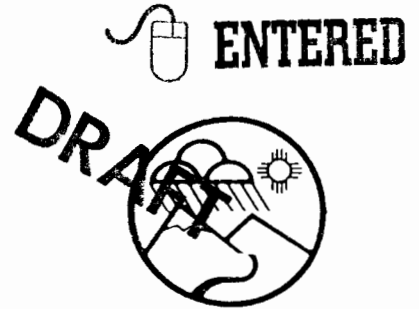





GARY E. JOHNSON  
GOVERNOR

State of New Mexico  
**ENVIRONMENT DEPARTMENT**  
Hazardous & Radioactive Materials Bureau  
2044 Galisteo  
P.O. Box 26110  
Santa Fe, New Mexico 87502  
(505) 827-1557  
Fax (505) 827-1544



 MARK E. WEIDLER  
SECRETARY

EDGAR T. THORNTON, III  
DEPUTY SECRETARY

**CERTIFIED MAIL  
RETURN RECEIPT REQUESTED**

January 24, 1996

James R. Hartman, Ph.D.  
Director  
Directorate of the Environment  
U.S. Army Air Defense Artillery Center and Fort Bliss  
ATZC-DOE  
Fort Bliss, Texas 79916-0058

**RE: Class III Modification for US Army Air Defense Artillery  
Center Fort Bliss Open Detonation Operational Permit  
EPA ID No. NM4213720101-01**

Dear Dr. Hartman:

This letter is written with reference to your letter of September 22, 1995 in which you requested a Class III Permit Modification to your existing Open Detonation Operational Permit. The New Mexico Environment Department (NMED) Hazardous and Radioactive Materials Bureau (HRMB) wishes to acknowledge receipt of the \$19,000 Class III Permit Modification fees.

NMED tentatively approves the proposed modification subject to public review. Before NMED makes a final decision on the draft permit modification, the public is required to participate in the permitting process as specified in the New Mexico Hazardous Waste Management Regulations 20 NMAC 4.1, Subpart IX.

Pursuant to New Mexico Hazardous Waste Management Regulations 20 NMAC 4.1, Subpart IX, 40 CFR §270.42(c)(2), the U.S. Army Air Defense Artillery Center Fort Bliss (hereafter Fort Bliss) is required to send a notice of modification request to all persons on the enclosed facility mailing list as specified in 40 CFR §124.10(c)(ix). In addition, Fort Bliss must publish this notice in a major local newspaper of general circulation. This notice must be mailed and published within seven days after receipt of this letter. Further, Fort Bliss must provide to the New Mexico Environment Department evidence of the mailing and publication.

Dr. Hartman, Fort Bliss  
Page 2  
January 24, 1996

Please send a copy of the notice as published in the newspaper, with a certificate of the date published to:

Barbara Hoditschek, RCRA Program Manager  
Hazardous and Radioactive Materials Bureau  
New Mexico Environment Department  
2044 Galisteo Street  
P.O. Box 26110  
Santa Fe, New Mexico, 87502

The public notice must include:

- (1) Announcement of a 60-day public comment period, including the start and end dates;
- (2) Location where copies of the permit, proposed modification request and supporting documents can be viewed and copied. This location should be at a site accessible to the public in the vicinity of the permitted facility;
- (3) Announcement of a date, time, and place for a public meeting on the modification request, in accordance with §270.42(c)(4). Fort Bliss must hold a public meeting no earlier than 15 days after the publication of the notice, and no later than 15 days before the close of the 60-day comment period. The meeting must be held to the extent practicable in the vicinity of the permitted facility;
- (4) The following statement: "Fort Bliss's compliance history during the life of the permit being modified is available from the NMED contact person."
- (5) Name and telephone number of Fort Bliss's contact person; and
- (6) The name, address, and telephone number of New Mexico Environment Department Hazardous and Radioactive Materials Bureau contact person:

Cornelius Amindyas  
Hazardous and Radioactive Materials Bureau  
New Mexico Environment Department  
2044 Galisteo Street  
P.O. Box 26110  
Santa Fe, New Mexico, 87502  
(505) 827-1563

Dr. Hartman, Fort Bliss  
Page 3  
January 24, 1996


Any person who wishes to comment upon the draft permit modification or to request a public hearing should submit written comments and requests, along with the commentor's name and address, to the NMED contact person. Requests for a public hearing shall state the nature of the issues proposed to be raised in the hearing and the name and address of the commentor. Only comments and/or requests received by HRMB during the 60-day public comment period will be considered. NMED will provide a thirty (30) day notice of a public hearing, if scheduled.

