREAT/STORE/DISPOSE
- [ ] D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only — enter "X" in the appropriate box(es))

- [ ] A. AIR
- [ ] B. RAIL
- [ ] C. HIGHWAY
- [ ] D. WATER
- [ ] E. OTHER (specify)

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA I.D. number in the space provided below.

- [X] A. FIRST NOTIFICATION
- [ ] B. SUBSEQUENT NOTIFICATION (complete item C)

C. INSTALLATION'S EPA I.D. NO.

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

3622	(specify) INDUSTRIAL CONTROLS		(specify)
	(specify)		(specify)

OPERATOR INFORMATION

A. NAME

GENERAL ELECTRIC CONTROLS INC

☐ YES ☒ NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box. If "Other", specify.)

F = FEDERAL M = PUBLIC (other than federal or state) S = STATE O = OTHER (specify) P = PRIVATE

P (specify)

D. PHONE (Area code & no.)

A 809 883 3000

E. STREET OR P.O. BOX

30.2 KM HIGHWAY 2

F. CITY OR TOWN

B VEGA ALTA

G. STATE PR

H. ZIP CODE 00761

IX. INDIAN LAND

Is the facility located on Indian lands? ☐ YES ☒ NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)

9 N PR0000566

D. PSD (Air Emissions from Proposed Sources)

9 P

B. UIC (Underground Injection of Fluids)

9 U

E. OTHER (specify)

9 PFE 78 007 2610 (specify) EQB Air Permit

C. RCRA (Hazardous Wastes)

9 R

E. OTHER (specify)

9 (specify)

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements. F9 : A/50

XII. NATURE OF BUSINESS (provide a brief description)

Manufacture of electrical controls such as motor starters and relays.

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XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the 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.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
[illegible]	[illegible]	

COMMENTS FOR OFFICIAL USE ONLY

C

Continued from the front.

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

The treatment facility receives the waste effluent from an electro plating operation. Treatment includes cyanide destruction, chrome reduction, ph adjustment, heavy metal precipitation, solids separation and solids centrufigation.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristic and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A, select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

NOTE: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the remaining right box of Item D; and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION — If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NON-HAZARDOUS WASTES REGULATED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number are to be listed as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of all the waste and the units of measure to treat, store, and/or dispose of the waste.
2. On the line immediately below, select another Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "000" in the right box of Item D.
3. Repeat step 2 for each additional Hazardous Waste Number that can be used to describe the hazardous waste.

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EXAMPLE: A facility will treat and dispose of an estimated 200 pounds per year of waste which can be described by EPA Hazardous Waste Numbers X-1, X-2, and X-3 below. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and the facility estimates an estimated 400 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be by incinerator and disposal will be in a landfill.

EXAMPLE	A. EPA HAZARDOUS WASTE NUMBER	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE	D. PROCESSES (1) PROCESS CODES (from 2)	D. PROCESSES (2) PROCESS DESCRIPTION (If a code is not entered in D(1))
X-1	0 1 3 4	200	P	T 0 3 D 8 0	
X-2	0 0 0 1	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

CONTINUE ON PAGE 3

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Continued from the front.

IV. DESCRIPTION OF HAZARDOUS WASTE (Continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. (enter from page 1)

F P R T 0 9 0 0 3 1 4 1 0 3 6

F6: A/55 F6: A/56

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more detail)*.

VI. PHOTOGRAPHS

All existing facilities must include photographs *(aerial or ground-level)* that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more detail)*.

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)	LONGITUDE (degrees, minutes, & seconds)
18 25 [illegible]	66 19 [illegible]

VIII. FACILITY OWNER

☐ A. If the facility owner is not the facility operator, [illegible] in Section VIII on Form 1, "General Information" [illegible] "X" in the box to the left and [illegible] Section IX below.

B. If the facility owner is not the facility operator [illegible] in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. (Area Code)
Puerto Rico Industrial Development Company	809 767 4747

3. STREET OR P.O. BOX	4. CITY OR TOWN		5. ZIP CODE
G.P.O. Box 2350	San Juan	P R	00936

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and [illegible] that based on my inquiry of [illegible] immediately responsible for [illegible] the information, I believe that the [illegible] is true, accurate, and [illegible] there are significant [illegible] including the possibility of fine and imprisonment.

