

2003 RCRA ANNUAL REPORT

**FERNALD CLOSURE PROJECT
FERNALD, OHIO**



FEBRUARY 2004

**U.S. DEPARTMENT OF ENERGY
FERNALD AREA OFFICE
USEPA I.D. NO. OH6890008976**

<p>MAIL THE COMPLETED FORM TO: Ohio EPA, DHWM, P.O. Box 1049, Columbus, OH 43216-1049</p>	<p>Ohio Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION</p>		<p>For Ohio EPA Use Only</p>	
<p>1. Reason for Submittal</p>	<p>Reason for Submittal:</p> <p><input type="checkbox"/> To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities).</p> <p><input checked="" type="checkbox"/> To provide subsequent notification (to update site identification information).</p> <p><input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application.</p> <p><input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____)</p> <p><input checked="" type="checkbox"/> As a component of the Hazardous Waste Report for the year <u>2003</u></p>			
<p>2. Site EPA ID No.</p>	<p>EPA ID Number: <u>OH6890008976</u></p>			
<p>3. Site Name</p>	<p>Name: <u>FERNALD CLOSURE PROJECT</u></p>			
<p>4. Site Location Information</p>	<p>Street Address: <u>7400 Willey Road</u></p> <p>City, Town, or Village: <u>Hamilton</u> State: <u>OH</u></p> <p>County Name: <u>Hamilton</u> Zip Code: <u>45013-9402</u></p>			
<p>5. Site Land Type</p>	<p>Site Land Type: <input type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>			
<p>6. North American Industry Class. System (NAICS) Code(s) for the Site</p>	<p>A. <u>562910</u></p>	<p>B.</p>	<p>C.</p>	<p>D.</p>
<p>7. Site Contact Person:</p>	<p>First Name: <u>Elizabeth</u> MI: <u>A</u> Last Name: <u>Brucken</u></p> <p>Phone Number: <u>(513) 648-5254</u> Phone Number Extension:</p> <p>E-Mail Address: <u>Elizabeth.Brucken@Fernald.gov</u></p> <p>Fax Number: <u>(513) 648-5108</u> Fax Number Extension:</p> <p>Street or P.O. Box: <u>P. O. Box 538704</u></p> <p>City, Town or Village: <u>Cincinnati</u></p> <p>State: <u>Ohio</u> Country: <u>USA</u> Zip Code: <u>45253-8704</u></p>			
<p>8. Legal Owner and Operator of the Site List Additional Owners and/or Operators in the Comment Section or on another copy of this form page.</p>	<p>A. Name of Site's Legal Owner: <u>U.S. Department of Energy</u> Date Became Owner (mm/dd/yyyy): <u>3/30/1951</u></p> <p>Owner Type: <input type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p> <p>Street or P.O. Box: <u>P.O. Box 538705</u></p> <p>City, Town, or Village: <u>Cincinnati</u> Owner Phone #: <u>(513) 648-3155</u></p> <p>State: <u>Ohio</u> Country: <u>USA</u> Zip Code: <u>45253</u></p> <p>B. Name of Site's Operator: <u>Same as Owner</u> Date Became Operator (mm/dd/yyyy):</p> <p>Operator Type: <input type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p> <p>Street or P.O. Box:</p> <p>City, Town, or Village: Operator Phone #:</p> <p>State: Country: Zip Code:</p>			

MAIL THE COMPLETED FORM TO: Ohio EPA, DHWM, P.O. Box 1049, Columbus, OH 43216-1049	Ohio Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION		For Ohio EPA Use Only	
1. Reason for Submittal	Reason for Submittal: <input type="checkbox"/> To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities). <input type="checkbox"/> To provide subsequent notification (to update site identification information). <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application. <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____) <input type="checkbox"/> As a component of the Hazardous Waste Report for the year _____.			
2. Site EPA ID No.	EPA ID Number:			
3. Site Name	Name:			
4. Site Location Information	Street Address:			
	City, Town, or Village:	State: OH		
	County Name:	Zip Code:		
5. Site Land Type	Site Land Type: <input type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other			
6. North American Industry Class. System (NAICS) Code(s) for the Site	A.	B.		
	C.	D.		
7. Site Contact Person:	First Name:		MI:	Last Name:
	Phone Number:		Phone Number Extension:	
	E-Mail Address:			
	Fax Number:		Fax Number Extension:	
	Street or P.O. Box:			
	City, Town or Village:			
	State:	Country:	Zip Code:	
8. Legal Owner and Operator of the Site List Additional Owners and/or Operators in the Comment Section or on another copy of this form page.	A. Name of Site's Legal Owner:		Date Became Owner (mm/dd/yyyy):	
	Owner Type: <input type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other			
	Street or P.O. Box:			
	City, Town, or Village:		Owner Phone #:	
	State:	Country:	Zip Code:	
	B. Name of Site's Operator: Fluor Fernald, Inc.		Date Became Operator (mm/dd/yyyy):	
	Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other			
	Street or P.O. Box: P.O. Box 538704			
	City, Town, or Village: Cincinnati		Operator Phone #: (513) 648-3000	
	State: Ohio	Country: USA	Zip Code: 45253	

1087

9. Type of Regulated Waste Activity (Mark "X" in the appropriate boxes.)

A. Hazardous Waste Activities

1. Generator of Hazardous Waste (choose only one of the following three categories)

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

In addition, indicate other generator activities (check all that apply)

- d. United States Importer of Hazardous Waste
- e. Mixed Waste (hazardous and radioactive) Generator

2. Hazardous Waste Report Generator Status (choose one if a Reason for Submittal is the Hazardous Waste Report)

- a. Large Quantity Generator (LQG): Greater than 1,000 kg/mo (2,200 lbs.) of non-acute hazardous waste was generated at the site in any one month. or
- b. Small Quantity Generator (SQG) In one or more months the site generated greater than 100kg (220 lbs) but in no month did it generate more than 1,000 kg/mo (220-2,200 lbs) of non-acute hazardous waste, or
- c. Conditionally Exempt Small Quantity Generator (CESQG): The site generated no more than 100 kg (220 lbs) of non-acute hazardous waste in any one month.
- d. Non-Generator The site did not generate any hazardous waste during the calendar year.

For Items 3 through 7, check all that apply:

- 3. Transporter of Hazardous Waste
- 4. Treater, Storer or Disposer of Hazardous Waste (at your site) Note: A hazardous waste permit is required for this activity.
- 5. Recycler of Hazardous Waste (at your site) Note: A hazardous waste permit may be required for this activity.
- 6. Exempt Boiler and/or Industrial Furnace
 - a. Small Quantity On-site Burner Exemption
 - b. Smelting, Melting, Refining Furnace Exemption
- 7. Underground Injection Control

B. Universal Waste Activities

1. Large Quantity Handler of Universal Waste (accumulate 5,000 kg or more). Indicate types of universal waste generated and/or accumulated at your site. (check all boxes that apply):

	<u>Generated</u>	<u>Accumulated</u>
1. Batteries	<input type="checkbox"/>	<input type="checkbox"/>
2. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>
3. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>
4. Lamps	<input type="checkbox"/>	<input type="checkbox"/>

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

C. Used Oil Activities

1. Used Oil Transporter Indicate Type(s) of Activity(ies)

- a. Transporter
- b. Transfer Facility

2. Used Oil Processor and/or Re-refiner Indicate Type(s) of Activity(ies)

- a. Processor
- b. Re-refiner

3. Off-Specification Used Oil Burner

4. Used Oil Fuel Marketer - Indicate Type(s) of Activity(ies)

- 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

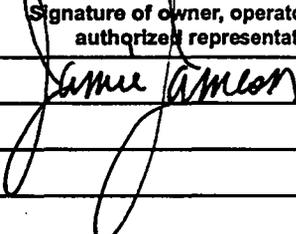
10. **Waste Codes for Federally Regulated Hazardous Wastes.** Please list the codes for the federally regulated hazardous waste handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more space is needed.

D001	D002	D003	D004	D005	D006	D007
D008	D009	D010	D011	D012	D013	D014
D015	D018	D019	D020	D021	D022	D023
D024	D025	D026	D027	D028	D029	D030
D031	D032	D033	D034	D035	D036	D038

11. **Comments** Fluor Fernald, Inc. and the U.S. Department of Energy are Co-operators of this facility. The Department's RCRA responsibilities are for policy, programmatic, funding and scheduling decisions, as well as general oversight, and Fluor Fernald, Inc.'s responsibilities are for day-to-day operations, including but not limited to the following responsibilities:

waste analyses and handling
 monitoring
 recordkeeping
 reporting, and
 contingency planning.

12. **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.

Signature of owner, operator, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm-dd-yyyy)
	Jamie Jameson Closure Project Director	February 18, 2004

Section 9.A.4: In accordance with the Director's Findings and Orders issued by Ohio EPA on June 6, 1996, the Fernald Closure Project (FCP) is exempted from obtaining a RCRA permit for hazardous waste storage activities (container storage) provided that the FCP complies with the terms of the current Part B Permit Application and all other applicable hazardous waste regulations. The FCP is also treating mixed soils in a Corrective Action Management Unit (CAMU) and storing mixed organic liquids in large portable tanks as part of the site's CERCLA remedial activities.

Section 10: Waste Codes - Continued

D037	D039	D040	D042	D043	-
F001	F002	F003	F004	F005	F027
P004	P012	P018	P022	P037	P041
P048	P050	P051	P059	P071	P082
P094	P098	P106	P113	P115	P119
P120	P123	-	U002	U003	U004
U012	U014	U021	U022	U024	U028
U031	U036	U037	U039	U041	U043
U044	U045	U047	U048	U050	U052
U055	U056	U057	U060	U061	U066
U068	U070	U072	U073	U075	U076
U077	U078	U079	U080	U081	U082
U083	U084	U088	U096	U101	U102
U105	U106	U107	U108	U112	U117
U120	U121	U122	U123	U127	U128
U129	U130	U131	U134	U141	U151
U154	U159	U161	U165	U167	U168
U169	U170	U171	U172	U179	U183
U185	U187	U188	U191	U192	U196
U203	U207	U208	U209	U210	U211
U213	U218	U219	U220	U226	U227
U228	U239	U247	U359	-	-

Section 11: Comments

In 2003, 4,112 pounds of fluorescent lamps, 1,027 pounds of nickel-cadmium batteries, and 1,236 pounds of lead-acid batteries were shipped off-site for recycle.

