



2370

INTEROFFICE MEMORANDUM

To: Reneé Holmes, MS3
Diane Rayer, MS78

Date: June 30, 1999

Location: Various

Reference: N/A

From: Betsy Brucken, MS65-2 ^{BB}

FD Fernald #: M:OPI(EC): 99:0030

Location: Fernald

Client: DOE DE-AC24-92OR21972

Extension: 5254

Subject: REVISIONS TO FERNALD ENVIRONMENTAL MANAGEMENT PROJECT (FEMP) 1998 RESOURCE CONSERVATION AND RECOVERY ACT (RCRA) ANNUAL REPORT

c: File Record Subject: RCRA Annual Report-Revisions
Tom Walsh

Enclosed are revised pages of the Fernald Environmental Management Project's 1998 RCRA Annual Report. These pages were revised based on comments received from Ohio EPA and reflect minor changes to source/origin codes identified for twelve mixed waste streams.

Please replace the appropriate pages of the 1998 RCRA Annual Report with these revised pages. If you have any questions, please contact me at extension 5254.

EAB:jes
Enclosures

1

 PLACE PREPRINTED LABEL HERE
OR ENTER GENERATOR ID NUMBER

OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) HYDRAULIC OIL FROM BALER IN DRUM RECONDITIONING					
B. Hazardous waste codes <p style="text-align: center;">D018</p> <p style="text-align: right;">More... <input type="checkbox"/></p>						
C. SIC Code	D. Origin code/System type		E. Source code	F. Point of measurement	G. Waste form code	H. RCRA-radioactive mixed
4953	1	M	A56	1	B609	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

SECTION 2	A. Quantity generated in 1997 <p style="text-align: center;">0</p>	B. Quantity generated in 1998 <p style="text-align: center;">0</p>	C. UOM <p style="text-align: center;">P</p>	Density <p style="text-align: center;">lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></p>	D. Was this waste treated, disposed of, or recycled ON-SITE Yes <input type="checkbox"/> (continue to system 1) No <input checked="" type="checkbox"/> (skip to SEC3)
Onsite system 1 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site system type Quantity treated, disposed or recycled in 1998 M			On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site system type Quantity treated, disposed or recycled in 1998 M		

SECTION 3	A. Was any of this waste shipped off site in 1998 <input type="checkbox"/> Yes (continue to box B) <input checked="" type="checkbox"/> No (skip to SEC. 4)			
Site 1	B. EPA ID number of facility waste was shipped	C. System type <p style="text-align: center;">M</p>	D. Off-site availability code	E. Total quantity shipped in 1998
Site 2		M		
Site 3		M		

SECTION 4		On-site Waste Storage and Inactive Disposal Units																						
If the site has a storage permit or is undergoing a formal closure of storage or disposal units, and waste remained in the unit(s) as of December 31, complete Box A. Otherwise, skip Section 4.		A. As of December 31, did any of this waste remain on-site in: <table style="width:100%; border: none;"> <tr> <td style="width: 60%;"></td> <td style="text-align: center; width: 10%;">YES</td> <td style="text-align: center; width: 10%;">NO</td> <td style="width: 10%;"></td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 1998</td> <td></td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 1998</td> <td></td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>				YES	NO		1. a greater than 90 day storage unit.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> a. generated during 1998				<input checked="" type="checkbox"/> b. generated prior to 1998				2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	YES	NO																						
1. a greater than 90 day storage unit.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>																						
<input type="checkbox"/> a. generated during 1998																								
<input checked="" type="checkbox"/> b. generated prior to 1998																								
2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>																					
B. Storage or disposal method	Handling code	Amount	UOM	Density																				
UNIT 1	S01	273	P	lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>																				
UNIT 2				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>																				
UNIT 3				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>																				
UNIT 4				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>																				

Comments: SECTION 1, BOX G: B609 - SUMP CLEANOUT SLUDGE

SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEMP'S FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

