LANL FFCO 05

Los Alamos
NATIONAL LABORATORY

Solid Waste Regulatory Compliance
P.O. Box 1663, Mail Stop K490
Los Alamos, New Mexico 87545
(505) 667-0666/Fax (505) 667-5224

RECEIVED
MAY 2005
NMED Hazardous Waste Bureau

Date: May 3, 2005
Refer To: SWRC:05-028

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Ms. Lee Winn
Hazardous Waste Bureau
New Mexico Environment Department
2905 Rodeo Park Drive East, Building 1
Santa Fe, New Mexico 87505-6303

SUBJECT: NOTICE OF COMPLETION OF OFF-SITE WASTE SHIPMENT ACTIVITY 3.1.8 (B) and 3.1.9 (B) IN THE COMPLIANCE PLAN VOLUME (CPV), SITE TREATMENT PLAN (STP), LOS ALAMOS NATIONAL LABORATORY (LANL)

Dear Ms. Winn:

The purpose of this letter is to notify the New Mexico Environment Department (NMED) of completion of required activities set forth in the Federal Facility Compliance Order (FFCO). Activities 3.1.8 (B) and 3.1.9 (B) in the CPV requires that *"(w)ithin 45 days of receipt of waste at treatment facility or within 45 days after completion of parallel option"* the Department of Energy (DOE) and the University of California (UC), *"provide documentation to NMED that waste was received at off-site facility or provide notification of parallel option."*

A shipment that included STP covered waste listed in Sections 3.1.8 and 3.1.9 of the CPV was initiated on March 24, 2005, and completed on March 25, 2005. The waste was sent to Clean Harbors in La Porte, Texas. A second shipment that included STP covered waste listed in Section 3.1.9 of the CPV was initiated on March 25, 2005, and completed on March 30, 2005. The waste was sent to Onyx Environmental Services in Henderson, Colorado. The volume of STP waste shipped is described in the following table:

STP Section	MWIR Waste ID	Treatability Group	Manifest Number	Volume Shipped (m^3)
3.1.8	LA-W917	*Compressed Gases Requiring Scrubbing*	05152 05154	0.1374 0.1561
3.1.9	LA-W918	*Compressed Gases Requiring Oxidation*	05152 05154	0.1170 0.3822
Total STP Volume Shipped				**0.7927**

2241

Documentation that waste was received at the aforementioned facility is provided in Enclosure A. Also included as Enclosure B is a Certification Statement prepared in accordance with the requirements of Section XX, "*Documents, Information, and Reporting Requirements*," of the FFCO.

Please contact me (505) 667-4715 or dyea@lanl.gov if you have any questions.

Sincerely,

Albert Dye
STP Project Manager

AD:vc

Enc: a/s

Cy: w/enc.

Mr. James Bearzi
Hazardous Waste Bureau
New Mexico Environment Department
2905 Rodeo Park East, Bldg. 1
Santa Fe, New Mexico 87505

ENCLOSURE A

DOCUMENTATION THAT WASTE WAS RECEIVED AT OFF-SITE FACILITY
ACTIVITIES 3.1.8 AND 3.1.9
SITE TREATMENT PLAN (STP)
LOS ALAMOS NATIONAL LABORATORY (LANL)

TEXAS NATURAL RESOURCE
CONSERVATION COMMISSION
P.O. Box 13087
Austin, Texas 78711-3087

bb# C9940353

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

Form approved. OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. NM0890010515 | Manifest Document No. 05152

2. Page 1 of 2

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
U of CA LANL for US DOE
Los Alamos National Laboratory
P.O. Box 1663, MS J595, Los Alamos, NM 87545
505 665-6158

4. Generator's Phone ( )

A. State Manifest Document Number: 02129527

B. State Generator's ID: 99935

5. Transporter 1 Company Name: ~~CLEAN HARBORS ARAGONITE, LLC~~ Rebbie Direct Incorporated ~~S.S. ENVIRONMENTAL SERVICES~~ 3/23/05