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



OR ENTER GENERATOR ID NUMBER
PLACE PREPRINTED LABEL HERE

OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CRANKCASE OIL		
B. Hazardous waste codes D018			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	232	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 D: W409 - OILY SLUDGE

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency
2003 Annual Hazardous Waste Report

 OR ENTER GENERATOR ID NUMBER
PLACE PREPRINTED LABEL HERE
OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED GRAPHITE		
B. Hazardous waste codes D005 D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



OR ENTER GENERATOR ID NUMBER
 PLACE PREPRINTED LABEL HERE

OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) FLOOR SUMP CLEANOUT SLUDGE		
B. Hazardous waste codes D018 D019 D039 D040			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1172	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 D: W409 - OIL/SOLVENT SLUDGE

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

 OR ENTER GENERATOR ID NUMBER
 PLACE PREPRINTED LABEL HERE
OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) PAINT THINNER RAGS		
B. Hazardous waste codes F002 F003			
More... <input type="checkbox"/>			
C. Source Code G32	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H Quantity treated, disposed or recycled in 2003		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H Quantity treated, disposed or recycled in 2003		

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 20
Site 2			
Site 3			

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:		
		1. a greater than 90 day storage unit.....	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
		<input type="checkbox"/> a. generated during 2003		
		<input type="checkbox"/> b. generated prior to 2003		
		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				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 C: G19 - RAGS FROM PAINT SHOP

Extra Waste Codes:

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2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) AEROSOL CANS		
B. Hazardous waste codes D001			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W219

SECTION 2	A. Quantity generated in 2002 1498	B. Quantity generated in 2003 1014	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;">X a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			X b. generated prior to 2003			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 2003																			
X b. generated prior to 2003																			
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	2473	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 D: W219 - MISCELLANEOUS AEROSOLS

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

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) XYLENE		
B. Hazardous waste codes D001			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W203

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	83	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SPENT NICKEL-CADMIUM BATTERIES		
B. Hazardous waste codes D002 D008			
More... <input type="checkbox"/>			
C. Source Code G16	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W309

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 40	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;">X a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			X b. generated prior to 2003			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 2003																			
X b. generated prior to 2003																			
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	79	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

5361

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) MERCURY THERMOMETER SPILL CLEANUP MATERIAL		
B. Hazardous waste codes D006 D008 D009			
More... <input type="checkbox"/>			
C. Source Code G32	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W310

SECTION 2	A. Quantity generated in 2002 46	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> YES (continue to box B) - See Section 3 <input type="checkbox"/> NO (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped TDR000005397	C. Management Method H129	D. Total quantity shipped in 2003 46
Site 2			
Site 3			

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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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 3, BOX C: H129 - AMALGAMATION

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SOLIDS CONTAMINATED BY LAB SAMPLES AND MATERIALS		
B. Hazardous waste codes F003			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	D. Was this waste treated, disposed of, or recycled ON-SITE Yes <input type="checkbox"/> (continue to system 1) No X (skip to SEC3)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	239	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

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SECTION 1	A. Hazardous waste description (60 characters max.) PAINT		
B. Hazardous waste codes D001 F001 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W604

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	
			Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	345	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) LIQUID AND SOLID WASTE SAMPLES		
B. Hazardous waste codes D006 D007 D008 F002			
More... <input type="checkbox"/>			
C. Source Code G22	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W609

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	25	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 D: W609 – PCB-CONTAINING SLUDGE SAMPLES**

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

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) USED PAINT THINNER		
B. Hazardous waste codes D001 D008 D035 F003 F005			
More... <input type="checkbox"/>			
C. Source Code G19	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H Quantity treated, disposed or recycled in 2003			<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H Quantity treated, disposed or recycled in 2003		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1000	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 D: W409 – PAINT THINNER SLUDGE (NON-PUMPABLE)

SECTION 1, BOX C: G19 – GENERATED FROM SITE CONSTRUCTION AND MAINTENANCE ACTIVITIES

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) KEROSENE		
B. Hazardous waste codes D001			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W211

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 233	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 2003			<input type="checkbox"/> b. generated prior to 2003			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 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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	233	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:

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED SOLVENT		
B. Hazardous waste codes D001 D035			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W203

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	3	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.**

Extra Waste Codes:

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2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) PAINT		
B. Hazardous waste codes D001 D007 D008 F002 F003 F005			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W604

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 1607
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	844	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) PAINT - GREY EPOXY		
B. Hazardous waste codes D001 D006			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W209

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	274	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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OhioEPA

State of Ohio Environmental Protection Agency

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SOIL BORING #1508		
B. Hazardous waste codes F002 F005			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W301

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	D. Was this waste treated, disposed of, or recycled ON-SITE Yes <input type="checkbox"/> (continue to system 1) No X (skip to SEC3)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	4807	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) KEROSENE (DIESEL FUEL)/SLUDGE FROM UST #3		
B. Hazardous waste codes D001 D018			
More... <input type="checkbox"/>			
C. Source Code G45	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	69	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 D: W409 – SLUDGE (KEROSENE/DIESEL FUEL/WATER MIX)

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

Extra Waste Codes:

OhioEPA

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OIL		
B. Hazardous waste codes D007 D008 D009			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1209	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 D: W409 – OILY SLUDGE (NON-PUMPABLE)

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

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) MERCURY SPILL CLEANUP AND OTHER MERCURY-CONTAMINATED MATERIALS		
B. Hazardous waste codes D009			
More... <input type="checkbox"/>			
C. Source Code G32	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W310

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	13	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:	<p>SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.</p>
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SOIL BORING #1594 - FROM NORTHWEST CORNER OF BUILDING 12		
B. Hazardous waste codes F002 More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W301

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	476	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:	<p>SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.</p>
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OILY SLUDGE FROM FLOOR DRAIN		
B. Hazardous waste codes D018 D019 D021 D028 D039 D040 D043			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W603

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 822
Site 2			
Site 3			

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 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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) LEAD-BASED PAINT CHIPS		
B. Hazardous waste codes D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 2794	B. Quantity generated in 2003 497	C. UOM P	Density	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 Management Method H			On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)			
Site 1	B. EPA ID number of facility to which waste was shipped TXD988088464	C. Management Method H111	D. Total quantity shipped in 2003 2794	
Site 2				
Site 3				

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;">X</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;">X a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure .</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;">X</td> </tr> </table>				YES	NO	1. a greater than 90 day storage unit.....	X	<input type="checkbox"/>	X a. generated during 2003			X b. generated prior to 2003			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"/>																	
X a. generated during 2003																			
X b. generated prior to 2003																			
2. an inactive disposal unit undergoing closure .	<input type="checkbox"/>	X																	
B. Storage or disposal method	Handling code	Amount	UOM	Density															
UNIT 1	S01	585	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 D: W319 – LEAD-BASED PAINT CHIPS**

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

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SECTION 1	A. Hazardous waste description (60 characters max.) LEAD-CONTAINING MATERIAL		
B. Hazardous waste codes D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W307

SECTION 2	A. Quantity generated in 2002 1514	B. Quantity generated in 2003 4055	C. UOM 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 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;">X a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure .</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input type="checkbox"/> b. generated prior to 2003			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 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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	4055	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:

Extra Waste Codes:

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SECTION 1	A. Hazardous waste description (60 characters max.) BLACK DRUM ENAMEL		
B. Hazardous waste codes D001			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W209

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	496	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CLEAR DRUM LINER PAINT		
B. Hazardous waste codes D001			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W209

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1254	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

 <p>OR ENTER GENERATOR ID NUMBER PLACE PREPRINTED LABEL HERE</p> <p><u>OH6890008976</u></p>
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SPENT ACTIVATED CARBON FROM PERCHED WATER PROJECT		
B. Hazardous waste codes F002 F005			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W310

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 3235	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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;">X a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 2003</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 2003			X b. generated prior to 2003			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 2003																			
X b. generated prior to 2003																			
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	6953	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) MERCURY-CONTAMINATED FLOOR TILE AND PIPE INSULATION		
B. Hazardous waste codes D009			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	2	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SEWAGE TREATMENT PLANT SLUDGES		
B. Hazardous waste codes F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	34	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 D: W409 - DIGESTER SLUDGE

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

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) NON-OILY SUMP CLEANOUT MATERIAL		
B. Hazardous waste codes D007 D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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; 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;">X</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 2003</td> <td></td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 2003</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;">X</td> </tr> </table>				YES	NO		1. a greater than 90 day storage unit.....	X	<input type="checkbox"/>		<input type="checkbox"/> a. generated during 2003				X b. generated prior to 2003				2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input type="checkbox"/>	X
	YES	NO																						
1. a greater than 90 day storage unit.....	X	<input type="checkbox"/>																						
<input type="checkbox"/> a. generated during 2003																								
X b. generated prior to 2003																								
2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input type="checkbox"/>	X																					
B. Storage or disposal method	Handling code	Amount	UOM	Density																				
UNIT 1	S01	4	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 D: W319 - SUMP SLUDGE

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) HIGH-LEVEL CLEANING RESIDUES		
B. Hazardous waste codes D006 D011			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u> On-site Management Method H	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003		<u>On-site system 2</u> On-site Management Method H	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X NO (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	6	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 D: W319 – URANIUM RESIDUES**

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

Extra Waste Codes:

1888
OhioEPA

5361

State of Ohio Environmental Protection Agency

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SCRAP U308 FROM OXIDATION FURNACE #1		
B. Hazardous waste codes F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W304

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td> <input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td> <input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure .</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED SOLVENT		
B. Hazardous waste codes D001 D005 D007 D008 D009 D010 D011 D018 D019 D035 F002 F003 F005			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W204

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 30808
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure .</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1784	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

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 2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED INSOLUBLE OIL		
B. Hazardous waste codes D008 D009 D039 D040 F001 F002 F003 F005			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W206

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure .</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	64	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.**

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) MOP HEADS AND PADS CONTAMINATED WITH SOLVENT		
B. Hazardous waste codes F002			
More... <input type="checkbox"/>			
C. Source Code G32	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 73
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	4	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.**

Extra Waste Codes:

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2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) NON-OILY CLEANOUT SLUDGES FOR ROASTING		
	B. Hazardous waste codes D039		
	More... <input type="checkbox"/>		
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W519

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	5407	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 D: W519 - INORGANIC SLUDGE (NON-PUMPABLE)**

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

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SUMP WASTE FROM PLANT 1 PAINTING BOOTH		
B. Hazardous waste codes D001			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X NO (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	101	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 D: W409 - PAINT/SOLVENT SLUDGE (NON-PUMPABLE)

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

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SPILL CLEANUP OF OIL AND GAS FROM GASOLINE ENGINES		
B. Hazardous waste codes D018			
More... <input type="checkbox"/>			
C. Source Code G32	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W310

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	128	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) URANYL NITRATE - EXCESS ANALYTICAL BY-PRODUCT		
B. Hazardous waste codes D002			
More... <input type="checkbox"/>			
C. Source Code G22	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W103

SECTION 2	A. Quantity generated in 2002 334	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	334	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) BROKEN LEAD-ACID BATTERIES		
B. Hazardous waste codes D002 D008			
More... <input type="checkbox"/>			
C. Source Code G16	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W309

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 1619	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 2003</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 2003			X b. generated prior to 2003			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 2003																			
X b. generated prior to 2003																			
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	1716	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

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SECTION 1	A. Hazardous waste description (60 characters max.) NON-BURNABLE TRASH		
B. Hazardous waste codes F001 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	13	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

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SECTION 1	A. Hazardous waste description (60 characters max.) TCLP EXTRACT		
B. Hazardous waste codes D018 D021 D035 D038 D039 D040 D043 F002 F005			
More... <input type="checkbox"/>			
C. Source Code G22	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W113

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	3	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

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SECTION 1	A. Hazardous waste description (60 characters max.) USED MINERAL SPIRITS		
B. Hazardous waste codes D001 D018			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W203

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 226	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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;">X a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 2003			<input type="checkbox"/> b. generated prior to 2003			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 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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	226	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"/>															

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SECTION 1	A. Hazardous waste description (60 characters max.) SPENT FUEL		
B. Hazardous waste codes D001 D018			
More... <input type="checkbox"/>			
C. Source Code G16	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W211

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 564	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;">X a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure .</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input type="checkbox"/> b. generated prior to 2003			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 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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	564	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"/>															

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SECTION 1	A. Hazardous waste description (60 characters max.) HF TANK CLEANOUT MATERIAL		
B. Hazardous waste codes D007 U134			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	4	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.**

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SECTION 1	A. Hazardous waste description (60 characters max.) SOIL CUTTINGS FROM FIRING RANGE		
B. Hazardous waste codes D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W301

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	
			Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	816	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

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SECTION 1	A. Hazardous waste description (60 characters max.) EPOXY-PRIME COAT LDC-1000		
B. Hazardous waste codes D001 D035			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	148	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 D: W409 – PAINT SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) PAINT BITUMASTIC 300 M A&B COAL TAR COATING		
B. Hazardous waste codes D001 D018 D026			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W604

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 X (skip to SEC3)
Onsite system 1 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H Quantity treated, disposed or recycled in 2003			On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H Quantity treated, disposed or recycled in 2003		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	73	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.**

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SOLIDIFIED LAB WASTE		
B. Hazardous waste codes F001 F002 F005			
More... <input type="checkbox"/>			
C. Source Code G22	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	
		Quantity treated, disposed or recycled in 2003		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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 D: W319 – CEMENTED SOLIDS**