 PLACE PREPRINTED LABEL HERE
OR ENTER GENERATOR ID NUMBER
OH6890008976

Form GM - Generation and Management

SECTION 1		A. Hazardous waste description (60 characters max.)			
		LEAD SOLDER JOINTS			
B. Hazardous waste codes					
D008					
More... <input type="checkbox"/>					
C. SIC Code	D. Origin code/System type	E. Source code	F. Point of measurement	G. Waste form code	H. RCRA-radioactive mixed
4953	2 M	A69	1	B307	Yes X No <input type="checkbox"/>

SECTION 2	A. Quantity generated in 1997	B. Quantity generated in 1998	C. UOM Density	D. Was this waste treated, disposed of, or recycled ON-SITE
	0	0	P lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>	Yes <input type="checkbox"/> (continue to system 1) No X (skip to SEC3)
Onsite system 1 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site system type Quantity treated, disposed or recycled in 1998 M			On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site system type Quantity treated, disposed or recycled in 1998 M	

SECTION 3	A. Was any of this waste shipped off site in 1998			
	<input type="checkbox"/> Yes (continue to box B) <input checked="" type="checkbox"/> No (skip to SEC. 4)			
Site 1	B. EPA ID number of facility waste was shipped	C. System type	D. Off-site availability code	E. Total quantity shipped in 1998
		M		
Site 2		M		
		M		

SECTION 4		On-site Waste Storage and Inactive Disposal Units																	
If the site has a storage permit or is undergoing a formal closure of storage or disposal units, and waste remained in the unit(s) as of December 31, complete Box A. Otherwise, skip Section 4.		A. As of December 31, did any of this waste remain on-site in: <table style="width:100%; margin-left: 20px;"> <tr> <td></td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 1998</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 1998</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>				YES	NO	1. a greater than 90 day storage unit.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> a. generated during 1998			<input checked="" type="checkbox"/> b. generated prior to 1998			2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	YES	NO																	
1. a greater than 90 day storage unit.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>																	
<input type="checkbox"/> a. generated during 1998																			
<input checked="" type="checkbox"/> b. generated prior to 1998																			
2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input checked="" type="checkbox"/>																	
B. Storage or disposal method	Handling code	Amount	UOM	Density															
UNIT 1	S01	30	P	lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 2				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 3				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 4				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															

Comments: SECTION 1, BOX E: A99 - LEAD DEBRIS GENERATED FROM LAB CONSTRUCTION AND REMOVAL PROJECTS.

SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEMP'S FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

1998 Annual Hazardous Waste Report

2370



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) VOLATILE SOLID WASTE				
B. Hazardous waste codes D010					
More... <input type="checkbox"/>					
C. SIC Code 4953	D. Origin code/System type 1 M	E. Source code A94	F. Point of measurement 1	G. Waste form code B203	H. RCRA-radioactive mixed Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

SECTION 2	A. Quantity generated in 1997 0	B. Quantity generated in 1998 0	C. UOM Density P lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>	D. Was this waste treated, disposed of, or recycled ON-SITE Yes <input type="checkbox"/> (continue to system 1) No <input checked="" type="checkbox"/> (skip to SEC3)
Onsite system 1 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>			On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site system type Quantity treated, disposed or recycled in 1998 M			On-site system type Quantity treated, disposed or recycled in 1998 M	

SECTION 3	A. Was any of this waste shipped off site in 1998 <input type="checkbox"/> Yes (continue to box B) <input checked="" type="checkbox"/> No (skip to SEC. 4)			
Site 1	B. EPA ID number of facility waste was shipped	C. System type M	D. Off-site availability code	E. Total quantity shipped in 1998
Site 2		M		
Site 3		M		