After the conclusion of the 60-day comment period, NMED will respond to the public comments received. All written comments submitted on the draft permit modification will be considered in formulating a final decision. NMED may modify the proposed permit based on the comments received. NMED will notify Fort Bliss and each person who submitted a written comment during the public comment period of the final decision.

After consideration of all written comments received, NMED will approve, or modify and approve the draft permit modification. If NMED modifies and approves the draft permit, then NMED shall provide Fort Bliss with a detailed written statement of reasons for the modification and the modified draft permit will become the approved permit. A copy of the modified pages of the permit with a detailed statement of the reasons for the modifications will be mailed to Fort Bliss.

Enclosed is a copy of the proposed modification for public review. If you have any questions regarding the modification, please call me or Cornelius Amindyas at (505) 827-1563.

Sincerely,

  
Barbara Hoditschek, Manager  
RCRA Permits Program  
Hazardous and Radioactive Materials Bureau

Enclosure

cc: Benito Garcia, Chief HRMB (w/o encl.)  
David Neleigh, EPA Region [6PD-N] (w/o encl.)  
Ken Smith, NMED District III (w/o encl.)  
Lilia Lenhart, Fort Bliss (w/o encl.)  
Steve Pullen, HRMB (w/o encl.)  
Cornelius Amindyas, HRMB (w/o encl.)  
Files-Red and Reading, 96

**FORT BLISS CLASS III proposed PERMIT MODIFICATION: OD TREATMENT UNIT**

January 24, 1996

Modifications made to the U.S Army Air Defense Artillery Center and Fort Bliss (hereafter **Fort Bliss**) Open Detonation Operational Permit issued June 8, 1995 are indicated as follows: **Shaded areas** indicate added material, while ~~strikeouts~~ indicate deleted material.

**Item # 1:**

**NOTE:** Permit Module I, Page 11 of 12, Paragraph 1, the New Hazardous and Radioactive Materials Bureau contact address has been changed as follows:

RCRA Permits Program Manager  
Hazardous and Radioactive Materials Bureau  
New Mexico Environment Department  
~~525 Marquez Camino de los Marquez~~  
**2044 Galisteo Street**  
P.O. Box 26110  
Santa Fe, New Mexico 87502

Telephone Number: (505) 827-~~1563~~ **4308**

Facsimile Number: (505) 827-~~1544~~ **4361**

**ITEM # 2:**

Permit Attachment A, page 1, Paragraph 3 has been revised as follows:

**PERMIT ATTACHMENT A**

**WASTE ANALYSIS PLAN**

The following information describes the measures that will be taken to assure that the wastes treated at the Open Detonation (OD) treatment unit by the U.S. Army Air Defense Artillery Center and Fort Bliss (USAADACENFB) are in accordance with the requirements of HWMR-7, Part. V, § 264.13, and the unit-specific requirements of HWMR-7, Part. V, § 264, Subpart X.

The OD unit is a thermal treatment unit owned by the United States Government and operated by USAADACENFB. The hazardous wastes to be treated at the OD unit include propellants, explosives, and pyrotechnics (PEP), in the form of pure substances and contaminated solid wastes. The waste materials subject to treatment result from demilitarization of existing stockpiles and off specification materials. When records indicate that PEP materials have reduced military use due to age, the materials are segregated, designated "waste material", and they are transported to the OD treatment unit for demolition by EOD personnel.