ANGEL J. COLON
EXECUTIVE VICE PRESIDENT

002344

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information [illegible] documents, and that based on my inquiry of [illegible] responsible [illegible] submitted information is true, accurate, and [illegible] there are significant [illegible] information including the possibility of fine and imprisonment.

A. NAME (print or type) | B. SIGNATURE | C. DATE

[illegible]

Mr. Gilberto Rivera
General Electric Controls
P.O. Box 328
Vega Alta, Puerto Rico 00762

Re: General Electric Controls Facility
EPA ID No. PRD090031419

Dear Mr. Rivera:

The U.S. Environmental Protection Agency (EPA) is charged with responsibility for implementing the Solid Waste Disposal Act, as amended, 42 U.S.C. 6901 et seq. (the Act). (Note: Among the statutes amending the Act is the Resource Conservation and Recovery Act (RCRA), 90 Stat. 2795, P.L. 94-580 (1976)).

In accordance with RCRA Section 3005(e) and the Code of Federal Regulations (CFR) dated July 1, 1982, 40 CFR Section 122.22, EPA requested on October 1, 1982 that you, as the owner or operator of the above mentioned facility, submit the RCRA Part B Permit Application for your facility by April [illegible] 1983. This request was made on the basis that your facility is operating under Interim Status as defined by RCRA Section 3005(e) and 40 CFR Section 122.23.

If your facility has ceased conducting an activity which requires a RCRA permit, you should submit a letter to this Agency and the Environmental Quality Board (EQB) stating which activities the facility ceased conducting and the date they were ceased. In addition, you should submit the closure plan for your facility as required under 40 CFR Part 265 Subpart G. Upon receipt of your letter, and approval of the closure plan, EPA will begin the procedures for terminating interim status. Termination of your facility's interim status in no way affects the conduct of your activities which do not require a RCRA permit.

Please submit either the Part B permit Application or the Notice (including closure plan) indicating you have ceased conducting an activity which requires a RCRA permit by April 28, 1983 to the following:

Mr. Ernest A. Regna, Chief
Solid Waste Branch
U.S. EPA, Region II
26 Federal Plaza, Room 905

002345

Mr. Luis de la Cruz, Director
Solid, Toxic & Hazardous Waste Program
Environmental Quality Board
Santurce, Puerto Rico 00910-1488

Please include your EPA identification number on all correspondence. Should you have any questions or comments on this matter, please contact Mr. Tom H. Kay at (212) 264-4107.

Sincerely yours

Joel Golumbek
Chief
NJ/Caribbean Hazardous Waste Section
Solid Waste Branch

cc: Luis de la Cruz, EQB
Jim Firse, C.F.

bcc: Weems Clevenger, 2CA
Tom Taccone, 2PM-PA

002346

EPA

ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act *(RCRA)*. Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER → *PRD090193277

GENERAL ELECTRIC PILOT DEVICES INC
PO BOX 328
VEGA ALTA PR 00762

INSTALLATION ADDRESS → STATE HIGHWAY NO 2 KM 30.9
VEGA ALTA PR 00762

EPA Form 8700-12B (4-80) 11/07/80

002347

Please print or type with ELITE type (12 characters/inch) in the unshaded areas only.

Form Approved OMB No. 158-S79016
GSA No. 0246-EPA-OT

EPA

U. S. ENVIRONMENTAL PROTECTION AGENCY

NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTALLATION'S EPA I.D. NO.	
I. NAME OF INSTALLATION	
II. INSTALLATION MAILING ADDRESS	PLEASE PLACE LABEL IN THIS SPACE
III. LOCATION OF INSTALLATION	

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law *(Section 3010 of the Resource Conservation and Recovery Act).*

DETACH

FOR OFFICIAL USE ONLY

COMMENTS: C

INSTALLATION'S EPA I.D. NUMBER: F PRD090193277 T/A 2 C 1

APPROVED:

DATE RECEIVED (yr., mo., & day): 80 08 11

I. NAME OF INSTALLATION

GENERAL ELECTRIC PILOT DEVICES INC

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX: 3 PO BOX 328

CITY OR TOWN: 4 VEGA ALTA

ST.: PR

ZIP CODE: 00762

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER: 5 STATE HIGHWAY NO 2 KM 30.9

