OMB# 2050-0024; Expires 12/31/2014

| SEND COMPLETED FORM TO: The Appropriate State or Regional Office. | | United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM 1875 | | | | | | | |
|--|--|--|-------------------------------------|--------------------------------|--|--|--|--|--|
| 1. | Reason for Submittal | Reason for Submittal: NMED | | | | | | | |
| MARK ALL BOX(ES) THAT APPLY | | □ To provide a Subsequent Notification (to update site identification information for this location) □ As a component of a First RCRA Hazardous Waste Part A Permit Application □ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #) | | | | | | | |
| | | ☐ As a component of the Hazardon | us Waste Re | port (If marked, see sub-bulle | et below) | | | | |
| | | | | | aste, >1 kg of acute hazardous waste, or ns of the report year (or State equivalent | | | | |
| 2. | Site EPA ID Number | EPA ID Number N M D 9 8 6 6 8 4 6 2 9 | | | | | | | |
| 3. | Site Name | Name:L-3 Applied Technologies, Inc. | Name:L-3 Applied Technologies, Inc. | | | | | | |
| 4. | Site Location | Street Address: 700 Comanche Rd. N | ΙE | | 0.00 No. 30 - 20 No. 60 No. | | | | |
| | Information | City, Town, or Village: Albuquerque | County:Bernalillo | | | | | | |
| | | State: New Mexico | Country: U | SA | Zip Code:87107 | | | | |
| 5. | Site Land Type | Private County Distri | | | Municipal State Other | | | | |
| | NAICS Code(s) | | C. | and the base of the second | | | | | |
| | for the Site (at least 5-digit codes) | В. | 7.0 | D. | or return to the second of the | | | | |
| 7. | Site Mailing | Street or P.O. Box:700 Comanche Rd. NE | | | | | | | |
| | Address | City, Town, or Village: Albuquerque | | | | | | | |
| | | State: NM | Country: US | SA | Zip Code:87107 | | | | |
| 8. | Site Contact | First Name:Roger | MI:L | Last: Umber | of Ingranphakager | | | | |
| | Person | Title: EH&S Manger | | | upgs . Alf the step in | | | | |
| | L. L. | Street or P.O. Box: 700 Comanche Rd | I. NE | * | | | | | |
| lis | | City, Town or Village: Albuquerque | | | | | | | |
| | | State: NM | Country: US | SA | Zip Code:87107 | | | | |
| | | Email:roger.umber@l-3com.com | | | | | | | |
| | | Phone: 505-344-7455 | Fax:505-344-7344 | | | | | | |
| 9. | and Operator | A. Name of Site's Legal Owner: Warehousing of NM, Ltd., Co. Date Became Owner: July 01, 1993 | | | | | | | |
| | of the Site | Owner Type: Private County District Federal Tribal Municipal State Other Street or P.O. Box: 11995 El Camino Real, Suite #303 | | | | | | | |
| | The second second at the second secon | City, Town, or Village: San Diego | Distriction of Salari 17 | | | | | | |
| | | State: CA | Phone: Zip Code:92121 | | | | | | |
| | | B. Name of Site's Operator: L-3 Comm | Date Became Luky 20, 2005 | | | | | | |
| | | Operator — — — — — — | | | | | | | |
| | Kan Timed | Type: Private County District Federal Tribal Municipal State Other | | | | | | | |

| 10. Type of Mark "Y | Regulated Waste /es" or "No" for a | Activity (at your site) Il <u>current</u> activities (as of th | e date submitting the | e form); complete any additional boxes as instruct | ed. |
|------------------------|---------------------------------------|---|---|--|--------|
| A. Hazardo | ous Waste Activiti | es; Complete all parts 1-10 | • | 2 months | 100 |
| YV N | | of Hazardous Waste ark only one of the following | Y N 5. Transporter of Hazardous Waste If "Yes", mark all that apply. | | |
| | a. LQG: | Generates, in any calendar (2,200 lbs./mo.) or more of Generates, in any calendar accumulates at any time, m lbs./mo) of acute hazardous Generates, in any calendar accumulates at any time, m (220 lbs./mo) of acute hazar material. | mazardous waste; or month, or ore than 1 kg/mo (2.2 waste; or month, or ore than 100 kg/mo | a. Transporter b. Transfer Facility (at your site) Y N 6. Treater, Storer, or Disposer of Hazardous Waste Note: A hazardo waste Part B permit is required for the activities. | |
| | П | 1001 1 0001 / 1000 | | Y N 7. Recycler of Hazardous Waste | 4. |
| | b. SQG: | 100 to 1,000 kg/mo (220 – 2 acute hazardous waste. | 2,200 lbs./mo) of non- | | |
| If "Yes | c. CESQG: | Less than 100 kg/mo (220 ll hazardous waste. other generator activities in | | Y N 8. Exempt Boiler and/or Industrial Formula if "Yes", mark all that apply. a. Small Quantity On-site Burner Exemption | urnace |
| Y N | event and not | enerator (generate from a sh from on-going processes). If the Comments section. | | b. Smelting, Melting, and Refining Furnace Exemption | I |
| Y N | 3. United State | s Importer of Hazardous Wa | aste | Y N 9. Underground Injection Control | |
| Y N | 4. Mixed Waste | (hazardous and radioactive | e) Generator | Y N 10. Receives Hazardous Waste from site | Off- |
| B. Univers | al Waste Activitie | es; Complete all parts 1-2. | | C. Used Oil Activities; Complete all parts 1-4. | |
| Υ□N | accumul regulatio types of | uantity Handler of Universal ate 5,000 kg or more) [refer ons to determine what is reg universal waste managed a that apply. | to your State julated]. Indicate | Y N 1. Used Oil Transporter If "Yes", mark all that apply. a. Transporter b. Transfer Facility (at your site) | |
| | a. Batter b. Pestic | | | Y N 2. Used Oil Processor and/or Re-refi If "Yes", mark all that apply. | iner |
| | c. Mercu | ry containing equipment | | a. Processor | |
| | d. Lamps | S | | b. Re-refiner | |
| | | (specify) | | Y N 3. Off-Specification Used Oil Burner | |
| | | (specify) | | Y N 4. Used Oil Fuel Marketer If "Yes", mark all that apply. | |
| Υ∏N | | ion Facility for Universal W hazardous waste permit may | | a. Marketer Who Directs Shipmer Specification Used Oil to Off-Specification Used Oil Burner b. Marketer Who First Claims the Oil Meets the Specifications | |
| | | | | I STATE OF THE PARTY OF THE PAR | |