USAADACENFB plans to detonate up to ~~1372~~ 10,000 pounds (~~623~~ 4539 kilograms) of hazardous waste munitions per calendar year or ~~343~~ 2,500 pounds (~~156~~ 1135 kilograms) per quarter. Tables A-2 through A-7 are a list of the waste munitions that will be treated at the OD unit.

**ITEM # 3:**

Permit Attachment F, Page 2, Paragraph 4 has been revised as follows:

**Maximum Waste Inventory:**

The maximum inventory of waste expected to be in treatment at the OD unit at anytime during the life of the unit will not exceed ~~343~~ 2,500 pounds (~~156~~ 1135 kilograms) Net Explosive Weight (NEW) of munitions per quarter of explosive-contaminated material. No more than ~~1372~~ 10,000 pounds (~~623~~ 4539 kilograms) NEW of materials will be detonated in a year. Therefore, the expected waste inventory for the permitted life of the open detonation treatment unit is ~~13,720~~ 100,000 pounds (~~6230~~ 45,390 kilograms) of waste munitions.

**ITEM # 4:**

Permit Module III, Page 1, Paragraphs 3 and 4 have been revised as follows:

**B. PERMITTED AND PROHIBITED WASTE IDENTIFICATION**

- B.1. The Permittee may open detonate only the wastes listed in Permit Attachment M (Permitted Waste Codes and Maximum Treatment Quantities) and in Tables A-2 through A-6. The Permittee is

prohibited from treating Radioactive Nuclear Waste, Mixed Waste, and Polychlorinated Biphenyls (PCBs). All treatment shall consist of explosive open detonation only.

- B.2. The Permittee is prohibited from treating hazardous waste that is not identified in Permit Condition B.1. above, including shipping and storage containers for waste explosives. The amount of waste munitions to be open detonated shall not exceed ~~1372~~ 10,000 pounds (~~623~~ 4,539 kilograms) Net Explosive Weight (NEW) per calendar year or ~~13,720~~ 100,000 pounds (~~6230~~ 45,390 kilograms) (NEW) for the permitted life of the OD treatment unit.
- B.3. The Permittee shall not open detonate more than ~~343~~ 2,500 pounds (~~156~~ 1135 kilograms) waste munitions per quarter, except in case of an emergency, after authorization by the Secretary.

**ITEM # 5:**

Permit Attachment I, Page 1, Paragraph 4 has been revised as follows:

**Explosive Limits:**

Explosive limits will be established for each disposal operation so that each EOD Team Leader will be charged with the responsibility of not exceeding the established limit of ~~343~~ pounds 2,500 pounds (~~156~~ 1135 kilograms) per quarter.

**ITEM # 6:**


Permit Attachment I, Page 3, Paragraph 5, has been revised as follows:

**Quantity of Waste per Movement**

The weight of PEP per movement, including shipping containers, will not exceed the load limit of the vehicle. However, practically the loads are much less and are not expected to exceed ~~343~~ 2,500 pounds (~~156~~ 1135 kilograms) per load.

## Fort Bliss Proposed Class III Permit Modification

**NOTE:** See Page 4 of 7 for proposed change in quantity of hazardous waste munitions to be treated at the Open Detonation Treatment Unit.

For EPA Regional Use Only  Date Received Month    Day    Year _____	 United States Environmental Protection Agency Washington, DC 20460 <h2 style="margin: 10px 0;">Hazardous Waste Permit Application</h2> <h3 style="margin: 0 0 10px 0;">Part A</h3> <p style="font-size: small; margin: 0;">(Read the Instructions before starting)</p>
---	---

**I. Installation's EPA ID Number (Mark 'X' in the appropriate box)**

<input type="checkbox"/> <b>A. First Part A Submission</b>	<input type="checkbox"/> <b>B. Part A Amendment #</b> _____
--	---

<b>C. Installation's EPA ID Number</b> N M 4 2 1 3 7 2 0 1 0 1	<b>D. Secondary ID Number (If applicable)</b> _____
---	--