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SECTION 4		<i>On-site Waste Storage and Inactive Disposal Units</i>																						
If the site has a storage permit or is undergoing a formal closure of storage or disposal units, and waste remained in the unit(s) as of December 31, complete Box A. Otherwise, skip Section 4.		A. As of December 31, did any of this waste remain on-site in: <table style="width:100%; margin-top: 10px;"> <tr> <td style="width: 60%;"></td> <td style="text-align: center; width: 15%;">YES</td> <td style="text-align: center; width: 15%;">NO</td> <td style="width: 10%;"></td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 1998</td> <td></td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 1998</td> <td></td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td></td> </tr> </table>				YES	NO		1. a greater than 90 day storage unit.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> a. generated during 1998				<input checked="" type="checkbox"/> b. generated prior to 1998				2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	YES	NO																						
1. a greater than 90 day storage unit.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>																						
<input type="checkbox"/> a. generated during 1998																								
<input checked="" type="checkbox"/> b. generated prior to 1998																								
2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input checked="" type="checkbox"/>																						
B. Storage or disposal method	Handling code	Amount	UOM	Density																				
UNIT 1	S01	449	P	lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>																				
UNIT 2				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>																				
UNIT 3				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>																				
UNIT 4				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>																				

Comments:	SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEMP'S FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:

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 1998 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) LAB WASTE, TCLP EXTRACT				
B. Hazardous waste codes D018 D021 D035 D038 D039 D040 D043 F002 F005 More... <input type="checkbox"/>					
C. SIC Code 4953	D. Origin code/System type 1 M	E. Source code A94	F. Point of measurement 1	G. Waste form code B102	H. RCRA-radioactive mixed Yes X No <input type="checkbox"/>

SECTION 2	A. Quantity generated in 1997 0	B. Quantity generated in 1998 0	C. UOM Density P lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>	D. Was this waste treated, disposed of, or recycled ON-SITE Yes <input type="checkbox"/> (continue to system 1) No X (skip to SEC3)
Onsite system 1 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		
On-site system type M		Quantity treated, disposed or recycled in 1998		

SECTION 3	A. Was any of this waste shipped off site in 1998 <input type="checkbox"/> Yes (continue to box B) <input checked="" type="checkbox"/> No (skip to SEC. 4)			
Site 1	B. EPA ID number of facility waste was shipped	C. System type M	D. Off-site availability code	E. Total quantity shipped in 1998
Site 2		M		
Site 3		M		

SECTION 4		On-site Waste Storage and Inactive Disposal Units																	
If the site has a storage permit or is undergoing a formal closure of storage or disposal units, and waste remained in the unit(s) as of December 31, complete Box A. Otherwise, skip Section 4.		A. As of December 31, did any of this waste remain on-site in: <table style="width:100%; margin-top: 10px;"> <tr> <td></td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 1998</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 1998</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>				YES	NO	1. a greater than 90 day storage unit.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> a. generated during 1998			<input checked="" type="checkbox"/> b. generated prior to 1998			2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	YES	NO																	
1. a greater than 90 day storage unit.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>																	
<input type="checkbox"/> a. generated during 1998																			
<input checked="" type="checkbox"/> b. generated prior to 1998																			
2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input checked="" type="checkbox"/>																	
B. Storage or disposal method	Handling code	Amount	UOM	Density															
UNIT 1	S01	963	P	lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 2				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 3				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 4				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															

Comments: SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEMP'S FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

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OhioEPA

State of Ohio Environmental Protection Agency

1998 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1		A. Hazardous waste description (60 characters max.)			
		RADIOACTIVE NEUTRAL LAB WASTE FROM SAMPLE ANALYSIS			
B. Hazardous waste codes					
D001 D006 D007 D008 D009 D018 D035 D039 D040					
More... <input type="checkbox"/>					
C. SIC Code	D. Origin code/System type	E. Source code	F. Point of measurement	G. Waste form code	H. RCRA-radioactive mixed
4953	1 M	A94	1	B407	Yes X No <input type="checkbox"/>