CITY OR TOWN: 6 VEGA ALTA

ST.: PR

ZIP CODE: 00762

IV. INSTALLATION CONTACT

NAME AND TITLE *(last, first, & job title)*: 2 MARTINEZ RAFAEL METHODS SPEC

PHONE NO. *(area code & no.)*: 809-883-3000

V. OWNERSHIP

DETACH

A. NAME OF INSTALLATION'S LEGAL OWNER: 8 GENERAL ELECTRIC CO

B. TYPE OF OWNERSHIP *(enter the appropriate letter into box)*

F = FEDERAL
M = NON-FEDERAL

M

VI. TYPE OF HAZARDOUS WASTE ACTIVITY *(enter "X" in the appropriate box(es))*

- [X] A. GENERATION
- [X] B. TRANSPORTATION *(complete item VII)*
- [ ] C. TREAT/STORE/DISPOSE
- [ ] D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION *(transporters only – enter "X" in the appropriate box(es))*

- [ ] A. AIR
- [ ] B. RAIL
- [ ] C. HIGHWAY
- [ ] D. WATER
- [ ] E. OTHER *(specify)*:

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

002348

- [X] A. FIRST NOTIFICATION
- [ ] B. SUBSEQUENT NOTIFICATION *(complete item C)*

C. INSTALLATION'S EPA I.D. NO.

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

EPA Form 8700-12 (6-80)

CONTINUE ON REVERSE

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

RCRA GENERATOR INSPECTION CHECKLIST

Generator's Name: Gew Electric Pilot Services

EPA I.D. #: PRD 090193011

Generator's Address: P.O Box 328
Vega Alta, PR

Contact: Mr. Carmelo Sanchez

	YES	NO
1. Does generator have an EPA I.D. number?	(✓)	( )
2. Does generator store material on-site?	(✓)	( )
3. Is waste accumulated for more than 90 days?	(✓)	( )
4. Does generator manifest waste?	( )	(✓)
5. Does manifest show following information:		
a. Name, address, I.D. of generator	( )	( )
b. Name, address, I.D. of transporter	( )	( )
c. Name, address, I.D. of designated facility	( )	( )
d. Name, of alternative facility	( )	( )
e. DOT waste description	( )	( )
f. Quantity of waste-volume, weight, number of containers	( )	( )
g. Signed certification statement	( )	( )
6. Does generator maintain manifest records?	( )	(✓)

7. General Comments:

002349

Inspected By: Aurora Burgos

Date: Feb. 4/81

Please print or type with ELITE type (12 characters per inch).

GSA No. 12345-XX
Form Approved OMB No. 158-R00XX

EPA U.S. ENVIRONMENTAL PROTECTION AGENCY
HAZARDOUS WASTE REPORT

PLEASE PLACE LABEL IN THIS SPACE

I. TYPE OF HAZARDOUS WASTE REPORT

PART A: GENERATOR ANNUAL REPORT
THIS REPORT IS FOR THE YEAR ENDING DEC. 31. 1981

PART B: FACILITY ANNUAL REPORT
THIS REPORT FOR YEAR ENDING DEC. 31. 19

PART C: UNMANIFESTED WASTE REPORT
THIS REPORT IS FOR A WASTE RECEIVED (day, mo., & yr.) – – 19

INSTRUCTIONS: You may have received a preprinted label attached to the front of this pamphlet; affix it in the designated space above—left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Sections II, III, and IV below blank. If you did not receive a preprinted label, complete all sections. "Installation" means a single site where hazardous waste is generated, treated, stored, or disposed of. Please refer to the specific instructions for generators or facilities before completing this form. The information requested herein is required by law (Section 3002/3004 of the Resource Conservation and Recovery Act).

II. INSTALLATION'S EPA I.D. NUMBER
PRD090193277 1

III. NAME OF INSTALLATION
GENERAL ELECTRIC PILOT DEVICES INC.

IV. INSTALLATION MAILING ADDRESS
STREET OR P.O. BOX: 3 P O BOX 328
CITY OR TOWN: 4 VEGA ALTA ST. PR ZIP CODE 00762

V. LOCATION OF INSTALLATION
STREET OR ROUTE NUMBER: 5 ROAD 2 KM 30.2
CITY OR TOWN: 6 VEGA ALTA ST. PR ZIP CODE 00762

VI. INSTALLATION CONTACT
NAME (last and first): 2 RIVERA GILBERTO
PHONE NO. (area code & no.): 809-883-3000

VII. TRANSPORTATION SERVICES USED (for Part A reports only)
List the EPA Identification Numbers for those transporters whose services were used during the reporting year represented by this report.