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CHLORINATED SOLVENTS		
B. Hazardous waste codes D007 F001 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W604

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 1118
Site 2			
Site 3			

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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) USED MERCURY FROM MISCELLANEOUS EQUIPMENT		
B. Hazardous waste codes D009			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W320

SECTION 2	A. Quantity generated in 2002 37	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped TDR000005397	C. Management Method H129	D. Total quantity shipped in 2003 37
Site 2			
Site 3			

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 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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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 3, BOX C: H129 - AMALGAMATION**

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) FLOOR COATING BASE		
B. Hazardous waste codes D001			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W209

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

1005

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	701	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTACT WASTE FROM CTC LAB		
B. Hazardous waste codes D007 D008 D009 D039 F001 F002 F005			
More... <input type="checkbox"/>			
C. Source Code G22	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	2	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

 <p>OR ENTER GENERATOR ID NUMBER PLACE PREPRINTED LABEL HERE</p> <p><u>OH6890008976</u></p>
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) BROKEN GLASS AND OLD FLUORESCENT LIGHT BULBS		
B. Hazardous waste codes D009			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W320

SECTION 2	A. Quantity generated in 2002 246	B. Quantity generated in 2003 74	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	D. Was this waste treated, disposed of, or recycled ON-SITE Yes <input type="checkbox"/> (continue to system 1) No X (skip to SEC3)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;">X a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure .</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			X b. generated prior to 2003			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 2003																			
X b. generated prior to 2003																			
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	320	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

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State of Ohio Environmental Protection Agency
2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) ABANDONED SUMP WASTE WATER		
B. Hazardous waste codes D008 D039			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W603

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 36	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)
<u>Onsite system 1</u> On-site Management Method H	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003	<u>On-site system 2</u> On-site Management Method H RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 2003			<input type="checkbox"/> b. generated prior to 2003			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 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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	36	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:

Extra Waste Codes:

State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) - CONCRETE FROM ABANDONED PILOT PLANT SUMP		
B. Hazardous waste codes F002 F003			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	7	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.). GASOLINE/DIESEL FUEL FILTERS		
B. Hazardous waste codes D018			
More... <input type="checkbox"/>			
C. Source Code G16	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W307

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	838	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED PALLETS		
B. Hazardous waste codes F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	13	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.**

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) PADS, ANTI-CS AND ABSORBANTS		
B. Hazardous waste codes F001 F002 F003 F005 U019 U123 U210 U211			
More... <input type="checkbox"/>			
C. Source Code G32	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	
		Quantity treated, disposed or recycled in 2003		

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 522
Site 2			
Site 3			

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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

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2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) THORIUM NITRATE SOLUTION		
B. Hazardous waste codes D002 D006 D007			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W103

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	6	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SCABBLED CONCRETE FROM DETREX STILL CLOSURE		
B. Hazardous waste codes F001 F002			
More... <input type="checkbox"/>			
C. Source Code G41	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	382	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 D: W319 – SCABBLED CONCRETE**

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

 <p>OR ENTER GENERATOR ID NUMBER PLACE PREPRINTED LABEL HERE</p> <p><u>OH6890008976</u></p>
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) DETREX STILL TANK (INCLUDING ASBESTOS COVER)		
B. Hazardous waste codes F001 F002			
More... <input type="checkbox"/>			
C. Source Code G41	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W307

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	D. Was this waste treated, disposed of, or recycled ON-SITE Yes <input type="checkbox"/> (continue to system 1) No X (skip to SEC3)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 956
Site 2			
Site 3			

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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"> <input type="checkbox"/> a. generated during 2003 <input type="checkbox"/> b. generated prior to 2003 </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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003 <input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>														
<input type="checkbox"/> a. generated during 2003 <input type="checkbox"/> b. generated prior to 2003																
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				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:

Extra Waste Codes:

State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SCRAP METAL CONTAMINATED WITH F-LISTED SOLVENT		
B. Hazardous waste codes F002 F005			
More... <input type="checkbox"/>			
C. Source Code G49	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W307

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 33736
Site 2			
Site 3			

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: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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	458	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 C: G49 – WASTE GENERATED FROM INTEGRATED RCRA CLOSURE/CERCLA REMOVAL ACTION TO REMEDIATE A HAZARDOUS WASTE MANAGEMENT UNIT

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

Extra Waste Codes:

OR ENTER GENERATOR ID NUMBER
PLACE PREPRINTED LABEL HERE
OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTACT WASTE CONTAMINATED WITH F-LISTED SOLVENT		
B. Hazardous waste codes F002 F005			
More... <input type="checkbox"/>			
C. Source Code G49	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1351	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 C: G49 - WASTE GENERATED FROM INTEGRATED RCRA CLOSURE/CERCLA REMOVAL ACTION TO REMEDIATE A HAZARDOUS WASTE MANAGEMENT UNIT

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SEDIMENT/SLUDGES FROM OPEN TOP TANK AT FIRE TRAINING FACILITY		
B. Hazardous waste codes D007 D008 D018 D029 D030 D032 D033 D040 F002 F005 More... <input type="checkbox"/>			
C. Source Code G49	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W609

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 5973
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	4062	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:	<p>SECTION 1, BOX C: G49 – WASTE GENERATED FROM INTEGRATED RCRA CLOSURE/CERCLA REMOVAL ACTION TO REMEDIATE A HAZARDOUS WASTE MANAGEMENT UNIT</p> <p>SECTION 1, BOX D: W609 – SOLVENT-CONTAMINATED SLUDGE</p> <p>SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.</p>
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Extra Waste Codes:	
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State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) PETROLEUM CONTAMINATED SOIL FROM THE POND AREA OF THE FIRE TRAINING FACILITY		
B. Hazardous waste codes F002 F005			
More... <input type="checkbox"/>			
C. Source Code G49	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W301

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X YES (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 5708
Site 2			
Site 3			

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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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 C: G49 - WASTE GENERATED FROM INTEGRATED RCRA CLOSURE/CERCLA REMOVAL ACTION TO REMEDIATE A HAZARDOUS WASTE MANAGEMENT UNIT

Extra Waste Codes:

State of Ohio Environmental Protection Agency
2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) PETROLEUM CONTAMINATED SOIL FROM THE FIRE TRAINING FACILITY		
B. Hazardous waste codes F002 F005 More... <input type="checkbox"/>			
C. Source Code G49	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W301

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	D. Was this waste treated, disposed of, or recycled ON-SITE Yes <input checked="" type="checkbox"/> (continue to system 1) No <input type="checkbox"/> (skip to SEC3)
Onsite system 1 RCRA-exempt unit? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		
On-site Management Method H135	Quantity treated, disposed or recycled in 2003 17		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 60695
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	563	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:	<p>SECTION 1, BOX C: G49 – WASTE GENERATED FROM INTEGRATED RCRA CLOSURE/CERCLA REMOVAL ACTION TO REMEDIATE A HAZARDOUS WASTE MANAGEMENT UNIT</p> <p>SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.</p>
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Extra Waste Codes:	
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State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

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 WASTES		
B. Hazardous waste codes F002 F003			
More... <input type="checkbox"/>			
C. Source Code G22	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SOIL EXTRACT WASTE		
B. Hazardous waste codes F002 F003			
More... <input type="checkbox"/>			
C. Source Code G22	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W301

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 6
Site 2			
Site 3			

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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

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2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) MISCELLANEOUS SAMPLES		
B. Hazardous waste codes D007			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	38	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 D: W319 – MISCELLANEOUS URANIUM COMPOUNDS**

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SOLID/SLUDGE FROM LIQUID MIXED WASTE TANK		
B. Hazardous waste codes D001 D004 D006 D007 D008 D010 D011 D018 D019 D021 D022 D026 D028 D029 D035 D038 D039 D040 D043 More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 On-site Management Method H	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003	On-site system 2 On-site Management Method H	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	913	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 D: W409 – SLUDGES CONTAMINATED WITH HALOGENATED AND NON-HALOGENATED SOLVENTS (NON-PUMPABLE)

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

Extra Waste Codes:

OhioEPA

5361

State of Ohio Environmental Protection Agency

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) WATER FROM SOFT SOLIDS MIX		
B. Hazardous waste codes D005 D008 D009 D018 D019 D021 D035 D039 D040 F001 F002 F003 F005 U019 U210 U211			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W113

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	301	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) RIGID SOLIDS MIX FOR TREATMENT		
B. Hazardous waste codes D018 D039 F001 F002 F003 F005 U019 U210 U211			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u> On-site Management Method H	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003		<u>On-site system 2</u> On-site Management Method H	
		RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003		

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped TXD988088464	C. Management Method H111	D. Total quantity shipped in 2003 174
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure .</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	370	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) NON-CORROSIVE WASTES FOR TREATMENT		
B. Hazardous waste codes D001 D018 D019 D021 D035 D039 D040 F001 F002 F003 F005 U019 U210 U211 More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u> On-site Management Method H	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003		<u>On-site system 2</u> On-site Management Method H	
		RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	76	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 D: W409 – ORGANIC SLUDGE (NON-PUMPABLE)

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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PLACE PREPRINTED LABEL HERE

OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) NON-DEBRIS SOLIDS FOR TREATMENT		
B. Hazardous waste codes D007 D008 F001 F002 F003 F005 U019 U211			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 3386
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1616	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 D: W319 – GRANULAR SOLIDS, FLOOR SWEEPINGS AND SLUDGES**

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) NON-DEBRIS SOLIDS FOR TREATMENT		
B. Hazardous waste codes D008 D018 D019 D021 D035 D040 F001 F002 U210			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	
			Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 3098
Site 2			
Site 3			

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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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 D: W319 - GRANULAR SOLIDS, FLOOR SWEEPINGS AND SLUDGES

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SLUDGES FROM THE IGNITABLE LIQUID TANK - BATCH 4		
B. Hazardous waste codes D001 D004 D007 D008 D010 D011 D018 D019 D035 D039 D040 F001 F002 F003 F005 U019 More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 1142
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1506	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 D: W409 – HALOGENATED/NON-HALOGENATED SOLVENT SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) THORIUM NITRATE SOLUTION		
B. Hazardous waste codes D002 D005 D007 D008			
More... <input type="checkbox"/>			
C. Source Code G22	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W103

SECTION 2	A. Quantity generated in 2002 173	B. Quantity generated in 2003 0	C. UOM 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	189	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SCABBLED CONCRETE FROM HWMU #3 CLOSURE		
B. Hazardous waste codes F002			
More... <input type="checkbox"/>			
C. Source Code G41	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	
			Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X NO (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	4	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 D: W319 - SCABBLED CONCRETE**

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

Extra Waste Codes:

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 2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) LEAD AND DEBRIS		
B. Hazardous waste codes D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W307

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 766	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 2003			<input type="checkbox"/> b. generated prior to 2003			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 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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	766	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:

Extra Waste Codes:

State of Ohio Environmental Protection Agency
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) TBP/KEROSENE FROM TANK D1-7		
B. Hazardous waste codes D019 D022 D039			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X NO (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	467	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:	<p>SECTION 1, BOX D: W409 – SOLVENT SLUDGE (NON-PUMPABLE)</p> <p>SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.</p>
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Extra Waste Codes:	
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OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) FILTERED SOLIDS, PLANT 4 DECON WATER		
B. Hazardous waste codes D006 D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	10	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:	<p>SECTION 1, BOX D: W319 - INORGANIC SLUDGE</p> <p>SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEDERAL FACILITY COMPLIANCE ACT (FFCA) SITE TREATMENT PLAN.</p>
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Extra Waste Codes:	
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State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



OR ENTER GENERATOR ID NUMBER
PLACE PREPRINTED LABEL HERE

OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) ALUMINIM FIBERED ROOF COATING		
B. Hazardous waste codes D001 D035			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W209

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	48	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) TANK W-7 RESIDUE		
B. Hazardous waste codes D002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W519

SECTION 2	A. Quantity generated in 2002 100	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	100	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 D: W519 - TANK CLEANOUT

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SUMP/TRENCH SLUDGES FROM BUILDING 13A		
B. Hazardous waste codes D039 D040			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W519

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 4180	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 2003</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 2003			X b. generated prior to 2003			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 2003																			
X b. generated prior to 2003																			
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	6245	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 D: W519 - SUMP CLEANOUT**

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

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

OR ENTER GENERATOR ID NUMBER
PLACE PREPRINTED LABEL HERE

OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) - CONTAMINATED ANTI-CS FROM BATCH LIQUID TANK #5		
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. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure .</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	184	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

 <p>OR ENTER GENERATOR ID NUMBER PLACE PREPRINTED LABEL HERE</p> <p><u>OH6890008976</u></p>
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) BATCH 6 TANK BOTTOMS		
B. Hazardous waste codes D008 D018 D019 D022 D026 D029 D035 D038 D039 D040 D043 F001 F002 F003 F005			
More... <input type="checkbox"/>			
C. Source Code G14	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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 D: W409 – OIL/SOLVENT SLUDGE (NON-PUMPABLE)

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

Extra Waste Codes:

OhioEPA

5361

State of Ohio Environmental Protection Agency
2003 Annual Hazardous Waste Report

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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. Source Code G14	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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 D: W409 – OIL/SOLVENT SLUDGE (NON-PUMPABLE)

SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEDERAL FACILITY COMPLIANCE ACT (FFCA_{ct}) SITE TREATMENT PLAN.