6. US EPA ID Number: ALD067138891 ~~UTD981577~~ 3/24/05

C. State Transporter's ID: 40067

D. Transporter's Phone: ~~801-531-1205~~ (205) 749-4 ~~(801) 349-1800~~

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Clean Harbors Laporte, LP
500 Battle Ground Road
Laporte, TX 77571

10. US EPA ID Number: TXD982290140

G. State Facility's ID: Seq25

H. Facility's Phone: 281-476-0645

11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
x	a. WASTE ARSINE, 2.3, UN2188, , POISON-INHALATION HAZARD ZONE A	1	CY	14	k	D001 OUTS 701 H
x	b. WASTE COMPRESSED GAS, TOXIC, FLAMMABLE, CORROSIVE, N.O.S., 2.3, UN3305, (HYDROGEN, FLUORINE, HYDROGEN CHLORIDE), POISON-INHALATION HAZARD ZONE A	1	CY	88	k	D001 D002 OUTS 701 H
x	c. WASTE COMPRESSED GAS, TOXIC, FLAMMABLE, N.O.S., 2.3, UN1953, (PENTABORANE, HYDROGEN), POISON INHALATION HAZARD ZONE A	1	CY	2	k	D001 D003 OUTS 861 H
x	d. WASTE COMPRESSED GAS, TOXIC, OXIDIZING, CORROSIVE, N.O.S., 2.3, UN3306, , (FLUORINE, AIR), POISON-INHALATION HAZARD ZONE A	1	CY	36	k	F056 D001 OUTS 701 H

CR
FS ✓
OFFC

J. Additional Descriptions for Materials Listed Above
11a. C9303412 LCY10 1YCYSM
11b. 907505 LCY10 1YCYLC
11c. C9402388 LCY12 1YCYLC
11d. 91001837 ~~LCY8~~ LCY5 1YCYLC SS

K. Handling Codes for Wastes Listed Above: H141

15. Special Handling Instructions and Additional Information

EMERGENCY PHONE NO: (505) 667-6211
11a. ERGNO: 119 11b. ERGNO: 119 11c. ERGNO: 119 11d. ERGNO: 124

HMTF#: 05032201

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name: Paul N. Newberry | Signature | Month 03 Day 24 Year 05

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials | Date

Printed/Typed Name: FRANK Henderson | Signature | Month 03 Day 24 Year 05

18. Transporter 2 Acknowledgement of Receipt of Materials | Date

Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Date

Printed/Typed Name: Sylvia Oresny | Signature | Month 03 Day 25 Year 05

TNRCC-0311 (Rev. 07/01/97) White - original Pink-TSD Facility Yellow-Transporter Green-Generator's first copy

ENCLOSURE B
CERTIFICATION

NOTICE OF COMPLETION OF OFFSITE WASTE SHIPMENT ACTIVITIES 3.1.8 (B) AND 3.1.9 (B)
SITE TREATMENT PLAN (STP)
LOS ALAMOS NATIONAL LABORATORY (LANL)

I certify that I am the project manager responsible for overseeing the implementation of the Site Treatment Plan for the Los Alamos National Laboratory. To the best of my knowledge and belief, the information in this document is true, accurate, and complete.

Albert Dye

Albert Dye
STP Project Manager
Solid Waste Regulatory Compliance
Los Alamos National Laboratory
Operator

5/2/05
Date Signed

COPY

HEN000013231

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

Form Approved. OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: NM0890010515
Manifest Document No.: 05154

2. Page 1 of 4

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
51 CA LANL TOY US DOE
s Alamos National Laboratory
O. Box 1663, MS J595, Los Alamos, NM 87545

4. Generator's Phone (505) 665-6158

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name: ONYX ENVIRONMENTAL SERVICES, LLC

6. US EPA ID Number: NJD080631369

C. State Transporter's ID

D. Transporter's Phone: 800-688-4005

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
ONYX ENVIRONMENTAL SERVICES, L.L.C
9131 EAST 96TH AVENUE
HENDERSON, CO 80640