PRD091018622

VIII. COST ESTIMATES FOR FACILITIES (for Part B reports only)
A. COST ESTIMATE FOR FACILITY CLOSURE: G $ .000
B. COST ESTIMATE FOR POST CLOSURE MONITORING AND MAINTENANCE (disposal facilities only): $

IX. 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.

GILBERTO RIVERA
A. PRINT OR TYPE NAME

B. SIGNATURE

3/17/82
C. DATE SIGNED

EPA Form 8700-13 (5-80)

PAGE 1 OF 2

002350

Please print or type with ELITE type (12 characters/inch).

GSA No. 12345-XX
Form Approved OMB No. 158-R00XX

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY
GENERATOR ANNUAL REPORT — PART A
(Collected under the authority of Section 3002 of RCRA.)

FOR OFFICIAL USE ONLY (Items I and II)

I. DATE RECEIVED: – – 19

II. TYPE OF REPORT:

X. GENERATOR'S EPA I.D. NO.: GPRD091932771

XI. FACILITY'S EPA I.D. NO.: PRD091018622

XII. FACILITY NAME (specify): SERVICIOS CARBAREON, INC.

XIII. FACILITY ADDRESS (street or P.O. box, city, state, & zip code): ROAD #385 KM 3.5 BO. TALLABOA PEÑUELAS, PUERTO RICO 00724

XIV. WASTE IDENTIFICATION

LINE NUMBER	A. DESCRIPTION OF WASTE	B. DOT HAZARD CLASS	C. EPA HAZARDOUS WASTE NUMBER (see instructions)	D. AMOUNT OF WASTE	UNIT OF MEASURE (enter code)
1	PAINT WASTE	08		2800	P
2	SPENT HALOGENATED SOLVENT	01	F002	3656	P
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

XV. COMMENTS (enter information by line number — see instructions)

SECTION VIII

IN THE EVENT OF CLOSURE, SINCE HAZARDOUS MATERIALS ARE USUALLY SENT TO G. E. CONTROLS, INC. VEGA ALTA FOR CONSOLIDATION. ALL REMAINING MATERIAL WILL ALSO BE TRANSFERRED FOR STORAGE UNTIL FINAL DISPOSITION. TRANSPORTATION COST AND ANY OTHER COST, WHICH AT THIS TIME DO NOT SEEMS TO OCCUR, WILL BE ABSORBED BY G. E. CONTROLS, INC. P. O. BOX 328 VEGA ALTA, PUERTO RICO 00762.

EPA Form 8700-13A (5-80)

BILLING CODE 6560-01-C

HAZARDOUS WASTE MANIFEST

01
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Servicios Carbareon Inc.
NAME OF CARRIER (SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	PR00041053	General Electric Controls Inc Po Box 328 Vega alta P.R 00762	12/3/80
TRANSPORTER # 1	S/R 54/PRD091018622	Servicios Carbareon Inc, Firm Delivery Ponce Puerto Rico 00731	12/3/80
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	RP02 PRD000831487	Carbareon, Inc.	12/3/80
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
steel drums		F006	Wastewater treatment sludge from electroplating operation			—	Gallons	3960		
steel drums		F002	Spent solvent 111 (Hickorone Chane)	UN2831	None	N/A	"	440		

SPECIAL HANDLING INSTRUCTIONS

—

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

TOTAL CHARGES: $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

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 and the U.S. Environmental Protection Agency.

Rafael A Martinez 12/3/80
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

Hulda Vega 12-3-80
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (If required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

F Bartolomei 002352 12/3/80
TSDF SIGNATURE DATE

3

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TRANSPORTER #2

HAZARDOUS WASTE MANIFEST

01
MANIFEST DOCUMENT NUMBER

Servicios Carbareon Inc.
NAME OF CARRIER (SCAC)

SHIPPER NUMBER

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	PR000041053	General Electric Controls Inc. P.O. Box 328 Vega Alta P.R. 00762	12/3/80
TRANSPORTER # 1	S/R 54/PRD091018622	Servicios Carbareon Inc. Firm Delivery [illegible] 00731	12/3/80
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		[illegible]	[illegible]
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
2 Steel drums		F006	[illegible]	—		—	Gallons	390		
Steel drums		F002	[illegible]				"	400		

SPECIAL HANDLING INSTRUCTIONS

—

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.
$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
_____ (Signature of Consignor)

TOTAL CHARGES: $

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

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 and the U.S. Environmental Protection Agency.