SECTION 2	A. Quantity generated in 1997	B. Quantity generated in 1998	C. UOM Density	D. Was this waste treated, disposed of, or recycled ON-SITE
	0	0	P	Yes <input type="checkbox"/> (continue to system 1) No X (skip to SEC3)
			lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>	
Onsite system 1 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>			On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site system type Quantity treated, disposed or recycled in 1998			On-site system type Quantity treated, disposed or recycled in 1998	
M			M	

SECTION 3	A. Was any of this waste shipped off site in 1998 <input type="checkbox"/> Yes (continue to box B) <input checked="" type="checkbox"/> No (skip to SEC. 4)			
Site 1	B. EPA ID number of facility waste was shipped	C. System type	D. Off-site availability code	E. Total quantity shipped in 1998
		M		
Site 2		M		
		M		

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SECTION 4		On-site Waste Storage and Inactive Disposal Units																	
If the site has a storage permit or is undergoing a formal closure of storage or disposal units, and waste remained in the unit(s) as of December 31, complete Box A. Otherwise, skip Section 4.		A. As of December 31, did any of this waste remain on-site in: <table style="width:100%; margin-left: 20px;"> <tr> <td></td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: center;">X</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 1998</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 1998</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">X</td> </tr> </table>				YES	NO	1. a greater than 90 day storage unit.....	X	<input type="checkbox"/>	<input type="checkbox"/> a. generated during 1998			X b. generated prior to 1998			2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	X
	YES	NO																	
1. a greater than 90 day storage unit.....	X	<input type="checkbox"/>																	
<input type="checkbox"/> a. generated during 1998																			
X b. generated prior to 1998																			
2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	X																	
B. Storage or disposal method	Handling code	Amount	UOM	Density															
UNIT 1	S01	31	P	lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 2				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 3				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 4				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															

Comments:

SECTION 1, BOX G: B407 - PRIMARILY SOLID PHASE SEPARATED FROM LABORATORY WASTE PRIOR TO BULKING LIQUIDS FOR SHIPMENT.

SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEMP'S FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

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OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) MICROMELTER SHELL				
B. Hazardous waste codes D007					
More... <input type="checkbox"/>					
C. SIC Code 4953	D. Origin code/System type 1 M	E. Source code A61	F. Point of measurement 1	G. Waste form code B319	H. RCRA-radioactive mixed Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

SECTION 2	A. Quantity generated in 1997 0	B. Quantity generated in 1998 0	C. UOM P	Density lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>	D. Was this waste treated, disposed of, or recycled ON-SITE Yes <input type="checkbox"/> (continue to system 1) No <input checked="" type="checkbox"/> (skip to SEC3)
Onsite system 1 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>			On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		
On-site system type M			Quantity treated, disposed or recycled in 1998		
			On-site system type M		
			Quantity treated, disposed or recycled in 1998		

SECTION 3	A. Was any of this waste shipped off site in 1998 <input type="checkbox"/> Yes (continue to box B) <input checked="" type="checkbox"/> No (skip to SEC. 4)			
Site 1	B. EPA ID number of facility waste was shipped	C. System type M	D. Off-site availability code	E. Total quantity shipped in 1998
Site 2		M		
		M		

SECTION 4		On-site Waste Storage and Inactive Disposal Units																	
If the site has a storage permit or is undergoing a formal closure of storage or disposal units, and waste remained in the unit(s) as of December 31, complete Box A. Otherwise, skip Section 4.		A. As of December 31, did any of this waste remain on-site in: <table style="width:100%; margin-top: 10px;"> <tr> <td style="width:70%;"></td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 1998</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 1998</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>				YES	NO	1. a greater than 90 day storage unit.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> a. generated during 1998			<input checked="" type="checkbox"/> b. generated prior to 1998			2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	YES	NO																	
1. a greater than 90 day storage unit.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>																	
<input type="checkbox"/> a. generated during 1998																			
<input checked="" type="checkbox"/> b. generated prior to 1998																			
2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input checked="" type="checkbox"/>																	
B. Storage or disposal method	Handling code	Amount	UOM	Density															
UNIT 1	S01	869	P	lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 2				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 3				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 4				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															