Extra Waste Codes:

State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

OR ENTER GENERATOR ID NUMBER
 PLACE PREPRINTED LABEL HERE

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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. Source Code G14	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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 D: W409 - OIL/SOLVENT SLUDGE (NON-PUMPABLE)

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) USED ACETONE AND NITRIC ACID		
B. Hazardous waste codes D001 D002			
More... <input type="checkbox"/>			
C. Source Code G22	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W203

SECTION 2	A. Quantity generated in 2002 135	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	804	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SOLVENT AND OIL CONSOLIDATION		
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. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W206

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure .</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	926	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

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2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) DISCARD PROCESS RESIDUES FROM THE PILOT PLANT		
B. Hazardous waste codes D010			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	8	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 D: W319 – URANIUM PROCESS RESIDUES**

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

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) PLANT 1 SAMPLE LINE RINSEATE		
B. Hazardous waste codes F001 F002 F003 F005			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W101

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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)
<u>Onsite system 1</u> On-site Management Method H	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003		<u>On-site system 2</u> On-site Management Method H	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	7	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

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2003 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 U047 U048 U050 U052 U055 U057 U060 U061 U066 U068 U070 U072 U073 U075 U076 U077 U078 U079 More...X			
C. Source Code G22	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W004

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes: 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

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) PCB-CONTAMINATED CONTACT WASTE		
B. Hazardous waste codes F001 F002 F003 F005 U019			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 364	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 1110
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 2003</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 2003			X b. generated prior to 2003			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 2003																			
X b. generated prior to 2003																			
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	807	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OPERABLE UNIT 4 VIT PLANT EXCESS SURROGATE SLURRY		
B. Hazardous waste codes D005 D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W505

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	
			Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped TXD988088464	C. Management Method H111	D. Total quantity shipped in 2003 620
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1429	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:

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) BETZ FERROSPERSE		
B. Hazardous waste codes D002			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W110

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	428	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) TREATED HF		
B. Hazardous waste codes U134			
More... <input type="checkbox"/>			
C. Source Code G25	Report the Management Method Code if the Source code is G25	Management Method code H121	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 23462
Site 2			
Site 3			

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 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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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 C: W319 – STABILIZED HYDROGEN FLUORIDE**

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2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SULPHURIC ACID SLUDGE AND PIPING		
B. Hazardous waste codes D002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W103

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X NO (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	2382	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CADMIUM COILS		
B. Hazardous waste codes D006			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W307

SECTION 2	A. Quantity generated in 2002 1	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1	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:	<p>SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.</p>
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SOIL AND GRAVEL FROM THE TRANE INCINERATOR		
B. Hazardous waste codes D008 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W301

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	2525	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) DUST AND BAGS FROM TRANE INCINERATOR		
B. Hazardous waste codes D008 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

Form GM (Continued)

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;">X</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 2003</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 2003			X b. generated prior to 2003			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 2003																			
X b. generated prior to 2003																			
2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	X																	
B. Storage or disposal method	Handling code	Amount	UOM	Density															
UNIT 1	S01	1732	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 D: W319 - DUST COLLECTOR RESIDUES

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency
2003 Annual Hazardous Waste Report

OR ENTER GENERATOR ID NUMBER
PLACE PREPRINTED LABEL HERE
OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONSOLIDATED SAMPLES OF WATER AND SUMP LIQUOR		
B. Hazardous waste codes F002 F005			
More... <input type="checkbox"/>			
C. Source Code G22	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> NO (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	15	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 D: W409 – SUMP SLUDGE

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONSOLIDATED SAMPLES - WET SUMP/FILTER CAKE		
B. Hazardous waste codes F002 F005			
More... <input type="checkbox"/>			
C. Source Code G22	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	23	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 D: W409 - SUMP/FILTER CAKE

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONSOLIDATED SAMPLES - NON-RECOVERABLE TRASH		
B. Hazardous waste codes F002 F005			
More... <input type="checkbox"/>			
C. Source Code G22	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code. W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 166
Site 2			
Site 3			

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 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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

OR ENTER GENERATOR ID NUMBER
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) LEAD AND ASBESTOS WIRE INSULATION		
B. Hazardous waste codes D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SLUDGE FROM THE TRANE INCINERATOR		
B. Hazardous waste codes D008 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	84	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 D: W409 – OILY SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:

OhioEPA

5361

State of Ohio Environmental Protection Agency
2003 Annual Hazardous Waste Report

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OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OIL AND GREASE RESIDUES FROM THE TRANE INCINERATOR		
B. Hazardous waste codes D008 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W206

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	213	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) TRANE INCINERATOR PARTS		
B. Hazardous waste codes D008 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W307

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 1642
Site 2			
Site 3			

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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

OR ENTER GENERATOR ID NUMBER
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Form GM - Generation and Management

SECTION 1	A...Hazardous waste description (60 characters max.) DEBRIS FROM DUST COLLECTORS		
B. Hazardous waste codes D008 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1445	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTACT WASTE		
B. Hazardous waste codes F002 F005			
More... <input type="checkbox"/>			
C. Source Code G22	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	392	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) LIQUIDS DRAINED DURING AEROSOL CAN PUNCTURING		
B. Hazardous waste codes D001 D007 D008 D035			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W209

SECTION 2	A. Quantity generated in 2002 338	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1112	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

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2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) PAINT WASTE FROM AEROSOL CAN PUNCTURING PROJECT		
B. Hazardous waste codes D008 D035 F002			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W209

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	306	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) LIQUID PAINT		
B. Hazardous waste codes D001 D006 D007 D008			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W209

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	145	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) BARIUM CARBONATE		
B. Hazardous waste codes D005			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 8047
Site 2			
Site 3			

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 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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

State of Ohio Environmental Protection Agency
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) 8M HYDROCHLORIC ACID FROM ON-SITE LAB		
B. Hazardous waste codes D002 More... <input type="checkbox"/>			
C. Source Code G22	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W103

SECTION 2	A. Quantity generated in 2002 451	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1320	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) LOW-LEVEL LIQUIDS FROM THE LEGACY PROJECTS		
B. Hazardous waste codes D039 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W204

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1558	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) URANYL NITRATE HEXAHYDRATE		
B. Hazardous waste codes D002 D007 D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W103

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1149	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

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2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) USED MOTOR OIL		
B. Hazardous waste codes D018			
More... <input type="checkbox"/>			
C. Source Code G16	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W206

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	267	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

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2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SODIUM HYDROXIDE SLUDGE		
B. Hazardous waste codes D002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1747	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 D: W319 – SODIUM HYDROXIDE SLUDGE (NON-PUMPABLE)**

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

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) TRASH FROM ORGANIC EXTRACTION PROJECT		
B. Hazardous waste codes F002 F005			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 3036
Site 2			
Site 3			

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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) VARIOUS ADHESIVES		
B. Hazardous waste codes D001			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W210

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X NO (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure .</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	123	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.**

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) TRASH FROM BULKING BATCH 8		
B. Hazardous waste codes F001 F002 F003 F005 U019 U210 U211			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u> On-site Management Method H	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003		<u>On-site system 2</u> On-site Management Method H Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	406	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

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2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OIL SATURATED RAGS FROM LEGACY TRASH SORTING PROJECT		
B. Hazardous waste codes D001 D006 D007 D008 D009 D010 D018 D019 D021 D035 D039 D040 F002 F003 F005 More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	120	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) WASTE PAINT THINNERS FROM LEGACY-TRASH SORTING		
B. Hazardous waste codes D001 D008 D009 F002 F005			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W209

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	D. Was this waste treated, disposed of, or recycled ON-SITE Yes <input type="checkbox"/> (continue to system 1) No X (skip to SEC3)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H Quantity treated, disposed or recycled in 2003		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H Quantity treated, disposed or recycled in 2003		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	470	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) PAINT FROM LEGACY TRASH PROJECT		
B. Hazardous waste codes D001 D006 D007 D008 D035 D043			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W209

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure .</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1126	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) NON-EMPTY CANS OF DRIED PAINT		
B. Hazardous waste codes D007 D008 D035			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> NO (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	376	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 D: W409 - DRIED PAINT

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

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OIL FROM LEGACY TRASH PROJECT		
B. Hazardous waste codes D001 D005 D006 D007 D008 D009 D010 F002 F003 F005			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W206

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	67	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:

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SLUDGES FROM T-5/T-6 CLOSURE		
B. Hazardous waste codes D022 D028 D029 F001 F002 F003 F005			
More... <input type="checkbox"/>			
C. Source Code G41	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	659	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 D: W409 – SOLVENT SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) LIQUID PAINT FROM BUILDING 71		
B. Hazardous waste codes D001 D006 D007 D008			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W209

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	69	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:	<p>SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.</p>
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Extra Waste Codes:	
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State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) ADHESIVES FROM BUILDING 71		
B. Hazardous waste codes D001			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W210

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	<u>On-site system 2</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003	On-site Management Method H	Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X NO (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	28	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SULFURIC ACID		
B. Hazardous waste codes D002 D008 More... <input type="checkbox"/>			
C. Source Code G16	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W103

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 195	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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;">X a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 2003			<input type="checkbox"/> b. generated prior to 2003			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 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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	195	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:

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SECTION 1	A. Hazardous waste description (60 characters max.) ROLLER INK		
B. Hazardous waste codes D001			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W209

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	564	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) RCRA HAZARDOUS ADHESIVES		
B. Hazardous waste codes D001 D035			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W210

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	905	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) DUST COLLECTOR RESIDUES		
B. Hazardous waste codes D005 D006 D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 80%;"></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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	152	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 D: W319 - DUST COLLECTOR RESIDUES**

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

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SECTION 1	A. Hazardous waste description (60 characters max.) CUMENE HYDROPEROXIDE		
B. Hazardous waste codes U096			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W113

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) KEROSENE/CARBONATE WATER		
B. Hazardous waste codes D002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W211

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	35	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



OR ENTER GENERATOR ID NUMBER
PLACE PREPRINTED LABEL HERE

OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) DUST COLLECTOR RESIDUES FROM PLANT 6		
B. Hazardous waste codes D006 D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	229	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 D: W319 - DUST COLLECTOR RESIDUES

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



OR ENTER GENERATOR ID NUMBER
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SUMP SLUDGE FROM PLANT 7		
B. Hazardous waste codes D006 D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> NO (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	5	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 D: W319 - SUMP SLUDGE

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

Extra Waste Codes:

OR ENTER GENERATOR ID NUMBER
PLACE PREPRINTED LABEL HERE

OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) THORIUM-CONTAMINATED PAINT CHIPS		
B. Hazardous waste codes D007 D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped TXD988088464	C. Management Method H111	D. Total quantity shipped in 2003 152
Site 2			
Site 3			