[signature] 12/3/80
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

[signature] 12-3-80
TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (If required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

002353
TSDF SIGNATURE DATE

4

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HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NUMBER: 01

SHIPPER NUMBER:

NAME OF CARRIER: Service Container Inc. (SCAC)

CARRIER NUMBER:

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/ SHIPPER	[illegible]	[illegible]	[illegible]
TRANSPORTER # 1	[illegible]	[illegible]	[illegible]
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	[illegible]	Chemicon, Inc.	12/3/80
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
[illegible]		[illegible]	[illegible] spent solvent mixture (Non-Haz)	[illegible]	None	N/A				

SPECIAL HANDLING INSTRUCTIONS

—

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED Yes ☐ No ☐

REMIT C.O.D. TO: ADDRESS

COD Amt: $

C.O.D. FEE: PREPAID ☐ COLLECT ☐ $

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.

$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

_____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

_____ (Signature of Consignor)

TOTAL CHARGES: $

FREIGHT CHARGES

FREIGHT PREPAID except when box at right is checked ☐ Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

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 and the U.S. Environmental Protection Agency.

GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (If required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

002354

TSDF SIGNATURE

12/3/80 DATE

6

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MANIFIESTO SUSTANCIAS PELIGROSAS

7274

NUM. 007

SERVICIOS CARBAREON, INC. Carr. 385 KM. 3.5 Bo. Tallaboa Peñuelas, Puerto Rico 00724	Dirección Postal Firm Delivery Ponce, Puerto Rico 00731
Nombre Firma General Electric Controls, Inc.	Dirección local para recogido Vega Baja, Puerto Rico

Teléfonos	Orden de Compra No.	Persona Ordena Servicio	Fecha
883-3020	164-09538	Sr. Rafael Martínez	10/10/80

Tipo de Negocio	Sic. No.	Destinado a que facilidad de disposición
		Biodegradacó

DESCRIPCION DEL DESPERDICIO

Tipo de Desperdicio	Código del Vertedero
1. Metal finishing Sludge	
2. Lubricating Oils & Solvents	
3.	

Estado Físico: ☐ Sólido ☑ Líquido ☐ Lodo ☐ Otro — Especifique:

Volumen: ☑ Galones ☐ Ton. ☐ Yardas cúbicas ☐ Otro — Especifique: 160 drums = 8800 Gals.

Propiedades Peligrosas: ☐ Ninguna ☑ Tóxico ☑ Inflamable ☐ Reacción con agua

☐ Olor Fuerte ☑ Corrosivo/Irritante ☐ Reacción con aire ☐ Otro

Componentes Principales	Concentraciones promedio
1. Residuos de pintura y agua	
2. aceites, grasas y solventes	
3. Plating Sludge	
4.	Ikon 4000 PPM – Copper 1550 PPM.

Instrucciones Especiales para Manejo: a cargo de Servicios Carbareón

Clasificación DOT	Licencia de Acarreador No.
	S.R. 54/PRD091018692

Se certifica que el desperdicio sera acarreado a: Servicios Carbareón, Inc., Tallaboa, Peñuelas, P.R.

Firma del Acarreador	Tablillas y camión utilizado
[signature]	[illegible] 002355

Se certifica que el desperdicio descrito fue entregado al acarreador

Firma Supervisor del Generador	Título
Rafael A. Martínez	Process Specialist

Se certifica que el desperdicio descrito fue recibido y dispuesto

Firma Supervisor Servicios Carbareón	Volumen desperdicio recibido
[signature]	160drones – 55 gals. c/u – 8,800 gals.

Tipo disposición	Area de disposición
Biodegradación (16) – Almacenaje	Parcela A y B

OFICINA

Firm Delivery
Ponce, PR 00731
Tel. 836-2058
836-1678

SERVICIOS CARBAREON, INC.

Carretera 385 Km. 3.5
Bo. Tallaboa
Peñuelas, Puerto Rico 00724

Nº 1328

INFORME DIARIO DE SERVICIO

Fecha 10 - 10 - 197~~X~~ 80
DIA - MES - AÑO

NOMBRE GENERAL ELECTRIC CONTROLS, INC.

DIRECCION

DESCRIPCION DEL SERVICIO: Acarreo y disposición de 160 drones de desperdicios.