Comments: SECTION 1, BOX G: B319 - BRICKS

SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEMP'S FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

2370

of Ohio Environmental Protection Agency

1998 Annual Hazardous Waste Report



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OR ENTER GENERATOR ID NUMBER

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.)				
	SODIUM SULPHATE WASTE				
B. Hazardous waste codes					
F002 F003					
More... <input type="checkbox"/>					
C. SIC Code	D. Origin code/System type	E. Source code	F. Point of measurement	G. Waste form code	H. RCRA-radioactive mixed
4953	1 M	A94	1	B316	Yes X No <input type="checkbox"/>

SECTION 2	A. Quantity generated in 1997	B. Quantity generated in 1998	C. UOM	Density	D. Was this waste treated, disposed of, or recycled ON-SITE
	0	0	P		Yes <input type="checkbox"/> (continue to system 1) No X (skip to SEC3)
			lbs/gal <input type="checkbox"/>	sg <input type="checkbox"/>	
Onsite system 1 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>			On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		
On-site system type Quantity treated, disposed or recycled in 1998			On-site system type Quantity treated, disposed or recycled in 1998		
M			M		

SECTION 3	A. Was any of this waste shipped off site in 1998			
	<input type="checkbox"/> Yes (continue to box 8) <input checked="" type="checkbox"/> No (skip to SEC. 4)			
Site 1	B. EPA ID number of facility waste was shipped	C. System type	D. Off-site availability code	E. Total quantity shipped in 1998
		M		
Site 2		M		
Site 3		M		

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SECTION 4		On-site Waste Storage and Inactive Disposal Units																	
If the site has a storage permit or is undergoing a formal closure of storage or disposal units, and waste remained in the unit(s) as of December 31, complete Box A. Otherwise, skip Section 4.		A. As of December 31, did any of this waste remain on-site in: <table style="width:100%; border: none;"> <tr> <td style="width: 60%;"></td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 1998</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 1998</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>				YES	NO	1. a greater than 90 day storage unit.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> a. generated during 1998			<input checked="" type="checkbox"/> b. generated prior to 1998			2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	YES	NO																	
1. a greater than 90 day storage unit.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>																	
<input type="checkbox"/> a. generated during 1998																			
<input checked="" type="checkbox"/> b. generated prior to 1998																			
2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input checked="" type="checkbox"/>																	
B. Storage or disposal method	Handling code	Amount	UOM	Density															
UNIT 1	S01	45	P	lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 2				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 3				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 4				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															

Comments:	SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEMP'S FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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 1998 Annual Hazardous Waste Report

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 OR ENTER GENERATOR ID NUMBER
 OH6890008976

Form GM - Generation and Management

SECTION 1		A. Hazardous waste description (60 characters max.)					
		BATCH 6 TANK BOTTOMS					
B. Hazardous waste codes		F001 F002 F003 F005 D008 D018 D019 D022 D026 D029 D035 D038 D039 D040 D043 More... <input type="checkbox"/>					
C. SIC Code	D. Origin code/System type	E. Source code	F. Point of measurement	G. Waste form code	H. RCRA-radioactive mixed		
4953	1 M	A60	1	B407	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		

SECTION 2	A. Quantity generated in 1997	B. Quantity generated in 1998	C. UOM	Density	D. Was this waste treated, disposed of, or recycled ON-SITE		
	0	0	P		Yes <input type="checkbox"/> (continue to system 1) No <input checked="" type="checkbox"/> (skip to SEC3)		
Onsite system 1 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site system type Quantity treated, disposed or recycled in 1998 M			On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site system type Quantity treated, disposed or recycled in 1998 M				