<p>SECTION 4</p> <p>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.</p> <p>Otherwise, skip Section 4.</p>		<p style="text-align: center;">On-site Waste Storage and Inactive Disposal Units</p> <p>A. As of December 31, did any of this waste remain on-site in:</p> <table style="width:100%; border: none;"> <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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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 D: W319 – PAINT CHIPS**

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

OR ENTER GENERATOR ID NUMBER
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OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) THORIUM-CONTAMINATED LIQUID PAINT		
B. Hazardous waste codes D001			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W209

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	D. Was this waste treated, disposed of, or recycled ON-SITE Yes <input type="checkbox"/> (continue to system 1) No X (skip to SEC3)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	135	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

OR ENTER GENERATOR ID NUMBER
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OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) DECANT WATER FROM THE PLANT 6 DRUM CRUSHER		
B. Hazardous waste codes D018			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	709	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 D: W409 – ORGANIC SLUDGE (NON-PUMPABLE)

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



OR ENTER GENERATOR ID NUMBER
PLACE PREPRINTED LABEL HERE

OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SCRAP THORIUM DIOXIDE		
B. Hazardous waste codes D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped TXD988088464	C. Management Method H111	D. Total quantity shipped in 2003 1144
Site 2			
Site 3			

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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

 <p>OR ENTER GENERATOR ID NUMBER PLACE PREPRINTED LABEL HERE</p> <p><u>OH6890008976</u></p>

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) THORIUM DIOXIDE POWDER		
B. Hazardous waste codes D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped TXD988088464	C. Management Method H111	D. Total quantity shipped in 2003 14712
Site 2			
Site 3			

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: 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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SCRAP SALTS AND FLOOR SWEEPINGS		
B. Hazardous waste codes D007			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped TXD988088464	C. Management Method H111	D. Total quantity shipped in 2003 993
Site 2			
Site 3			

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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

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2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous-waste description (60 characters max.) MISCELLANEOUS THORIUM SAMPLES		
B. Hazardous waste codes D005 D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 137	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped TXD988088464	C. Management Method H111	D. Total quantity shipped in 2003 1990
Site 2			
Site 3			

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: 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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

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 2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CAUSTIC SOLUTION FOR WASTEWATER TREATMENT		
B. Hazardous waste codes D002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W110

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	811	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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 2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) WATER/OIL/SLUDGE FROM PLANT 6		
B. Hazardous waste codes D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W206

SECTION 2	A. Quantity generated in 2002 144	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure .</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	781	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

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2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) USED OIL FROM PLANT 6 ROLLING MILL		
B. Hazardous waste codes D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	D. Was this waste treated, disposed of, or recycled ON-SITE Yes <input type="checkbox"/> (continue to system 1) No X (skip to SEC3)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X NO (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	2298	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 D: W409 – OILY SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:

OhioEPA

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2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) RADIUM ANALYSIS WASTE		
B. Hazardous waste codes D002 D008			
More... <input type="checkbox"/>			
C. Source Code G22	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W103

SECTION 2	A. Quantity generated in 2002 75	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	75	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OR ENTER GENERATOR ID NUMBER
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) ACID WASTE WITH METHANOL FROM LAB ANALYSES		
B. Hazardous waste codes D002 D007 D008			
More... <input type="checkbox"/>			
C. Source Code G22	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W204

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right; width:10%;">YES</td> <td style="text-align: right; width:10%;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;">X</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure .</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;">X</td> </tr> </table>				YES	NO	1. a greater than 90 day storage unit.....	X	<input type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			X b. generated prior to 2003			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 2003																			
X b. generated prior to 2003																			
2. an inactive disposal unit undergoing closure .	<input type="checkbox"/>	X																	
B. Storage or disposal method	Handling code	Amount	UOM	Density															
UNIT 1	S01	636	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

 <p>OR ENTER GENERATOR ID NUMBER PLACE PREPRINTED LABEL HERE</p> <p><u>OH6890008976</u></p>

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) BULKING PROJECT CONTACT WASTE		
B. Hazardous waste codes F001 F002 F003 F005			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	D. Was this waste treated, disposed of, or recycled ON-SITE Yes <input type="checkbox"/> (continue to system 1) No X (skip to SEC3)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	207	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) RCRA HAZARDOUS T-HOPPER WASTE		
B. Hazardous waste codes D007 D010			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped TXD988088464	C. Management Method H111	D. Total quantity shipped in 2003 385
Site 2			
Site 3			

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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OILY SLUDGE FROM BUILDING 12 D&D		
B. Hazardous waste codes D008 D009 D010			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W603

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 772
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	4	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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State of Ohio Environmental Protection Agency
2003 Annual Hazardous Waste Report

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OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OILY SLUDGE FROM BULKING		
B. Hazardous waste codes D001 D004 D005 D006 D007 D008 D009 D010 D011 D012 D013 D014 D015 D018 D019 D020 D021 D022 D023 D024 D025 D026 D028 D029 D030 D031 D033 D034 D035 D036 D037 D038 D039 D040 D042 D043 F002 F003 F005 P041 U080 U096 U220 More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 495	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	495	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:	<p>SECTION 1, BOX D: W409 - OILY SLUDGE (NON-PUMPABLE)</p> <p>SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.</p>
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Extra Waste Codes:	
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OhioEPA

5361

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) PCB SLUDGES FROM BATCH 8		
B. Hazardous waste codes D001 D008 D018 D019 D022 D027 D028 D029 D030 D032 D033 D034 D036 D038 D039 D040 D042 D043 F001 F002 F003 F005 U019 U210 U211			
More... <input type="checkbox"/>			
C. Source Code G14	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	70	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 D: W409 - OILY SLUDGE (NON-PUMPABLE)

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

Extra Waste Codes:

OhioEPA

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2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) RCRA HAZARDOUS WATER FOR WWTS		
B. Hazardous waste codes D002 D006 D007 D008 D009 D018 D019 D021 D035 D039 D040			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W101

SECTION 2	A. Quantity generated in 2002 4297	B. Quantity generated in 2003 2318	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 checked="" type="checkbox"/> (continue to system 1) No <input type="checkbox"/> (skip to SEC3)
<u>Onsite system 1</u> On-site Management Method H135	RCRA-exempt unit? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003 3152	<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H Quantity treated, disposed or recycled in 2003		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> </tr> <tr> <td> <input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td> <input type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> </tr> </table>				YES	NO	1. a greater than 90 day storage unit.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

OhioEPA

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2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) RCRA SAMPLES FOR DISPOSITION		
B. Hazardous waste codes D002 D004 D005 D006 D007 D008 D009 D010 D011 D012 D013 D014 D015 D018 D019 D020 D021 D022 D023 D024 D025 D026 D028 D029 D030 D031 D032 D033 D034 D035 D036 D037 D038 D039 D040 D042 D043 F002 F003 F005 More... <input type="checkbox"/>			
C. Source Code	Report the Management Method Code if the Source code is G25	Management Method code	D. Waste form code
G22		H	W113

SECTION 2	A. Quantity generated in 2002	B. Quantity generated in 2003	C. UOM Density	D. Was this waste treated, disposed of, or recycled ON-SITE
	0	0	P	Yes <input checked="" type="checkbox"/> (continue to system 1) No <input type="checkbox"/> (skip to SEC3)
			lbs/gal <input type="checkbox"/> sg <input type="checkbox"/>	
Onsite system 1 RCRA-exempt unit? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		
On-site Management Method	Quantity treated, disposed or recycled in 2003		On-site Management Method	Quantity treated, disposed or recycled in 2003
H135	473		H	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method	D. Total quantity shipped in 2003
		H	
Site 2			
Site 3			

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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

 <p>OR ENTER GENERATOR ID NUMBER PLACE PREPRINTED LABEL HERE</p> <p><u>OH6890008976</u></p>

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) TSCA BATCH 10 CONTACT WASTE		
B. Hazardous waste codes F001 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	310	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) LEAD AND ASBESTOS-CONTAMINATED DEBRIS		
B. Hazardous waste codes D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 1627	B. Quantity generated in 2003 722	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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 3103
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 2003</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 2003			X b. generated prior to 2003			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 2003																			
X b. generated prior to 2003																			
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	2349	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

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2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) NON-EXCLUDED SILO PROJECT MATERIAL		
B. Hazardous waste codes D004 D006 D007 D008 D010			
More... <input type="checkbox"/>			
C. Source Code G22	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u> On-site Management Method H	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003		<u>On-site system 2</u> On-site Management Method H RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped TXD988088464	C. Management Method H111	D. Total quantity shipped in 2003 1844
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	656	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 D: W319 – SILO MATERIAL AND CONTACT WASTE**

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

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) METHANOL CONTACT WASTE		
B. Hazardous waste codes U154			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	61	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) LEAD-CONTAMINATED SLUDGE		
B. Hazardous waste codes D008			
More... <input type="checkbox"/>			
C. Source Code G22	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W519

SECTION 2	A. Quantity generated in 2002 1023	B. Quantity generated in 2003 5929	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped TXD988088464	C. Management Method H111	D. Total quantity shipped in 2003 4505
Site 2			
Site 3			

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;">X</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;">X a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 2003</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"/>	X a. generated during 2003			X b. generated prior to 2003			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"/>																	
X a. generated during 2003																			
X b. generated prior to 2003																			
2. an inactive disposal unit undergoing closure .	<input type="checkbox"/>	X																	
B. Storage or disposal method	Handling code	Amount	UOM	Density															
UNIT 1	S01	5929	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 D: W519 – LEAD-CONTAMINATED SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SLUDGES FROM LEGACY CHEMICAL PROJECT		
B. Hazardous waste codes D001 D005 D035 U002 U159 U220 U239			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 13	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	13	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 D: W409 - OILY SLUDGE (NON-PUMPABLE)

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

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) DIESEL FUEL		
	B. Hazardous waste codes D001		
	More... <input type="checkbox"/>		
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W211

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 385	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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;">X a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 2003			<input type="checkbox"/> b. generated prior to 2003			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 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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	385	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:

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SODIUM SULFIDE		
B. Hazardous waste codes D002 D003			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W110

SECTION 2	A. Quantity generated in 2002 224	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	224	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) BATCH 13 CONTACT WASTE		
B. Hazardous waste codes F001 F002 F003 F005 U002 U019 U080 U107 U154 U159 U210 U211 U220 U228 U239			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 249	B. Quantity generated in 2003 148	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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;">X a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 2003</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 2003			X b. generated prior to 2003			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 2003																			
X b. generated prior to 2003																			
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	397	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) AREA 2, PHASE 2 OIL DRUM		
B. Hazardous waste codes D005 D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W206

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	51	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) UNH FROM PLANT 2/3 DENITRATION		
B. Hazardous waste codes D007			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 230	C. UOM P	Density	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 2003			<input type="checkbox"/> b. generated prior to 2003			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 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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	230	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:

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) DEBRIS AND SOLIDS CONTAMINATED WITH UNH		
B. Hazardous waste codes D005 D007 D008 D009			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 8814
Site 2	TXD988088464	H111	87
Site 3			

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 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	48	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

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SECTION 1	A. Hazardous waste description (60 characters max.) SULFURIC ACID TANK CLEANUP WATER		
B. Hazardous waste codes D002 D005 D006 D007 D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W105

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped TXD988088464	C. Management Method H111	D. Total quantity shipped in 2003 385
Site 2			
Site 3			

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: 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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

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SECTION 1	A. Hazardous waste description (60 characters max.) SCRAP SALTS		
B. Hazardous waste codes D005 D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	D. Was this waste treated, disposed of, or recycled ON-SITE Yes <input type="checkbox"/> (continue to system 1) No X (skip to SEC3)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	5	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

OR ENTER GENERATOR ID NUMBER
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OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OILY OXIDATION SLUDGES WITH HIGH FREE METAL		
B. Hazardous waste codes D001 D039 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W603