Horario

Núm. de Empleados

Supervisión

Total Horas

EQUIPO:

Camión con Tanque Aspirador

Camión Tanque

Camión Tumba

~~1~~ 2 Camión y Plataforma

Traxcavator

Bombas

Otros

002356

Observaciones: P. O. #164-09538

Personal: Rafael A. Martinez

MANIFIESTO SUSTANCIAS PELIGROSAS

NUM. 009

SERVICIOS CARBAREON, INC. Carr. 385 KM. 3.5 Bo. Tallaboa Peñuelas, Puerto Rico 00724	Dirección Postal Firm Delivery #74 Ponce, Puerto Rico 00731
Nombre Firma GENERAL ELECTRIC CONTROLS	Dirección local para recogido P.O. Box 328, Vega Alta, P. R. 00762

Teléfonos	Orden de Compra No.	Persona Ordena Servicio	Fecha
883-3020	164-09574	Rafael Martínez	17/10/80

Tipo de Negocio	Sic No.	Destinado a qué facilidad de disposición
Magnetic Contactors	3643	

DESCRIPCION DEL DESPERDICIO

Tipo de Desperdicio	Código del Vertedero
1. Plating Treatment Sludge	
2. Oil & solvent	
3. Paint Waste	

Estado Físico: ☐ Sólido ☑ Líquido ☐ Lodo ☐ Otro — Especifique

Volúmen: ☑ Galones ☐ Ton. ☐ Yardas cúbicas ☐ Otro — Especifique: 160 drones de 55 Gal./una

Propiedades Peligrosas: ☐ Ninguna ☑ Tóxico ☐ Inflamable ☐ Reacción con agua

☐ Olor Fuerte ☑ Corrosivo/Irritante ☐ Reacción con aire ☐ Otro

Componentes Principales	Concentraciones promedio
1. Oil Sludge	Copper - 189.4 PPM Iron - 4000 PPM
2. Oil Emulsifying solvent & solvent	Total 50.20 solvent pH 4.00
3. Paint Waste	PH 7.4 Dry solids 203 mg/lt
4.	

Instrucciones Especiales para Manejo:

Clasificación DOT	Licencia de Acarreador No.
	SR #54 / EPA ID 090018622

Se certifica que el desperdicio será acarreado a: Servicios Carbareón, Inc., Tallaboa, Peñuelas, P.R.

Firma del Acarreador	Tablillas y camión utilizado
	002357

Se certifica que el desperdicio descrito fue entregado al acarreador

Firma Supervisor del Generador	Título
Rafael A. Martínez	Process Specialist

Se certifica que el desperdicio descrito fue recibido y dispuesto

Firma Supervisor Servicios Carbareón	Volumen desperdicio recibido
E. Borrero Cruz	160 drones - 55 gals. c/u - 8.800 gals.

Tipo disposición	Area de disposición
Biodegradación/Almacenaje	Parcelas A y B

OFICINAS

MANIFIESTO SUSTANCIAS PELIGROSAS

NÚM. 009

SERVICIOS CARBAREON, INC. Carr. 385 KM. 3.5 Bo. Tallaboa Peñuelas, Puerto Rico 00724	Dirección Postal: Firm Delivery Ponce, Puerto Rico 00731
Nombre Firma GENERAL ELECTRIC CONTROLS	Dirección local para recogido P.O. Box 328, Vega Alta, P. R. 00762

Teléfonos	Orden de Compra No.	Persona Ordena Servicio	Fecha
883-3020	164-09574	Rafael Martínez	17/10/80

Tipo de Negocio	Sic. No.	Destinado a que facilidad de disposición
Magnetic Contactors	3643	

DESCRIPCION DEL DESPERDICIO

Tipo de Desperdicio	Código del Vertedero
1. Plating treated Sludge	
2. Oils & solvents	
3. Paint Wash	

Estado Físico: ☐ Sólido ☑ Líquido ☐ Lodo ☐ Otro — Especifique:

Volúmen: ☑ Galones ☐ Ton. ☐ Yardas cúbicas ☐ Otro — Especifique: 160 drums [illegible]

Propiedades Peligrosas: ☐ Ninguna ☑ Tóxico ☐ Inflamable ☐ Reacción con agua

☐ Olor Fuerte ☑ Corrosivo/ Irritante ☐ Reacción con aire ☐ Otro

Componentes Principales	Concentraciones promedio
1. Plating sludge	COPPER - 189.4 PPM IRON - 4000 PPM
2. Lubricating oils & solvent	50% oil 50% solvent pH 4.00
3. Paint wash	pH 8.48 [illegible]
4.	