SECTION 3	A. Was any of this waste shipped off site in 1998			
	<input type="checkbox"/> Yes (continue to box B) <input checked="" type="checkbox"/> No (skip to SEC. 4)			
Site 1	B. EPA ID number of facility waste was shipped	C. System type	D. Off-site availability code	E. Total quantity shipped in 1998
		M		
Site 2		M		
		M		

SECTION 4		On-site Waste Storage and Inactive Disposal Units																	
If the site has a storage permit or is undergoing a formal closure of storage or disposal units, and waste remained in the unit(s) as of December 31, complete Box A. Otherwise, skip Section 4.		A. As of December 31, did any of this waste remain on-site in: <table style="width:100%; margin-top: 10px;"> <tr> <td></td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 1998</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 1998</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>				YES	NO	1. a greater than 90 day storage unit.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> a. generated during 1998			<input checked="" type="checkbox"/> b. generated prior to 1998			2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	YES	NO																	
1. a greater than 90 day storage unit.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>																	
<input type="checkbox"/> a. generated during 1998																			
<input checked="" type="checkbox"/> b. generated prior to 1998																			
2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input checked="" type="checkbox"/>																	
B. Storage or disposal method	Handling code	Amount	UOM	Density															
UNIT 1	S01	1734	P	lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 2				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 3				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 4				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															

Comments: SECTION 1, BOX G: B407 - OIL/SOLVENT SLUDGE (NON-PUMPABLE).

SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEMP'S FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

17 .

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Form GM - Generation and Management

SECTION 1		A. Hazardous waste description (60 characters max.)			
		BATCH 5 TANK BOTTOMS			
B. Hazardous waste codes					
D004 D006 D007 D008 D010 D011 D018 D019 D026 D035 D038 D039 D040 D043 F001 F002 F003 F005 More... <input type="checkbox"/>					
C. SIC Code	D. Origin code/System type	E. Source code	F. Point of measurement	G. Waste form code	H. RCRA-radioactive mixed
4953	1 M	A60	1	B407	Yes X No <input type="checkbox"/>

SECTION 2	A. Quantity generated in 1997	B. Quantity generated in 1998	C. UOM Density	D. Was this waste treated, disposed of, or recycled ON-SITE
	0	0	P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	Yes <input type="checkbox"/> (continue to system 1) No X (skip to SEC3)
Onsite system 1 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site system type Quantity treated, disposed or recycled in 1998 M			On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site system type Quantity treated, disposed or recycled in 1998 M	

SECTION 3	A. Was any of this waste shipped off site in 1998 <input type="checkbox"/> Yes (continue to box B) <input checked="" type="checkbox"/> No (skip to SEC. 4)			
Site 1	B. EPA ID number of facility waste was shipped	C. System type	D. Off-site availability code	E. Total quantity shipped in 1998
		M		
Site 2		M		
		M		

SECTION 4		On-site Waste Storage and Inactive Disposal Units																	
If the site has a storage permit or is undergoing a formal closure of storage or disposal units, and waste remained in the unit(s) as of December 31, complete Box A. Otherwise, skip Section 4.		A. As of December 31, did any of this waste remain on-site in: <table style="width:100%; margin-top: 10px;"> <tr> <td style="width:70%;"></td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 1998</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 1998</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>				YES	NO	1. a greater than 90 day storage unit.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> a. generated during 1998			<input checked="" type="checkbox"/> b. generated prior to 1998			2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	YES	NO																	
1. a greater than 90 day storage unit.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>																	
<input type="checkbox"/> a. generated during 1998																			
<input checked="" type="checkbox"/> b. generated prior to 1998																			
2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input checked="" type="checkbox"/>																	
B. Storage or disposal method	Handling code	Amount	UOM	Density															
UNIT 1	S01	551	P	lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 2				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 3				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 4				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															

Comments: SECTION 1, BOX G: B407 - OIL/SOLVENT SLUDGE (NON-PUMPABLE).

SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEMP'S FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

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 1998 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) BATCH 1 TANK BOTTOMS				
B. Hazardous waste codes D004 D008 D010 D011 D018 D019 D021 D029 D039 D040 More... <input type="checkbox"/>					
C. SIC Code 4953	D. Origin code/System type 1 M	E. Source code A60	F. Point of measurement 1	G. Waste form code B407	H. RCRA-radioactive mixed Yes X No <input type="checkbox"/>

SECTION 2	A. Quantity generated in 1997 0	B. Quantity generated in 1998 0	C. UOM Density P lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>	D. Was this waste treated, disposed of, or recycled ON-SITE Yes <input type="checkbox"/> (continue to system 1) No X (skip to SEC3)
Onsite system 1 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		
On-site system type M		Quantity treated, disposed or recycled in 1998		On-site system type M
		Quantity treated, disposed or recycled in 1998		

SECTION 3	A. Was any of this waste shipped off site in 1998 <input type="checkbox"/> Yes (continue to box B) <input checked="" type="checkbox"/> No (skip to SEC. 4)			
Site 1	B. EPA ID number of facility waste was shipped	C. System type M	D. Off-site availability code	E. Total quantity shipped in 1998
Site 2		M		
		M		

SECTION 4		On-site Waste Storage and Inactive Disposal Units																	
If the site has a storage permit or is undergoing a formal closure of storage or disposal units, and waste remained in the unit(s) as of December 31, complete Box A. Otherwise, skip Section 4.		A. As of December 31, did any of this waste remain on-site in: <table style="width:100%; margin-top: 10px;"> <tr> <td></td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 1998</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 1998</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>				YES	NO	1. a greater than 90 day storage unit.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> a. generated during 1998			<input checked="" type="checkbox"/> b. generated prior to 1998			2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	YES	NO																	
1. a greater than 90 day storage unit.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>																	
<input type="checkbox"/> a. generated during 1998																			
<input checked="" type="checkbox"/> b. generated prior to 1998																			
2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input checked="" type="checkbox"/>																	
B. Storage or disposal method	Handling code	Amount	UOM	Density															
UNIT 1	S01	283	P	lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 2				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 3				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 4				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															

Comments: SECTION 1, BOX G: B407 - OIL/SOLVENT SLUDGE (NON-PUMPABLE).

SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEMP'S FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

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OhioEPA

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1998 Annual Hazardous Waste Report

2370

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.)					LIQUIDS FOR THE TSCA INCINERATOR					
B. Hazardous waste codes											
D001 D004 D005 D006 D007 D008 D009 D010 D011 D018 D019											
D021 D022 D026 D027 D028 D029 D035 D038 D039 D040 D043 More... <input type="checkbox"/>											
C. SIC Code	D. Origin code/System type		E. Source code	F. Point of measurement	G. Waste form code		H. RCRA-radioactive mixed				
4953	2 M		A61	1	B219		Yes X No <input type="checkbox"/>				

ON 2	A. Quantity generated in 1997	B. Quantity generated in 1998	C. UOM	Density	D. Was this waste treated, disposed of, or recycled ON-SITE	
	3605	20	P		Yes <input type="checkbox"/> (continue to system 1) No X (skip to SEC3)	
Onsite system 1 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>			On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>			
On-site system type M			Quantity treated, disposed or recycled in 1998			
			On-site system type M			
			Quantity treated, disposed or recycled in 1998			

SECTION 3	A. Was any of this waste shipped off site in 1998 <input type="checkbox"/> Yes (continue to box B) <input checked="" type="checkbox"/> No (skip to SEC. 4)			
Site 1	B. EPA ID number of facility waste was shipped	C. System type	D. Off-site availability code	E. Total quantity shipped in 1998
		M		
Site 2		M		
		M		