**II. Name of Facility**

U S    A R M Y    A I R    D E F    A R T Y    F T    B L I S S
---

**III. Facility Location (Physical address not P.O. Box or Route Number)**

<b>A. Street</b>																											
1	0	M	I	L	E	S	E	A	S	T	O	F	U	S	H	I	G	H	W	A	Y	5	4				
<b>Street (Continued)</b>																											
A	T	M	C	G	R	E	G	O	R	R	A	N	G	E	I	N	N	M	E	X							
<b>City or Town</b>												<b>State</b>	<b>Zip Code</b>														
F	O	R	T	B	L	I	S	S							T	X	7	9	9	1	6	-	6	8	1	6	
<b>County Code</b> <small>(if known)</small>			<b>County Name</b>																								
			O	T	E	R	O																				

<b>B. Land Type</b> <small>(Enter code)</small>	<b>C. Geographic Location</b>	<b>D. Facility Existence Date</b>
F	LATITUDE (Degrees, Minutes, & Seconds)    LONGITUDE (Degrees, Minutes & Seconds) 3 2 0 5 0 1 5    1 0 6 0 4 0 4 5	Month    Day    Year 0 1 0 1 1 9 6 5

**IV. Facility Mailing Address**

<b>Street or P.O. Box</b>																										
H	Q	U	S	A	A	D	A	C	E	N	F	B	A	T	Z	C	-	D	O	E						
<b>City or Town</b>												<b>State</b>	<b>Zip Code</b>													
F	O	R	T	B	L	I	S	S							T	X	7	9	9	1	6	-	6	8	1	6

**V. Facility Contact (Person to be contacted regarding waste activities at facility)**

<b>Name (Last)</b>												<b>(First)</b>															
H	A	R	T	M	A	N						J	A	M	E	S	R.										
<b>Job Title</b>												<b>Phone Number (Area Code and Number)</b>															
D	I	R	E	C	T	O	R					9	1	5	-	5	6	8	-	1	3	8	5				

**VI. Facility Contact Address (See instructions)**

<b>A. Contact Address</b> <small>Location    Mailing    Other</small>			<b>B. Street or P.O. Box</b>																								
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	H	Q	U	S	A	A	D	A	C	E	N	F	B	A	T	Z	C	-	D	O	E				
<b>City or Town</b>												<b>State</b>	<b>Zip Code</b>														
F	O	R	T	B	L	I	S	S							T	X	7	9	9	1	6	-	6	8	1	6	



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

<b>EPA I.D. Number (Enter from page 1)</b>	<b>Secondary ID Number (Enter from page 1)</b>
N M 4 2 1 3 7 2 0 1 0 1	

**VII. Operator Information (See Instructions)**

**Name of Operator**  
C O M M A N D E R 4 1 s t E O D

**Street or P.O. Box**  
C O M M A N D E R A T T N : 4 1 s t O R D D E T

<b>City or Town</b>	<b>State</b>	<b>ZIP Code</b>
F O R T B L I S S	T X	7 9 9 1 6 - 6 8 1 6

<b>Phone Number (Area Code and Number)</b>	<b>B. Operator Type</b>	<b>C. Change of Operator Indicator</b>	<b>Date Changed</b>
9 1 5 - 5 6 8 - 8 9 0 5	F	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Month Day Year

**VIII. Facility Owner (See Instructions)**

**A. Name of Facility's Legal Owner**  
U S A R M Y A I R D E F A R T Y F T B L I S S

**Street or P.O. Box**  
H Q U S A A D A C E N F B A T T N : A T Z C - D O E

<b>City or Town</b>	<b>State</b>	<b>ZIP Code</b>
F O R T B L I S S	T X	7 9 9 1 6 - 6 8 1 6

<b>Phone Number (Area Code and Number)</b>	<b>B. Owner Type</b>	<b>C. Change of Owner Indicator</b>	<b>Date Changed</b>
9 1 5 - 5 6 8 - 3 8 9 9	F	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Month Day Year

**IX. SIC Codes (4-digit, in order of significance)**

Primary	Secondary
9 7 1 (Description) NATIONAL SECURITY & INT AFFAIRS	(Description)
Secondary	Secondary
(Description)	(Description)