Instrucciones Especiales para Manejo:

Clasificación DOT	Licencia de Acarreador No.
	SR #54 / EPA ID 091018622

Se certifica que el desperdicio sera acarreado a: Servicios Carbareón, Inc., Tallaboa, Peñuelas, P.R.

Firma del Acarreador	Tablillas y camión utilizado
	002358

Se certifica que el desperdicio descrito fue entregado al acarreador

Firma Supervior del Generador	Título
Rafael A. Martínez	Process Specialist

Se certifica que el desperdicio descrito fue recibido y dispuesto

Firma Supervisor Servicios Carbareón	Volumen desperdicio recibido
Tipo disposición	Area de disposición

Firm Delivery
Ponce, PR 00731
Tel. 836-2058
836-1678

SERVICIOS CARBAREON, INC.

Carretera 385 Km. 3.5
Bo. Tallaboa
Peñuelas, Puerto Rico 00724

Nº 1335

INFORME DIARIO DE SERVICIO

Fecha 17 octubre 197 80
DIA - MES - AÑO

NOMBRE , GENERAL ELECTRIC CONTROLS

DIRECCION Vega Alta, P.R.

DESCRIPCION DEL SERVICIO: Acarreo y disposición de 160 drones de desperdicios químicos.

Horario

Núm. de Empleados

Supervisión

Total Horas

EQUIPO:

Camión con Tanque Aspirador

Camión Tanque

Camión Tumba

2 Camión y Plataforma

Traxcavator

Bombas

Otros

Rafael A Arcaute

002359

Observaciones: P.O. #164-09574

Personal:

GENERAL ELECTRIC CONTF .S, INC.
P. O. BOX 328, VEGA ALTA, P.R. 0762
TELS. 809-883-3000 / 809-883-3020

PURCHASE ORDER N 164- 08891

IMPORTANT

THE ABOVE NUMBER MUST APPEAR ON ALL INVOICES, CORRESPONDENCE, SHIPPING NOTICES, PACKING SLIPS AND PACKAGES

Servicios Carbareon, Inc.
Carretera 385 Km. 3.5
Bo. Tallaboa
Peñuelas, Puerto Rico 00724

SHIP TO

☐ GENERAL ELECTRIC CONTROLS, INC.
KM. 30.1 MILITARY HIGHWAY
VEGA ALTA, PUERTO RICO 00762

☐ OTHER (SPECIFY)

DATE OF ORDER April 1, 1980

OR CODE NO.	TERMS	F.O.B. POINT	PROD. ORDER NO. OR A.R. NO.
'IA Your Pick-Up		CHARGE ACCT. NO. 542-730	STOCK LOCATION / CONFIRMING

QUANTITY	PART NO.	DESCRIPTION	UNIT COST	UNIT	EXTENSION
		Pick of Plating Effluent Sludge			
		quantity of 80 drums(55 gals.Steel drum)			
		$12.00 per drum	$960.00		
PER-80-62					
		DATE REQUIRED OUR PLANT			

IS ORDER, INCLUDING THE TERMS AND CONDI-INS OF PURCHASE ON THE FACE AND REVERSE IE HEREOF, CONTAINS THE ENTIRE AND ONLY REEMENT BETWEEN THE PURCHASER AND SELL- RELATING TO THE SUBJECT MATTER HEREOF, D NO OTHER AGREEMENT IN ANY WAY MODIFYING Y OF SAID TERMS AND CONDITIONS WILL BE IDING UPON PURCHASER UNLESS MADE IN WRIT- AND SIGNED BY PURCHASER'S AUTHORIZED PRESENTATIVE.

IPPING DOCUMENTS FOR THE ATTACHED TO SHOW: THIS IS A TAX EXEMPT SHIPMENT. TAX EXEMPT NO. SL 462.