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SECTION 4		On-site Waste Storage and Inactive Disposal Units																	
If the site has a storage permit or is undergoing a formal closure of storage or disposal units, and waste remained in the unit(s) as of December 31, complete Box A. Otherwise, skip Section 4.		A. As of December 31, did any of this waste remain on-site in: <table style="width:100%; margin-top: 10px;"> <tr> <td style="width:70%;"></td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;">X a. generated during 1998</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 1998</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>				YES	NO	1. a greater than 90 day storage unit.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	X a. generated during 1998			X b. generated prior to 1998			2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	YES	NO																	
1. a greater than 90 day storage unit.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>																	
X a. generated during 1998																			
X b. generated prior to 1998																			
2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input checked="" type="checkbox"/>																	
B. Storage or disposal method	Handling code	Amount	UOM	Density															
UNIT 1	S01	4317	P	lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 2				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 3				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 4				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															

Comments: SECTION 1, BOX G: B219 - OIL/SOLVENT MIX.

SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEMP'S FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

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 1998 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.)					EXPIRED ORGANIC STANDARDS								
B. Hazardous waste codes														
D001	F027	P004	P022	P037	P048	P050	P051	P059	P071	P082	P094	P123	U002	U004
U012	U019	U021	U022	U024	U027	U028	U031	U036	U037	U039	U043	U044	U045	More...X
C. SIC Code	D. Origin code/System type		E. Source code	F. Point of measurement	G. Waste form code	H. RCRA-radioactive mixed								
4953	1	M	A94	1	B001	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>								

SECTION 2	A. Quantity generated in 1997	B. Quantity generated in 1998	C. UOM	Density	D. Was this waste treated, disposed of, or recycled ON-SITE	
	0	0	P		Yes <input type="checkbox"/> (continue to system 1) No <input checked="" type="checkbox"/> (skip to SEC3)	
Onsite system 1 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>			On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>			
On-site system type Quantity treated, disposed or recycled in 1998			On-site system type Quantity treated, disposed or recycled in 1998			
M			M			

SECTION 3	A. Was any of this waste shipped off site in 1998 <input type="checkbox"/> Yes (continue to box 8) <input checked="" type="checkbox"/> No (skip to SEC. 4)			
Site 1	B. EPA ID number of facility waste was shipped	C. System type	D. Off-site availability code	E. Total quantity shipped in 1998
		M		
Site 2		M		
		M		

SECTION 4		On-site Waste Storage and Inactive Disposal Units																	
If the site has a storage permit or is undergoing a formal closure of storage or disposal units, and waste remained in the unit(s) as of December 31, complete Box A. Otherwise, skip Section 4.		A. As of December 31, did any of this waste remain on-site in: <table style="width:100%; margin-top: 10px;"> <tr> <td></td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: center;">X</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 1998</td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 1998</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">X</td> </tr> </table>				YES	NO	1. a greater than 90 day storage unit.....	X	<input type="checkbox"/>	<input type="checkbox"/> a. generated during 1998		<input type="checkbox"/>	X b. generated prior to 1998			2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	X
	YES	NO																	
1. a greater than 90 day storage unit.....	X	<input type="checkbox"/>																	
<input type="checkbox"/> a. generated during 1998		<input type="checkbox"/>																	
X b. generated prior to 1998																			
2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	X																	
B. Storage or disposal method	Handling code	Amount	UOM	Density															
UNIT 1	S01	27	P	lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 2				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 3				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															
UNIT 4				lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>															

Comments: SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEMP'S FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

- Extra Waste Codes:**
- U047 U048 U050 U052 U055 U057 U060 U061 U066 U068 U070 U072 U073 U075 U076 U077 U078
 U079 U080 U081 U082 U083 U084 U088 U101 U102 U105 U106 U112 U120 U127 U128 U129 U130
 U131 U141 U154 U159 U161 U165 U167 U168 U169 U170 U171 U179 U183 U185 U187 U188 U191
 U192 U196 U203 U207 U208 U209 U210 U220 U226 U227 U228 U239