| EPA ID Nu | ımbar | INIMIDIIGI | 8 6 6 8 4 | 16 12 19 1 | OMB | #: 2050-0024; Exp | ires 12/31/2014 | | |
|------------------|--|--|---|---|---|---|----------------------------------|--|--|
| | | | Laboratories—Notifi | | | | | | |
| wastes | s pursu | ant to 40 CFR Part | 262 Subpart K | | _ | | | | |
| * ` | | ONLY Opt into Sub | | | | | | | |
| • | you are at least one of the following: a college or university; a teaching hospital that is owned by or has a formal affiliation agreement with a college or university; or a non-profit research institute that is owned by or has a formal affiliation agreement wit a college or university; AND | | | | | | | | |
| • | you h | ave checked with y | our State to determine | e if 40 CFR Part 262 | Subpart K is effective | e in your state | | | |
| Y NE |] 1. Op S e | oting into or currently e the item-by-item | y operating under 40 instructions for def | CFR Part 262 Subpa finitions of types of | rt K for the managen eligible academic e | nent of hazardous wa ntities. Mark all tha | stes in laboratories t apply: | | |
| ļ | ☐a. | College or Univers | sity | | | | | | |
| | □ b. | Teaching Hospital | that is owned by or h | as a formal written a | ffiliation agreement w | ith a college or unive | ersity | | |
| | C. | Non-profit Institute | that is owned by or h | nas a formal written a | iffiliation agreement v | vith a college or unive | ersity | | |
| | 2. W | thdrawing from 40 (| CFR Part 262 Subpar | t K for the manageme | ent of hazardous was | stes in laboratories | | | |
| 14 Decem | intlen e | F Hamandaya Waste | | | | | | | |
| A. Waste your si | Description of Hazardous Waste Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed. | | | | | | | | |
| D001 | | | | | | | | | |
| D003 | 3 | | | | | | | | |
| D008 | В | | | | | | | | |
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| hazaro | | stes handled at you | d (i.e., non-Federal) r site. List them in the | | | | | | |
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| PA ID Number | LNI | M | ه اام | IΩ | IRUR | IΩ | A E | 12 10 |
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| :PA ID NUMBER | 1 1/1 | IVI | פווט | 10 | סווסו | 10 | 14110 | 12 19 |

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| 12. | 2. Notification of Hazardous Secondary Material (HSM) Activity | | | | | | |
|-----|---|---|--|---------------------------------|--|--|--|
| Υ[| Are you notifying under 40 CFR 260.42 that you will begin managing, are managing, or will stop managing hazardous secondary material under 40 CFR 261.2(a)(2)(ii), 40 CFR 261.4(a)(23), (24), or (25)? | | | | | | |
| | | If "Yes", you <u>must</u> fill out the Addend Material. | um to the Site Identification Form: Notification f | or Managing Hazardous Secondary | | | |
| 13. | Comme | its | | | | | |
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| 14. | 14. 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 fines and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all owner(s) and operator(s) must sign (see 40 CFR 270.10(b) and 270.11). | | | | | | |
| Si | gnature of thorized r | legal owner, operator, or an epresentative | Name and Official Title (type or print) | Date Signed (mm/dd/yyyy) | | | |
| 1 | age | I Thelier | Roger Umber, EH&S Manager | 10/18/2013 | | | |
| | 10 | 1 | Robert Achenbach, Division Manager | 10/18/2013 | | | |
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