**X. Other Environmental Permits (See Instructions)**

A. Permit Type (Enter code)	B. Permit Number	C. Description
N	N M 0 0 2 0 3 3 8	OROGRANDE
N	N M 0 0 2 0 3 2 0	DONA ANA
N	N M 0 0 2 0 3 4 6	McGREGOR

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

<b>EPA I.D. Number (Enter from page 1)</b>	<b>Secondary ID Number (Enter from page 1)</b>																								
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%;">N</td><td style="width: 12.5%;">M</td><td style="width: 12.5%;">4</td><td style="width: 12.5%;">2</td><td style="width: 12.5%;">1</td><td style="width: 12.5%;">3</td><td style="width: 12.5%;">7</td><td style="width: 12.5%;">2</td><td style="width: 12.5%;">0</td><td style="width: 12.5%;">1</td><td style="width: 12.5%;">0</td><td style="width: 12.5%;">1</td> </tr> </table>	N	M	4	2	1	3	7	2	0	1	0	1	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%; height: 20px;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td> </tr> </table>												
N	M	4	2	1	3	7	2	0	1	0	1														

**XI. Nature of Business (Provide a brief description)**

Ongoing missions and activities conducted by the United States Army Air Defense Artillery Center and Fort Bliss (USAADACENFB) include: field training exercises employing troops, equipment, and vehicles in tactical situations, missile and artillery firings, aerial gunnery, training and air support operations. In addition, Fort Bliss conducts testing of military ordances and weapon systems. Other activities vehicle and installation maintenance.

**XII. Process Codes and Design Capacities**

**A. PROCESS CODE** - Enter the code from the list of process codes below that best describes each process to be used at the facility. Thirteen lines are provided for entering codes. If more lines are needed, attach a separate sheet of paper with the additional information. For "other" processes (i.e., D99, S99, T04 and X99), describe the process (including its design capacity) in the space provided in Item XIII.

**B. PROCESS DESIGN CAPACITY** - For each code entered in column A, enter the capacity of the process.

- AMOUNT** - Enter the amount. In a case where design capacity is not applicable (such as in a closure/post-closure or enforcement action) enter the total amount of waste for that process.
- UNIT OF MEASURE** - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

**C. PROCESS TOTAL NUMBER OF UNITS** - Enter the total number of units used with the corresponding process code.

PROCESS CODE	PROCESS	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS CODE	PROCESS	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY		
<u>Disposal:</u>			T87	Smelting, Melting, Or Refining Furnace	} Gallons Per Day; Liters Per Day; Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Hour; or Btu's Per Hour		
D79	Underground Injection	Gallons; Liters; Gallons Per Day; or Liters Per Day	T88	Titanium Dioxide Chloride Process Oxidation Reactor			
D80	Landfill	Acre-feet or Hectare-meter	T89	Methane Reforming Furnace			
D81	Land Treatment	Acres or Hectares	T90	Pulping Liquor Recovery Furnace			
D82	Ocean Disposal	Gallons Per Day r Liters Per Day	T91	Combustion Device Used In The Recovery Of Sulfur Values From Spent Sulfuric Acid			
D83	Surface Impoundment	Gallons or Liters	T92	Halogen Acid Furnaces			
D99	Other Disposal	Any Unit of Measure Listed Below	T93	Other Industrial Furnaces Listed In 40 CFR §260.10			
<u>Storage:</u>			T94	Containment Building-Treatment			
S01	Container (Barrel, Drum, Etc.)	Gallons or Liters	<u>Miscellaneous (Subpart X):</u>				
S02	Tank	Gallons or Liters	X01	Open Burning/Open Detonation		Any Unit of Measure Listed Below	
S03	Waste Pile	Cubic Yards or Cubic Meters	X02	Mechanical Processing	Short Tons Per Hour; Metric Tons Per Hour; Short Tons Per Day; Metric Tons Per Day; Pounds Per Hour; or Kilograms Per Hour		
S04	Surface Impoundment	Gallons or Liters	X03	Thermal Unit	Gallons Per Day; Liters Per Day; Pounds Per Hour; Short Tons Per Hour; Metric Tons Per Day; or Btu's Per Hour		
S05	Drip Pad	Gallons or Liters			X04	Geologic Repository	Cubic Yards or Cubic Meters
S06	Containment Building-Storage	Cubic Yards or Cubic Meters					X99
S99	Other Storage	Any Unit of Measure Listed Below					
<u>Treatment:</u>							
T01	Tank	Gallons Per Day or Liters Per Day					
T02	Surface Impoundment	Gallons Per Day or Liters Per Day					
T03	Incinerator	Short Tons Per Hour; Metric Tons Per Hour; Gallons Per Hour; Liters Per Hour; or Btu's Per Hour					
T04	Other Treatment	Gallons Per Day; Liters Per Day; Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Short Tons Per Day; or Btu's Per Hour					
T80	Boller	Gallons or Liters					
T81	Cement Kiln	Gallons Per Day; Liters Per Day; Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Short Tons Per Day; or Btu's Per Hour					
T82	Lime Kiln	Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Short Tons Per Day; or Btu's Per Hour					
T83	Aggregate Kiln	Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Short Tons Per Day; or Btu's Per Hour					
T84	Phosphate Kiln	Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Short Tons Per Day; or Btu's Per Hour					
T85	Coke Oven	Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Short Tons Per Day; or Btu's Per Hour					
T86	Blast Furnace	Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Short Tons Per Day; or Btu's Per Hour					

UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE
Gallons .....	G	Short Tons Per Hour .....	D
Gallons Per Hour .....	E	Metric Tons Per Hour .....	W
Gallons Per Day .....	U	Short Tons Per Day .....	N
Liters .....	L	Metric Tons Per Day .....	S
Liters Per Hour .....	H	Pounds Per Hour .....	J
Liters Per Day .....	V	Kilograms Per Hour .....	R
Cubic Yards .....	Y	Cubic Meters .....	C
Cubic Meters .....	C	Acres .....	B
Acres .....	B	Acre-feet .....	A
Acre-feet .....	A	Hectares .....	Q
Hectares .....	Q	Hectare-meter .....	F
Hectare-meter .....	F	Btu's Per Hour .....	I
Btu's Per Hour .....	I		

EPA I.D. Number (Enter from page 1)

Secondary ID Number (Enter from page 1)

N M 4 2 1 3 7 2 0 1 0 1

**XII. Process Codes and Design Capabilities (Continued)**

EXAMPLE FOR COMPLETING ITEM XII (Shown in line number X-1 below): A facility has a storage tank, which can hold 533,788 gallons.

Line Number	A. Process Code <small>(From list above)</small>				B. PROCESS DESIGN CAPACITY				C. Process Total Number Of Units	For Official Use Only								
					1. Amount (Specify)		2. Unit Of Measure (Enter code)											
X 1	S	0	2		5	3	3	7	8	8	G	0	0	1				
1	T	0	4		1372.00		10,000.00				lbs/yr							
2																		
3																		
4																		
5																		
6																		
7																		
8																		
9																		
1 0																		
1 1																		
1 2																		
1 3																		

NOTE: If you need to list more than 13 process codes, attach an additional sheet(s) with the information in the same format as above. Number the lines sequentially, taking into account any lines that will be used for "other" processes (i.e., D99, S99, T04 and X99) in item XIII.