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure .</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	2577	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



OR ENTER GENERATOR ID NUMBER
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Form GM - *Generation and Management*

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED SOLVENT - TRICHLOR, PERCHLOR		
B. Hazardous waste codes D007 D018 D019 D021 D029 D039 D040 F001			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	965	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 D: W409 – SOLVENT-CONTAMINATED SLUDGE**

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

Extra Waste Codes:

OR ENTER GENERATOR ID NUMBER
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OILY SLUDGES		
B. Hazardous waste codes D007 F001			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W603

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	237	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.**

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SOLVENT SLUDGES		
B. Hazardous waste codes D001 D008 D035 F003 F005			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure .</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	386	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 D: W409 – PAINT/SOLVENT SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

 <p>OR ENTER GENERATOR ID NUMBER PLACE PREPRINTED LABEL HERE</p> <p><u>OH6890008976</u></p>

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OILY SLUDGES		
B. Hazardous waste codes D006 D008 D029 D039 D040			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	235	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 D: W409 – OIL/SOLVENT SLUDGE (NON-PUMPABLE)

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED BURNABLES		
B. Hazardous waste codes D005			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	2	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

OR ENTER GENERATOR ID NUMBER
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OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED BURNABLES		
B. Hazardous waste codes D039 D040 F002			
More... <input type="checkbox"/>			
C. Source Code G32	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 2539
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	2770	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

 <p>OR ENTER GENERATOR ID NUMBER PLACE PREPRINTED LABEL HERE</p> <p><u>OH6890008976</u></p>

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OILY SLUDGE		
B. Hazardous waste codes D010 D035 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	2743	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 D: W409 - OIL/SOLVENT SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

 <p>OR ENTER GENERATOR ID NUMBER PLACE PREPRINTED LABEL HERE</p> <p><u>OH6890008976</u></p>

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OILY SLUDGE		
B. Hazardous waste codes D008 D018 D019 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	526	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 D: W409 - OIL/SOLVENT SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:



OR ENTER GENERATOR ID NUMBER
PLACE PREPRINTED LABEL HERE

OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) NON-RECOVERABLE TRASH		
B. Hazardous waste codes D008 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 3209
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	2808	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 D: W409 – TRASH AND OILY SLUDGE**

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED SOIL AND ROCKS		
B. Hazardous waste codes D005			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W301

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	2	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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State of Ohio Environmental Protection Agency
2003 Annual Hazardous Waste Report

 <p>OR ENTER GENERATOR ID NUMBER PLACE PREPRINTED LABEL HERE</p> <p><u>OH6890008976</u></p>

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) 1,1,1-TRICHLOROETHANE STILL BOTTOMS		
B. Hazardous waste codes D009 F001 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H		Quantity treated, disposed or recycled in 2003 H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 4329
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	8700	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 D: W409 - SOLVENT STILL BOTTOMS (NON-PUMPABLE)**

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

OR ENTER GENERATOR ID NUMBER
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OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED OIL, INSOLUBLE		
B. Hazardous waste codes D039 D040 F001			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	3986	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 D: W409 - OIL/SOLVENT SLUDGE (NON-PUMPABLE)

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

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

OR ENTER GENERATOR ID NUMBER
PLACE PREPRINTED LABEL HERE

OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OILY SLUDGE		
B. Hazardous waste codes D008 D028			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1435	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 D: W409 – OIL/SOLVENT SLUDGE (NON-PUMPABLE)

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

Extra Waste Codes:

OR ENTER GENERATOR ID NUMBER
PLACE PREPRINTED LABEL HERE

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED INSOLUBLE OIL		
B. Hazardous waste codes D006 D007 D008 D019 D029 D040 F001			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	417	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 D: W409 – OILY SLUDGE (NON-PUMPABLE)

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

OR ENTER GENERATOR ID NUMBER
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) FLOOR SUMP CLEANOUT SLUDGE		
B. Hazardous waste codes D029 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	521	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 D: W409 – SUMP SLUDGE (NON-PUMPABLE)

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) MIXED SOLVENTS FROM TANKS T-5 AND T-6		
B. Hazardous waste codes D001 D022 D028 D029 D035 F001 F002 F003 F005			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	2185	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 D: W409 - SOLVENT SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED INSOLUBLE OIL		
B. Hazardous waste codes D019 D029 D039 D040 F001			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X NO (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	515	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 D: W409 – OIL/SOLVENT SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

 OR ENTER GENERATOR ID NUMBER PLACE PREPRINTED LABEL HERE OH6890008976
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED OIL - INSOLUBLE		
B. Hazardous waste codes D039 D040 F001			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	159	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 D: W409 – OIL/SOLVENT SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

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OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED OIL		
B. Hazardous waste codes D006 D008 D010 D018 D019 D028 D029 D039 D040 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W206

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	167	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) PROCESS RESIDUES, TRAILER CAKES, SLURRIES AND RAFFINATES		
B. Hazardous waste codes D029			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)			
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003	
Site 2				
Site 3				

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: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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	15	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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2003 Annual Hazardous Waste Report

 <p>OR ENTER GENERATOR ID NUMBER PLACE PREPRINTED LABEL HERE</p> <p><u>OH6890008976</u></p>
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Form GM - *Generation and Management*

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED TBP AND/OR KEROSENE MIXTURES AND SLUDGES		
B. Hazardous waste codes D019 D022 D039 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W609

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	23	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 D: W609 – TBP/KEROSENE SLUDGE**

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

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SCRAP SALT AND FLOOR SWEEPINGS		
B. Hazardous waste codes D004 D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	4	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Form GM - Generation and Management

SECTION 1		A. Hazardous waste description (60 characters max.)-- PROCESS RESIDUES, TRAILER CAKES, SLURRIES AND RAFFINATES	
B. Hazardous waste codes F005 More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	24	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:	<p>SECTION 1, BOX D: W319 - URANIUM PROCESS RESIDUE SAMPLES</p> <p>SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.</p>
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED SOLVENT/DEBRIS		
B. Hazardous waste codes D019 D022 D028 D029 D039 F001 F005			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	84	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.**

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 2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) DUST COLLECTOR BAGS		
B. Hazardous waste codes D006			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	370	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

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Form GM - *Generation and Management*

SECTION 1	A. Hazardous waste description (60 characters max.) NON-METALLIC SAMPLES		
B. Hazardous waste codes D005			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM P	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	192	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED NON-BURNABLES		
B. Hazardous waste codes D006 D007 D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 391	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 2003</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 2003			X b. generated prior to 2003			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 2003																			
X b. generated prior to 2003																			
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	396	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

1985
OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) MIXED SOLVENTS		
B. Hazardous waste codes D007 D018 D019 D021 D029 D030 D032 D039 D040 F001 F002			
More... <input type="checkbox"/>			
C. Source Code G22	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W204

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	101	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.**

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OILY SLUDGES		
B. Hazardous waste codes D001 D019 D039 D040 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 29528
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	345	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 D: W409 - OIL/SOLVENT SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) WET SUMP OR FILTER CAKE - OIL-CONTAMINATED		
B. Hazardous waste codes D040 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 17426
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1661	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 D: W409 - LAUNDRY SUMP CLEANOUT (NON-PUMPABLE)**

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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OH6890008976

Form GM - *Generation and Management*

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED SOLVENT - TRICHLOR, PERCHLOR, ETC.		
B. Hazardous waste codes D001 F002 F003 F005			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W204

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1748	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OIL CONTAMINATED WITH SOLVENT (TANK T-5)		
B. Hazardous waste codes D018 F001			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W206

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	
	Quantity treated, disposed or recycled in 2003			

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1651	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) DUST COLLECTOR RESIDUES - HIGH FLUORIDE		
B. Hazardous waste codes D006 D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure .</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	2	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 D: W319 - DUST COLLECTOR RESIDUES**

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

Extra Waste Codes:

OhioEPA

5361

State of Ohio Environmental Protection Agency
2003 Annual Hazardous Waste Report

OR ENTER GENERATOR ID NUMBER
PLACE PREPRINTED LABEL HERE
OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) PROCESS RESIDUES, TRAILER CAKES, SLURRIES AND RAFFINATES		
B. Hazardous waste codes D039 More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W609

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1050	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 D: W609 – SUMP SLUDGE (NON-PUMPABLE)

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

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) WET SUMP OR FILTER CAKE - NON-OILY, NON-HALIDE		
B. Hazardous waste codes D039			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W609

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	898	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 D: W609 – SUMP SLUDGE (NON-PUMPABLE)**

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

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OILY SLUDGES, HIGH FREE METAL		
B. Hazardous waste codes D001 D039 D040			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	7312	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 D: W409 - OIL/SOLVENT SLUDGE (NON-PUMPABLE)**

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

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) NON-OILY CLEANOUT SLUDGES FOR ROASTING		
B. Hazardous waste codes D019 D039			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	
			Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;">X</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td> <input type="checkbox"/> a. generated during 2003</td> <td></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td> X b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure .</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;">X</td> </tr> </table>				YES	NO	1. a greater than 90 day storage unit.....	X	<input type="checkbox"/>	<input type="checkbox"/> a. generated during 2003		<input type="checkbox"/>	X b. generated prior to 2003			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 2003		<input type="checkbox"/>																	
X b. generated prior to 2003																			
2. an inactive disposal unit undergoing closure .	<input type="checkbox"/>	X																	
B. Storage or disposal method	Handling code	Amount	UOM	Density															
UNIT 1	S01	1754	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 D: W409 - SUMP SLUDGE (NON-PUMPABLE)**

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

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SOIL/ROCKS FROM PILOT PLANT SUMP		
B. Hazardous waste codes D039			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W301

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 9968
Site 2	TXD988088464	H111	16846
Site 3			

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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) MISCELLANEOUS THORIUM		
B. Hazardous waste codes D009			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 21	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped TXD988088464	C. Management Method H111	D. Total quantity shipped in 2003 610
Site 2			
Site 3			

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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) NON-RECOVERABLE TRASH		
B. Hazardous waste codes D019			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 299
Site 2			
Site 3			

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: 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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

OhioEPA

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED BURNABLES		
B. Hazardous waste codes D007 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W303

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	173	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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 2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) DUST COLLECTOR BAGS		
B. Hazardous waste codes D007			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	26	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED SUMP WATER AND HYDRAULIC OIL		
B. Hazardous waste codes D001 D008 D019 D039 D040			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	637	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 D: W409 – OIL/SOLVENT SLUDGE (NON-PUMPABLE)

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

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) WET CAKE, NON-OILY/HALIDE		
B. Hazardous waste codes D001 D039 D040			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W609

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	188	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 D: W609 – SUMP CAKE**

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

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) NON-OILY OXIDATION SLUDGES WITH HIGH OR LOW FREE METAL		
B. Hazardous waste codes D004 D006 D007 D008 D010 D019 D039 D040			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)			
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003	
Site 2				
Site 3				

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	5057	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:	<p>SECTION 1, BOX D: W319 – SLUDGE GENERATED FROM METAL REDUCTION AREA</p> <p>SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.</p>
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) ROASTED CALCIUM-PRECIPIATED SUMP AND FILTER CKAES		
B. Hazardous waste codes F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	22	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 D: W319 – CALCIUM-PRECIPIATED SUMP/FILTER CAKE**

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

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SCRAP U308 - HIGH FLUORIDE		
B. Hazardous waste codes D004			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	2	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

OR ENTER GENERATOR ID NUMBER
PLACE PREPRINTED LABEL HERE

OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) ROASTED OFF-SITE SUMP CAKE		
B. Hazardous waste codes D007			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W304

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SALT SLUDGE, CHLORIDE		
B. Hazardous waste codes D007			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

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2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) FURNACE SALT, NON-CHLORIDE		
B. Hazardous waste codes D001 D004 D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1845	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) FURNACE SALT, NON-CHLORIDE		
B. Hazardous waste codes D001			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

