ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

Region 2

06/27/2007

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:	NYR000144725
INSTALLATION NAME:	MACYS - COMMACK #170
INSTALLATION ADDRESS :	2 VETERANS MEMORIAL HWY COMMACK, NY 11725
MAILING ADDRESS :	2 VETERANS MEMORIAL HWY COMMACK, NY 11725

EPA Form 8700-12AB (4-80)

USEPA - REGION 2
RCRA Programs Branch
290 Broadway, 22nd Floor
New York, NY 10007-1866

ATTN: RCRA NOTIFICATIONS
Tel : (212) 637-4106
Fax: (212) 637-3056

TO: MACYS - COMMACK #170
or Current Occupant
ATTN: ELIZABETH KONKLE
755 RTE 18 SOUTH & RUES LANE
MACYS EAST BRUNSWICK #088
EAST BRUNSWICK, NJ 08816

OMB#: 2050-0028 Expires 06/30/2009

SEND COMPLETED FORM TO: The Appropriate State or EPA Regional Office.	United States Environmental Protection Agency **RCRA SUBTITLE C SITE IDENTIFICATION FORM**
1. Reason for Submittal (See instructions on page 13.) MARK ALL BOX(ES) THAT APPLY	**Reason for Submittal:** ☒ To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities) ☐ To provide Subsequent Notification of Regulated Waste Activity (to update site identification information) ☐ As a component of a First RCRA Hazardous Waste Part A Permit Application ☐ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #_____) ☐ As a component of the Hazardous Waste Report
2. Site EPA ID Number (page 14)	**EPA ID Number** NYR000144725
3. Site Name (page 14)	**Name:** MACY'S - COMMACK #170
4. Site Location Information (page 14)	**Street Address:** 2 VETERAN'S MEMORIAL HIGHWAY **City, Town, or Village:** COMMACK **State:** NY **County Name:** Suffolk **Zip Code:** 11725
5. Site Land Type (page 14)	**Site Land Type:** ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other 2/1/2006
6. North American Industry Classification System (NAICS) Code(s) for the Site (page 14)	**A.** 45211 **B.** **C.** **D.**
7. Site Mailing Address (page 15)	**Street or P. O. Box:** SAME **City, Town, or Village:** **State:** **Country:** **Zip Code:**
8. Site Contact Person (page 15)	**First Name:** ELIZABETH **MI:** M **Last Name:** KONKLE **Phone Number:** 732-631-5593 **Extension:** **Email address:** ELIZABETH.KONKLE@MACYS.COM
9. Operator and Legal Owner of the Site (pages 15 and 16)	**A. Name of Site's Operator:** MACY'S EAST **Date Became Operator (mm/dd/yyyy):** 2/1/2006 **Operator Type:** ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other **B. Name of Site's Legal Owner:** MACY'S EAST **Date Became Owner (mm/dd/yyyy):** 2/1/2006 **Owner Type:** ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other

EPA ID NO: |__|__|__|__|__|__|__|__|__|__|__|__|

OMB#: 2050-0028 Expires 06/30/2009

9. Legal Owner (Continued) Address		
	Street or P. O. Box: 7 WEST 7th STREET	
	City, Town, or Village: CINCINNATI	
	State: OHIO	
	Country: USA	Zip Code: 45202

10. Type of Regulated Waste Activity
Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 17 to 20.)

A. Hazardous Waste Activities
Complete all parts for 1 through 6.

Y ☒ N ☐ **1. Generator of Hazardous Waste**
If "Yes", choose only one of the following - a, b, or c.

- ☐ a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or
- ☐ b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste; or
- ☒ c. CESQG: Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste

In addition, indicate other generator activities.

Y ☐ N ☒ d. United States Importer of Hazardous Waste

Y ☐ N ☒ e. Mixed Waste (hazardous and radioactive) Generator

Y ☐ N ☒ **2. Transporter of Hazardous Waste**

Y ☐ N ☒ **3. Treater, Storer, or Disposer of Hazardous Waste (at your site)** Note: A hazardous waste permit is required for this activity.

Y ☐ N ☒ **4. Recycler of Hazardous Waste (at your site)**

Y ☐ N ☒ **5. Exempt Boiler and/or Industrial Furnace**
If "Yes", mark each that applies.
- ☐ a. Small Quantity On-site Burner Exemption
- ☐ b. Smelting, Melting, and Refining

Y ☐ N ☒ **6. Underground Injection Control**

B. Universal Waste Activities

Y ☐ N ☒ **1. Large Quantity Handler of Universal Waste (accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal mark all boxes that apply:**

	Manage
a. Batteries	☐
b. Pesticides	☐
c. Mercury containing equipment	☐
d. Lamps	☐
e. Other (specify) _____	☐
f. Other (specify) _____	☐
g. Other (specify) _____	☐

Y ☐ N ☐ **2. Destination Facility for Universal Waste**
Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities
Mark all boxes that apply.