**XIII. Other Processes (Follow instructions from Item XII for D99, S99, T04 and X99 process codes)**

Line Number <small>(Enter #s in seg w/XII)</small>	A. Process Code <small>(From list above)</small>				B. PROCESS DESIGN CAPACITY				C. Process Total Number Of Units	D. Description Of Process
					1. Amount (Specify)		2. Unit Of Measure (Enter code)			
X 1	T	0	4							In-situ Vitrification
1										
2										
3										
4										

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

EPA I.D. Number (Enter from page 1)											Secondary ID Number (Enter from page 1)										
N	M	4	2	1	3	7	2	0	1	0	1										

**XIV. Description of Hazardous Wastes**

- A. EPA HAZARDOUS WASTE NUMBER - Enter the four-digit number from 40 CFR, Part 261 Subpart D of each listed hazardous waste you will handle. For hazardous wastes which are not listed in 40 CFR, Part 261 Subpart D, enter the four-digit number(s) from 40 CFR, Part 261 Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.
- B. ESTIMATED ANNUAL QUANTITY - For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.
- C. UNIT OF MEASURE - For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

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

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

**D. PROCESSES**

**1. PROCESS CODES:**

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in item XII A. on page 3 to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous waste: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in item XII A. on page 3 to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

**NOTE: THREE SPACES ARE PROVIDED FOR ENTERING PROCESS CODES. IF MORE ARE NEEDED:**

1. Enter the first two as described above.
2. Enter "000" in the extreme right box of item XIV-D(1).
3. Enter in the space provided on page 7, item XIV-E, the line number and the additional code(s).

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

**NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER - Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:**

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each EPA Hazardous Waste Number that can be used to describe the hazardous waste.

**EXAMPLE FOR COMPLETING ITEM XIV (shown in line numbers X-1, X-2, X-3, and X-4 below) - A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.**

Line Number	A. EPA HAZARD WASTE NO. (Enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (Enter code)	D. PROCESS									
				(1) PROCESS CODES (Enter code)				(2) PROCESS DESCRIPTION (if a code is not entered in D(1))					
X 1	K 0 5 4	900	p	T	0	3	D	8	0				
X 2	D 0 0 2	400	P	T	0	3	D	8	0				
X 3	D 0 0 1	100	P	T	0	3	D	8	0				
X 4	D 0 0 2									Included With Above			

<b>EPA I.D. Number (Enter from page 1)</b>	<b>Secondary ID Number (Enter from page 1)</b>
--	--

N	M	4	2	1	3	7	2	0	1	0	1
---	---	---	---	---	---	---	---	---	---	---	---

--	--	--	--	--	--	--	--	--	--	--	--

**XIV. Description of Hazardous Wastes (Continued)**

Line Number	A. EPA HAZARDOUS WASTE NO. (Enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (Enter code)	D. PROCESSES																
				(1) PROCESS CODES (Enter code)				(2) PROCESS DESCRIPTION (If a code is not entered in D(1))												
1	D 0 0 3	10,000	P	T	O	4														
2																				
3																				
4																				
5																				
6																				
7																				
8																				
9																				
10																				
11																				
12																				
13																				
14																				
15																				
16																				
17																				
18																				
19																				
20																				
21																				
22																				
23																				
24																				
25																				
26																				
27																				
28																				
29																				
30																				
31																				
32																				
33																				

EPA I.D. Number (Enter from page 1)										Secondary ID Number (Enter from page 1)													
N	M	4	2	1	3	7	2	0	1	0	1												

**XV. Map**

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

**XVI. Facility Drawing**

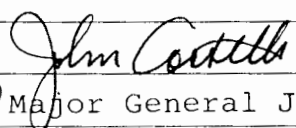
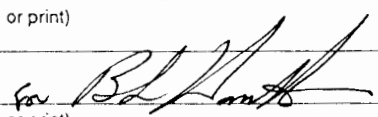
All existing facilities must include a scale drawing of the facility (see instructions for more detail).

**XVII. Photographs**

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

**XVIII. Certification(s)**

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.

Owner Signature		Date Signed	18 Sep 95
Name and Official Title (Type or print)	Major General John Costello, USA, Commanding		
Owner Signature		Date Signed	
Name and Official Title (Type or print)			
Operator Signature		Date Signed	11 Sep 95
Name and Official Title (Type or print)	Dean A. Meinert, 1LT, OD, Commanding		
Operator Signature		Date Signed	
Name and Official Title (Type or print)			

**XIX. Comments**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Note: Mail completed form to the appropriate EPA Regional or State Office. (Refer to instructions for more information)