OhioEPA

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State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) FURNACE SALT, NON-CHLORIDE		
B. Hazardous waste codes D007 D008 D010			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	20782	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SLUDGES FOR BLENDING		
B. Hazardous waste codes D007			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W319

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	457	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 D: W319 – SLUDGES FROM MACHINING OPERATIONS**

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OILY SLUDGES FOR OXIDATION		
B. Hazardous waste codes D001 F001			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W519

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	2399	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 D: W519 - SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:

OhioEPA

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2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OILY SLUDGES FOR OXIDATION, HIGH FREE METALS		
B. Hazardous waste codes D001 D019			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W519

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	3209	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 D: W519 – SLUDGE (NON-PUMPABLE)

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

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) U308, + 8 MESH, LOW FLUORIDE		
B. Hazardous waste codes D007 F001 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1411	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SALT SLUDGE, CHLORIDE		
B. Hazardous waste codes D005			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right; width:10%;">YES</td> <td style="text-align: right; width:10%;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	2	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) FURNACE SALT, NON-CHLORIDE		
B. Hazardous waste codes D008 D010			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> NO (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	2303	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) USED FURNACE SALT		
B. Hazardous waste codes D007			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 On-site Management Method H	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003		On-site system 2 On-site Management Method H	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	10	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OFF-SPEC PAINT		
B. Hazardous waste codes D001			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W209

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	D. Was this waste treated, disposed of, or recycled ON-SITE Yes <input type="checkbox"/> (continue to system 1) No X (skip to SEC3)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	6	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) NON-RECOVERABLE TRASH		
B. Hazardous waste codes F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED SOLUBLE OIL		
B. Hazardous waste codes D001 D018			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W206

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	315	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED WATER, NON-CHLORIDE		
B. Hazardous waste codes D018 D019 D021 D035 D039 D040			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W101

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	650	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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5361

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State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED SOLVENTS		
B. Hazardous waste codes D001 D018			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> NO (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	65	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 D: W409 – SOLVENT SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SOLVENTS AND FILTER MATERIAL		
B. Hazardous waste codes F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W310

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 1201
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	3386	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) USED CHLORINATED SOLVENT MIXTURE		
B. Hazardous waste codes D001 D007 D008 D009 D039 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W202

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure .</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	6708	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OR ENTER GENERATOR ID NUMBER
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) WASTE SOLVENT FROM BOILER PLANT		
B. Hazardous waste codes D001 D008 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W202

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	435	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) USED 1,1,1-TRICHLOROETHANE MIXTURE		
B. Hazardous waste codes D001 D008 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	47	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 D: W409 – SOLVENT SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) ORGANIC SOLVENT MIXTURE FROM PLANT 8 MAINTENANCE		
B. Hazardous waste codes D001 D008 D009 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)			
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003	
Site 2				
Site 3				

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	147	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 D: W409 – OIL/SOLVENT SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

 <p>OR ENTER GENERATOR ID NUMBER PLACE PREPRINTED LABEL HERE</p> <p><u>OH6890008976</u></p>

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) USED OIL FROM PLANT 2/3 MAINTENANCE		
B. Hazardous waste codes D006 D008 D009 D018 D019 D021 D035 D039 D040 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	385	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 D: W409 – OIL/SOLVENT SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency
2003 Annual Hazardous Waste Report

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OH6890008976

Form GM - *Generation and Management*

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED INSOLUBLE OIL		
B. Hazardous waste codes D008 F001			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	839	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:	<p>SECTION 1, BOX D: W409 - OIL/SOLVENT SLUDGE (NON-PUMPABLE)</p> <p>SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.</p>
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Extra Waste Codes:	
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State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

 <p>OR ENTER GENERATOR ID NUMBER PLACE PREPRINTED LABEL HERE</p> <p><u>OH6890008976</u></p>

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED LUBRICATING OIL		
B. Hazardous waste codes D001 D007 D008 D018 D019 D039 D040 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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:		
		1. a greater than 90 day storage unit.....	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
		<input type="checkbox"/> a. generated during 2003		
		<input checked="" type="checkbox"/> b. generated prior to 2003		
		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	285	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 D: W409 – OILY SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SOLVENT-CONTAMINATED WASTE OIL		
B. Hazardous waste codes D008 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1050	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 D: W409 – OIL/SOLVENT SLUDGE (NON-PUMPABLE)

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

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED INSOLUBLE OIL		
B. Hazardous waste codes D001 D008 D009 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W206

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1108	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OILY TRASH FROM MAINTENANCE		
B. Hazardous waste codes D001 D007 D008 D019 D040 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right; width:10%;">YES</td> <td style="text-align: right; width:10%;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;">X</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;">X</td> </tr> </table>				YES	NO	1. a greater than 90 day storage unit.....	X	<input type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			X b. generated prior to 2003			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 2003																			
X b. generated prior to 2003																			
2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	X																	
B. Storage or disposal method	Handling code	Amount	UOM	Density															
UNIT 1	S01	466	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:

OR ENTER GENERATOR ID NUMBER
PLACE PREPRINTED LABEL HERE

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) USED CONTAMINATED MACHINE AND ENGINE OIL		
B. Hazardous waste codes D001 D008 D010 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	3762	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 D: W409 – OIL/SOLVENT SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:

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2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) WASTE OIL FROM PLANT 8 MAINTENANCE		
B. Hazardous waste codes D001 D005 D006 D007 D008 D010 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	2442	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 D: W409 – OIL/SOLVENT SLUDGE (NON-PUMPABLE)

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

Extra Waste Codes:

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OILY TRASH		
B. Hazardous waste codes D001 D008 D039 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	253	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) TBP/KEROSENE FROM PLANT 2/3 EXTRACTION		
B. Hazardous waste codes D008 D018 D019 D039 D040			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	4203	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 D: W409 – TBP/KEROSENE SLUDGE (NON-PUMPABLE)**

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

Extra Waste Codes:

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2003 Annual Hazardous Waste Report



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED BURNABLE TRASH		
B. Hazardous waste codes D018 D019 D039 D040			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u> On-site Management Method H	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	Quantity treated, disposed or recycled in 2003	<u>On-site system 2</u> On-site Management Method H	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>
		Quantity treated, disposed or recycled in 2003		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X NO (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	268	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) USED OIL DESTINED FOR INCINERATION AT OIL BURNER		
B. Hazardous waste codes D001 D007 D008 D018 D019 D039 D040			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	212	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 D: W409 - OIL/SOLVENT SLUDGE (NON-PUMPABLE)**

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

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OILY SLUDGES FOR OXIDATION, HIGH FREE METAL		
B. Hazardous waste codes D001 F001 F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	D. Was this waste treated, disposed of, or recycled ON-SITE Yes <input type="checkbox"/> (continue to system 1) No X (skip to SEC3)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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:		
			YES	NO
		1. a greater than 90 day storage unit.....	X	<input type="checkbox"/>
		<input type="checkbox"/> a. generated during 2003		
		X b. generated prior to 2003		
		2. an inactive disposal unit undergoing closure .	<input type="checkbox"/>	X
B. Storage or disposal method	Handling code	Amount	UOM	Density
UNIT 1	S01	1973	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 D: W409 – OIL/SOLVENT SLUDGE (NON-PUMPABLE)**

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

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) NON-OILY SEMI-SOLIDS		
B. Hazardous waste codes D001			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	4903	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 D: W409 – SUMP SLUDGE

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

OR ENTER GENERATOR ID NUMBER
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) PILOT PLANT TBP EXTRACTION SLUDGES		
B. Hazardous waste codes D001			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W609

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	716	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 D: W609 – NON-HALOGENATED SOLVENT SLUDGE

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) PAINT THINNER AND PAINT RESIDUES		
B. Hazardous waste codes D009 D018 D035			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	94	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 D: W409 – PAINT THINNER/PAINT SLUDGE (NON-PUMPABLE)

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

Extra Waste Codes:

State of Ohio Environmental Protection Agency
 2003 Annual Hazardous Waste Report

OR ENTER GENERATOR ID NUMBER
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) FURNACE SALT		
B. Hazardous waste codes D005 More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	
			Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	3	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

5361

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2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) ROTEXED U308 FURNACE PRODUCT		
B. Hazardous waste codes F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25 G25	Management Method code H	D. Waste form code W304

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	140	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

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2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) PURE UNH SOLUTION		
B. Hazardous waste codes D002			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W103

SECTION 2	A. Quantity generated in 2002 216	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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;">X</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 2003</td> <td></td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 2003</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.....	X	<input type="checkbox"/>		<input type="checkbox"/> a. generated during 2003				X b. generated prior to 2003				2. an inactive disposal unit undergoing closure	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	YES	NO																						
1. a greater than 90 day storage unit.....	X	<input type="checkbox"/>																						
<input type="checkbox"/> a. generated during 2003																								
X b. generated prior to 2003																								
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	216	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

 <p>OR ENTER GENERATOR ID NUMBER PLACE PREPRINTED LABEL HERE</p> <p><u>OH6890008976</u></p>
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) GRAPHITE		
B. Hazardous waste codes D005			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X NO (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTAMINATED BURNABLE TRASH		
B. Hazardous waste codes D005 D039			
More... <input type="checkbox"/>			
C. Source Code G32	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 4041
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1227	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:	<p>SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.</p>
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONCRETE, ROCKS, FLOOR SWEEPINGS AND TRASH		
B. Hazardous waste codes D005			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	19	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) HARDENED SALT BATH SLUDGE		
B. Hazardous waste codes D005 More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H		On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	218	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) FURNACE SALT, NON-CHLORIDE (PLANT 8 RECOVERY)		
B. Hazardous waste codes D005 D008			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u>	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>	
On-site Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	
			Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	23	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) MISCELLANEOUS MATERIAL		
B. Hazardous waste codes D005 D009			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SOLVENT SEMI-SOLID		
B. Hazardous waste codes D018 D019 D020 D029 D039 D040			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W409

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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)
<u>Onsite system 1</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		<u>On-site system 2</u> RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	1340	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:	<p>SECTION 1, BOX D: W409 - OIL/SOLVENT SLUDGE (NON-PUMPABLE)</p> <p>SECTION 4, BOX A: WASTE WILL BE TREATED IN ACCORDANCE WITH SCHEDULES ESTABLISHED IN THE FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.</p>
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Extra Waste Codes:	
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) OILY RAGS AND GLOVES		
B. Hazardous waste codes F002			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 224
Site 2			
Site 3			

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: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>1. a greater than 90 day storage unit.....</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</td> <td></td> <td></td> </tr> <tr> <td>2. an inactive disposal unit undergoing closure .</td> <td style="text-align: right;"><input type="checkbox"/></td> <td style="text-align: right;"><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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	17	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) BATTERIES		
B. Hazardous waste codes D006 D008			
More... <input type="checkbox"/>			
C. Source Code G16	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W309

SECTION 2	A. Quantity generated in 2002 153	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped UTD982598898	C. Management Method H132	D. Total quantity shipped in 2003 10840
Site 2			
Site 3			

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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

 <p>OR ENTER GENERATOR ID NUMBER PLACE PREPRINTED LABEL HERE</p> <p><u>OH6890008976</u></p>

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) TSCA BATCH 13		
B. Hazardous waste codes D001 D007 D008 D018 D029 D039 D040 F001 F002 F003 F005 U002 U019 U080 U107 U154 U159 U210 U211 U220 U228 U239			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W206

SECTION 2	A. Quantity generated in 2002 14138	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped TN0890090004	C. Management Method H040	D. Total quantity shipped in 2003 95797
Site 2			
Site 3			

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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

5361

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) BULKED ORGANIC LIQUIDS (BATCH 14)		
B. Hazardous waste codes D001 D004 D006 D007 D008 D009 D010 D011 D018 D019 D021 D029 D035 D039 D040 F001 F002 F003 F005 U002 U019 U080 U107 U154 U159 U210 U211 U220 U228 U239			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W206