B. THESE MATERIALS ARE FOR MANUFACTURING PURPOSE ONLY.
3. ALL ITEMS SHIPPED TO PUERTO RICO ARE TO BE SHIPPED, INSURED, PREPAID AND CHARGED, FOB: TO THE ABOVE CHECKED ADDRESS.
4. SHIP MOST ECONOMICAL WAY UNLESS OTHERWISE INSTRUCTED BY GENERAL ELECTRIC CONTROLS, INC. ON THE FACE OF THIS ORDER. ALSO REFERENCE PURCHASE ORDER NUMBER AND PUERTO RICO TAX EXEMPT NUMBER.
5. MAIL INVOICE IN DUPLICATE TO GENERAL ELECTRIC CONTROLS P.O. BOX 328, VEGA ALTA, P.R., 00762.

DIRECT ALL CORRESPONDENCE RELATIVE TO THIS ORDER TO PURCHASING AGENT DESIGNATED BELOW.

APPROVAL RDM

ISSUED BY PURCHASING AGENT
Jose Lopez

PLEASE ACKNOWLEDGE RECEIPT OF THIS ORDER AND ADVISE DELIVERY DATE ON ACKNOWLEDGEMENT COPY ATTACHED

S ORDER IS SUBJECT TO CONDITIONS ON REVERSE SIDE

EXPEDITER

002360

MANIFIESTO SUSTANCIAS PELIGROSAS

NÚM. 052

SERVICIOS CARBAREON, INC.
Carr. 385 KM. 3.5 Bo. Tallaboa
Peñuelas, Puerto Rico 00724

Dirección Postal
Firm Deliyery
Ponce, Puerto Rico 00731

Nombre Firma: Lemal Electric Outlets

Dirección local para recogido:

Teléfonos:

Orden de Compra No.: 164-09744

Persona Ordena Servicio: Rafael Martinez

Fecha: 3/12/80

Tipo de Negocio:

SIC No.: 3622

Destinado a que facilidad de disposición:

002361

DESCRIPCION DEL DESPERDICIO

Tipo de Desperdicio	Código del Vertedero
1. Waste water treatment sludge	
2. Spent (dirty) 111 trichloroethane solvent	
3.	

Estado Físico: ☐ Sólido ☑ Líquido ☑ Lodo ☐ Otro — Especifique: ① 15-20% solids content by weight

Volúmen: ☑ Galones ☐ Ton. ☐ Yardas cúbicas ☐ Otro — Especifique: ②

Propiedades Peligrosas: ☐ Ninguna ☑ Tóxico ☐ Inflamable ☐ Reacción con agua

☐ Olor Fuerte ☐ Corrosivo/Irritante ☐ Reacción con aire ☐ Otro

Componentes Principales	Concentraciones promedio
1. Metallic sludge gives the metal	FE-11500 PPM - CU-25 PPM - NI-200 PPM
2. Spent solvent (111 trichloroethane)	Cd-[illegible] - Pb-[illegible] - Zn-[illegible] - CHO-[illegible]
3.	
4.	TSS-5.8% - pH-[illegible]

Instrucciones Especiales para Manejo:

Clasificación DOT:

Licencia de Acarreador No.: SR54/PRD091018622

Se certifica que el desperdicio sera acarreado a: Servicios Carbareón, Inc., Tallaboa, Peñuelas, P.R.

Firma del Acarreador: [illegible]

Tablillas y camión utilizado:

Se certifica que el desperdicio descrito fue entregado al acarreador

Firma Supervior del Generador: Rafael Martinez

Título: Process Specialist

Se certifica que el desperdicio descrito fue recibido y dispuesto

Firma Supervisor Servicios Carbareón:

Volumen desperdicio recibido:

Tipo disposición:

Area de disposición:

NUMERO ID: PRD 000831487/RP02

Firm Delivery
Ponce, PR 00731
Tel. 836-2058
836-1678

SERVICIOS CARBAREON, INC.

Carretera 385 Km. 3.5
Bo. Tallaboa
Peñuelas, Puerto Rico 00724

Nº 1382

INFORME DIARIO DE SERVICIO

Fecha 3 12 1980
DIA - MES - AÑO

NOMBRE General Electric Controls

DIRECCION Vega Baja, PR

DESCRIPCION DEL SERVICIO: Acarreo y disposición de 80 drums de desperdicios químicos.

Horario 11.15 AM

Núm. de Empleados

Supervisión

Total Horas 3.00 PM

EQUIPO:

002362

Camión con Tanque Aspirador

Camión Tanque

Camión Tumba

1 Camión y Plataforma

Traxcavator

Bombas

Otros

Juan E. Hiboyeaux

Observaciones: P.O# 164-09744

Personal:
Angel Santiago
Humberto Vargas