Y ☐ N ☒ **1. Used Oil Transporter**
If "Yes", mark each that applies.
- ☐ a. Transporter
- ☐ b. Transfer Facility

Y ☐ N ☒ **2. Used Oil Processor and/or Re-refiner**
If "Yes", mark each that applies.
- ☐ a. Processor
- ☐ b. Re-refiner

Y ☐ N ☒ **3. Off-Specification Used Oil Burner**

Y ☐ N ☒ **4. Used Oil Fuel Marketer**
If "Yes", mark each that applies.
- ☐ a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
- ☐ b. Marketer Who First Claims the Used Oil Meets the Specifications

EPA ID NO: |__|__|__||__|__|__||__|__|__||__|__|__|

OMB#: 2050-0028 Expires 06/30/2009

11. Description of Hazardous Wastes (See instructions on page 21.)

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

D001						

B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.

12. Comments (See instructions on page 21.)

13. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.
For the RCRA Hazardous Waste Part A Permit Application, all operator(s) and owner(s) must sign (see 40 CFR 270.10 (b) and 270.11). **(See instructions on page 21.)**

Signature of operator, owner, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
Elizabeth M. Konkle	ELIZABETH M. KONKLE BUSINESS CONTINUITY MGR.	2/23/07

macy's
151 WEST 34TH STREET
NEW YORK, NY 10001

2007 FEB 27 PM 12:11

Macys East Brunswick #088
755 Route 18 South & Rues Lane
East Brunswick, NJ 08816

February 24, 2007

U.S. EPA Region 2
Division of Environmental Planning and Protection
RCRA Programs Branch, 22nd Floor
290 Broadway
New York, NY 10007-1866

Attn: Jack Hoyt

Subject: Request for new EPA ID number.

Dear Mr. Hoyt,

Enclosed is a request for a new EPA ID number for the location listed below. The store is part of the Federated Department Stores - Macys East Division. Our records state that the below location does not have an EPA ID number. Send the EPA ID number to my attention at the address listed above.

Macys East - Commack #170
2 Veteran's Memorial Highway
Commack, NY 11725-3409
Tel: 631-499-8900

Regards,

Elizabeth M. Konkle

Elizabeth M. Konkle
Business Continuity Manager
Tel: 732-631-5593
Fax: 732-631-5584

T#5186 Dart-128V

Please print or type. (Form designed for use on elite (12-pitch) typewriter.) D31638696 PPW 09/21/2007 Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
	NYR000144725	1	(800) 483-3718	000551435 FLE

5. Generator's Name and Mailing Address
Macy's East Store #170 Commack
2 Veteran's Memorial Highway , Attn: Operations Manager
Commack , NY 11725
Generator's Phone: 631-499-1020

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

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

7. Transporter 2 Company Name
Dart Trucking Company Inc.
U.S. EPA ID Number: OHD009865825

8. Designated Facility Name and Site Address
Clean Harbors Reidsville LLC
208 Watlington Industrial Drive
Reidsville, NC, 27320
Facility's Phone: (336) 342-6106
U.S. EPA ID Number: NCD000648451

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. WASTE FLAMMABLE LIQUIDS, N.O.S., (COSMETICS, ACETONE) , 3, UN1993, PG III	01	DF	400	P	D001
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
1. MACYSPROFILE ERG#128 Dart Decal #086013
DEPE#05195 · Decal #082663

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

Generator's/Offeror's Printed/Typed Name: Domenico Lavepiod
Signature: [signature]
Month 10 Day 19 Year 07

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: MANUEL GARCIA
Signature: Manuel Garcia
Month 10 Day 19 Year 07

Transporter 2 Printed/Typed Name: BYRON R. NANEY
Signature: [signature]
Month 10 Day 24 Year 07

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

18b. Alternate Facility (or Generator) Manifest Reference Number:
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. H141 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: Amanda VanDenBerghe
Signature: [signature]
Month 11 Day 9 Year 07

GENERATOR / INT'L / TRANSPORTER / DESIGNATED FACILITY

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.
Clean Harbors has the appropriate permits for and will accept the waste the generator is shipping.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21. Generator ID Number: NYR 000144725

22. Page: 2

23. Manifest Tracking Number: 000551435 FLE

24. Generator's Name: Macy's East Store #170 Commack
Commack NY

25. Transporter 3 Company Name: Dart Trucking Company Inc.
U.S. EPA ID Number: OHD009865825

26. Transporter _____ Company Name
U.S. EPA ID Number

GENERATOR

27a. HM	27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	28. Containers No.	28. Containers Type	29. Total Quantity	30. Unit Wt./Vol.	31. Waste Codes		

Transporter only

32. Special Handling Instructions and Additional Information

TRANSPORTER

33. Transporter 3 Acknowledgment of Receipt of Materials
Printed/Typed Name: Carl Chilson
Signature: Carl Chilson
Month 11 Day 05 Year 07

34. Transporter _____ Acknowledgment of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

DESIGNATED FACILITY

35. Discrepancy

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

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

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)