SECTION 2	A. Quantity generated in 2002 556	B. Quantity generated in 2003 7106	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 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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;">X a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">X b. generated prior to 2003</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 2003			X b. generated prior to 2003			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 2003																			
X b. generated prior to 2003																			
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	96375	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

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2003 Annual Hazardous Waste Report

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) -- SULFURIC ACID		
B. Hazardous waste codes D002 D004 D007 D009 D010			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W103

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 1955	C. UOM Density P <small>lbs/gal <input type="checkbox"/> sg <input type="checkbox"/></small>	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 Management Method H		On-site Management Method H		

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped OHD000816629	C. Management Method H135	D. Total quantity shipped in 2003 1955
Site 2			
Site 3			

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: 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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

State of Ohio Environmental Protection Agency



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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) DECANT WATER FROM THORIUM OXALATE		
B. Hazardous waste codes D002 More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W105

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 checked="" type="checkbox"/> (continue to system 1) No <input type="checkbox"/> (skip to SEC3)
<u>Onsite system 1</u> On-site Management Method H121	RCRA-exempt unit? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003 8337	<u>On-site system 2</u> On-site Management Method H	RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/> Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> YES (continue to box B) - See Section 3 <input checked="" type="checkbox"/> NO (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

SECTION 4	On-site Waste Storage and Inactive Disposal Units
------------------	--

<p>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.</p> <p>Otherwise, skip Section 4.</p>	<p>A. As of December 31, did any of this waste remain on-site in:</p> <table style="width:100%; border: none;"> <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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003.</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003.			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 type="checkbox"/>	<input checked="" type="checkbox"/>														
<input type="checkbox"/> a. generated during 2003																
<input type="checkbox"/> b. generated prior to 2003.																
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				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:

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency



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2003 Annual Hazardous Waste Report

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) - LAB PACKS		
B. Hazardous waste codes D001 D002 D007 D008 D009 D011 D035			
More... <input type="checkbox"/>			
C. Source Code G11	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W001

SECTION 2	A. Quantity generated in 2002 13886	B. Quantity generated in 2003 8179	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input checked="" type="checkbox"/> Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped IND093219012	C. Management Method H141	D. Total quantity shipped in 2003 2388
Site 2	OHD980613541	H040	5791
Site 3			

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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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				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:

Extra Waste Codes:

OR ENTER GENERATOR ID NUMBER
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) SOIL EXCAVATED FROM THE FIRE TRAINING FACILITY		
B. Hazardous waste codes D039			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W301

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 700	C. UOM Density Y 1.65 <small>lbs/gal <input type="checkbox"/> sg <input checked="" type="checkbox"/></small>	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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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;">X a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 2003			<input type="checkbox"/> b. generated prior to 2003			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 2003																			
<input type="checkbox"/> b. generated prior to 2003																			
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	S99	700	Y	1.65 lbs/gal <input type="checkbox"/> sg <input checked="" 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 B: S99 – SOIL IS BEING STAGED IN A CORRECTIVE ACTION MANAGEMENT UNIT OPERATED UNDER THE SITE' S CERCLA REMEDIAL PROGRAM WHILE IT IS BEING TREATED THROUGH AN ENHANCED SOIL VENTING PROCESS. THE TREATMENT WILL BE COMPLETED IN 2004.

Extra Waste Codes:

OhioEPA

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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) RCRA SOIL		
B. Hazardous waste codes D040			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W301

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 0	C. UOM Y lbs/gal <input type="checkbox"/> sg <input checked="" type="checkbox"/>	Density 1.65	D. Was this waste treated, disposed of, or recycled ON-SITE Yes <input checked="" type="checkbox"/> (continue to system 1) No <input type="checkbox"/> (skip to SEC3)
Onsite system 1 RCRA-exempt unit? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			On-site system 2 RCRA-exempt unit? Yes <input type="checkbox"/> No <input type="checkbox"/>		
On-site Management Method H132	Quantity treated, disposed or recycled in 2003 400		On-site Management Method H	Quantity treated, disposed or recycled in 2003	

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 <input checked="" type="checkbox"/> NO (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003.</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003.			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 type="checkbox"/>	<input checked="" type="checkbox"/>																	
<input type="checkbox"/> a. generated during 2003																			
<input type="checkbox"/> b. generated prior to 2003.																			
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				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 2: SOIL WAS TREATED UNDER THE SITE' S CERCLA REMEDIAL PROGRAM. THE SOIL WAS TREATED BY AN ENHANCED VENTING PROCESS AND THEN DISPOSED OF IN THE ON-SITE DISPOSAL FACILITY (OSDF). THIS UNIT IS OPERATED UNDER THE STANDARDS FOR A CORRECTIVE ACTION MANAGEMENT UNIT (CAMU) IN ACCORDANCE WITH THE SITE'S CERCLA RECORDS OF DECISION.

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report

OR ENTER GENERATOR ID NUMBER
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) ADHESIVE/OIL MIX		
B. Hazardous waste codes D001 D018 D039			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W603

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	380	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.

Extra Waste Codes:

OhioEPA

State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



OR ENTER GENERATOR ID NUMBER
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Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) CONTACT-WASTE		
B. Hazardous waste codes D039 F002 F005			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W002

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 <input type="checkbox"/> Yes (continue to box B) - See Section 3 X No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped	C. Management Method H	D. Total quantity shipped in 2003
Site 2			
Site 3			

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: 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 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input checked="" type="checkbox"/> b. generated prior to 2003</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 2003			<input checked="" type="checkbox"/> b. generated prior to 2003			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 2003																			
<input checked="" type="checkbox"/> b. generated prior to 2003																			
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	70	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 FEDERAL FACILITY COMPLIANCE ACT (FFCAct) SITE TREATMENT PLAN.**

Extra Waste Codes:

OR ENTER GENERATOR ID NUMBER
PLACE PREPRINTED LABEL HERE

OH6890008976

Form GM - Generation and Management

SECTION 1	A. Hazardous waste description (60 characters max.) RCRA HAZARDOUS T-HOPPER WASTE		
B. Hazardous waste codes D007			
More... <input type="checkbox"/>			
C. Source Code G43	Report the Management Method Code if the Source code is G25	Management Method code H	D. Waste form code W316

SECTION 2	A. Quantity generated in 2002 0	B. Quantity generated in 2003 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 Management Method H	Quantity treated, disposed or recycled in 2003		On-site Management Method H	Quantity treated, disposed or recycled in 2003

SECTION 3	A. Was any of this waste shipped off site in 2003 X Yes (continue to box B) - See Section 3 <input type="checkbox"/> No (skip to SEC. 4)		
Site 1	B. EPA ID number of facility to which waste was shipped TXD988088464	C. Management Method H111	D. Total quantity shipped in 2003 531
Site 2			
Site 3			

SECTION 4	On-site Waste Storage and Inactive Disposal Units
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<p>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.</p> <p>Otherwise, skip Section 4.</p>	<p>A. As of December 31, did any of this waste remain on-site in:</p> <table style="width:100%; border: none;"> <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 type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> a. generated during 2003</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;"><input type="checkbox"/> b. generated prior to 2003</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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> a. generated during 2003			<input type="checkbox"/> b. generated prior to 2003			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 type="checkbox"/>	<input checked="" type="checkbox"/>														
<input type="checkbox"/> a. generated during 2003																
<input type="checkbox"/> b. generated prior to 2003																
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				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:

Extra Waste Codes:



State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



ENTER GENERATOR ID NUMBER

OH6890008976

Form OI - Off-site Transporter and Receiving Facility Information

1	A. EPA ID of transporter or receiving facility IND058484114	B. Name of transporter or receiving facility (40 characters max.) HERITAGE TRANSPORT LLC
---	--	---

C. Handler type (check all that apply) <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> Receiving Facility	D. Address of receiving facility (address not required for transporters) Street _____ City _____ State _____ ZIP Code _____
--	---

2	A. EPA ID of transporter or receiving facility FLR00067157	B. Name of transporter or receiving facility (40 characters max.) LANDSTAR RANGER, INC.
---	---	--

C. Handler type (check all that apply) <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> Receiving Facility	D. Address of receiving facility (address not required for transporters) Street _____ City _____ State _____ ZIP Code _____
--	---

3	A. EPA ID of transporter or receiving facility TN089009004	B. Name of transporter or receiving facility (40 characters max.) USDOE % ETPP SITE, TSCA INCINERATOR
---	---	--

C. Handler type (check all that apply) <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> Receiving Facility	D. Address of receiving facility (address not required for transporters) Street Highway 58, Blair Road City Oak Ridge State TN ZIP Code 37830
--	---

4	A. EPA ID of transporter or receiving facility TNR00005397	B. Name of transporter or receiving facility (40 characters max.) MATERIALS & ENERGY CORP.
---	---	---

C. Handler type (check all that apply) <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> Receiving Facility	D. Address of receiving facility (address not required for transporters) Street 2010 Highway 58, ETPP, K1005 City Oak Ridge State TN ZIP Code 37830
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5	A. EPA ID of transporter or receiving facility IND093219012	B. Name of transporter or receiving facility (40 characters max.) HERITAGE ENVIRONMENTAL SERVICES, LLC
---	--	---

C. Handler type (check all that apply) <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> Receiving Facility	D. Address of receiving facility (address not required for transporters) Street 7901 West Morris Street City Indianapolis State IN ZIP Code 46231
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State of Ohio Environmental Protection Agency

2003 Annual Hazardous Waste Report



ENTER GENERATOR ID NUMBER

0 | H | 6 | 8 | 9 | 0 | 0 | 0 | 8 | 9 | 7 | 6

Form OI - Off-site Transporter and Receiving Facility Information

1	A. EPA ID of transporter or receiving facility <div style="border: 1px solid black; padding: 2px;">0 H D 9 8 0 6 1 3 5 4 1</div>	B. Name of transporter or receiving facility (40 characters max.) VON ROLL AMERICA, INC.
	C. Handler type (check all that apply) <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> Receiving Facility	D. Address of receiving facility (address not required for transporters) Street <u>1250 Saint George Street</u> City <u>East Liverpool</u> State <u>OH</u> ZIP Code <u>43920</u> - <u> </u>

2	A. EPA ID of transporter or receiving facility <div style="border: 1px solid black; padding: 2px;">T X D 9 8 8 0 5 7 9 3 1</div>	B. Name of transporter or receiving facility (40 characters max.) FLUID TRANSPORTS
	C. Handler type (check all that apply) <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> Receiving Facility	D. Address of receiving facility (address not required for transporters) Street _____ City _____ State _____ ZIP Code _____ - _____

3	A. EPA ID of transporter or receiving facility <div style="border: 1px solid black; padding: 2px;">T X D 9 8 8 0 8 8 4 6 4</div>	B. Name of transporter or receiving facility (40 characters max.) WASTE CONTROL SPECIALISTS
	C. Handler type (check all that apply) <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> Receiving Facility	D. Address of receiving facility (address not required for transporters) Street <u>9998 Highway 176 West</u> City <u>Andrews</u> State <u>TX</u> ZIP Code <u>79714</u> - <u> </u>

4	A. EPA ID of transporter or receiving facility <div style="border: 1px solid black; padding: 2px;">M 0 D 0 9 5 0 3 8 9 9 8</div>	B. Name of transporter or receiving facility (40 characters max.) TRI-STATE MOTOR TRANSIT
	C. Handler type (check all that apply) <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> Receiving Facility	D. Address of receiving facility (address not required for transporters) Street _____ City _____ State _____ ZIP Code _____ - _____

5	A. EPA ID of transporter or receiving facility <div style="border: 1px solid black; padding: 2px;">U T D 9 8 2 5 9 8 8 9 8</div>	B. Name of transporter or receiving facility (40 characters max.) ENVIROCARE OF UTAH
	C. Handler type (check all that apply) <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> Receiving Facility	D. Address of receiving facility (address not required for transporters) Street <u>Tooele County, US 180, Ext. 49</u> City <u>Clive</u> State <u>UT</u> ZIP Code <u>84029</u> - <u> </u>