10. US EPA ID Number: COD980591184

G. State Facility's ID

H. Facility's Phone: 303-289-4827

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a.	X	WASTE ACETYLENE, DISSOLVED, 2.1, UN1001	1	CY	10	k	D001
b.	X	WASTE COMPRESSED GAS, FLAMMABLE, N.O.S., 2.1, UN1954, (PROPANE, CARBON DIOXIDE)	1	CY	10	k	D001
c.	X	WASTE COMPRESSED GAS,FLAMMABLE, N.O.S., 2.1, UN1954, (DEUTERATED METHANE)	1	CY	9	k	D001
d.	X	WASTE COMPRESSED GASES, FLAMMABLE, N.O.S., 2.1, UN1954, , (CHLOROTRIFLUOROETHYLENE, ARGON)	1	CY	7	k	D001

J. Additional Descriptions for Materials Listed Above
11a. 907797 — *592632
11b. 909927 —
11c. 909373 —
11d. 908265 —

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
EMERGENCY PHONE NO: (505) 667-6211
11a. ERGNO: 116 11b. ERGNO: 115 11c. ERGNO: 115 11d. ERGNO: 115

HMTF#: 05032202

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; **OR**, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Paul N. Newberry
Signature: [signature]
Month Day Year: 03 25 05

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Rick Phillips
Signature: [signature]
Month Day Year: 03 25 05

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Lon R. Link
Signature: Lon R. Link
Month Day Year: 03 30 05

GENERATOR

TRANSPORTER

FACILITY

* Mike Pope/MA 3-24-05

Style CF 17 LABELMASTER® (800) 621-5808 www.labelmaster.com

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

PRINTED ON RECYCLED PAPER USING SOYBEAN INK — PRINTED WITH SOY INK

ORIGINAL-RETURN TO GENERATOR

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

Form Approved. OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21. Generator's US EPA ID No.: NM0890010515

Manifest Document No.: 05152

22. Page 2 2

Information in the shaded areas is not required by Federal law.

23. Generator's Name

U of CA LANL for US DOE
Los Alamos National Laboratory
P.O. Box 1663, MS J595, Los Alamos, NM 87545

L. State Manifest Document Number: 02129527

M. State Generator's ID: 99935

24. Transporter 1 Company Name: CLEAN HARBORS ~~ARAGONITE, LLC~~ ENVIRONMENTAL SERVICES

25. US EPA ID Number: ~~UTD98157~~ MAD 039322250

N. State Transporter's ID

O. Transporter's Phone: ~~801-531-4200~~ 781 849 1800

26. Transporter ___ Company Name

27. US EPA ID Number

P. State Transporter's ID

Q. Transporter's Phone

	HM	28. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	29. Containers No.	Type	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
a.	x	WASTE COMPRESSED GAS, TOXIC, OXIDIZING, CORROSIVE, N.O.S., 2.3, UN3306, , (NITROUS OXIDE,NITROGEN DIOXIDE), POISON-INHALATION HAZARD ZONE A	1	CY	9	k	P078 D001 OUTS 701H
b.	x	WASTE COMPRESSED GASES, TOXIC, OXIDIZING, CORROSIVE, N.O.S., 2.3, UN3306, , (CHLORINE, FLUORINE), POISON-INHALATION HAZARD ZONE A	1	CY	45	k	P056 D001 OUTS 701H
c.							
d.							
e.							
f.							
g.							
h.							
i.							

S. Additional Descriptions for Materials Listed Above

28a. 903173 LCY7 1 XCYSM
28b. 91001836 LCY10 1 XCYLG

T. Handling Codes for Wastes Listed Above

32. Special Handling Instructions and Additional Information

EMERGENCY PHONE NO: (505) 667-6211
28a. ERGNO: 124 28b. ERGNO: 124

GENERATOR

TRANSPORTER

33. Transporter ___ Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

34. Transporter ___ Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

35. Discrepancy Indication Space

Style CF 18 LABELMASTER® (800) 621-5808 www.labelmaster.com

EPA Form 8700-22A (Rev. 9-88) Previous editions are obsolete.

PRINTED ON RECYCLED PAPER PRINTED WITH

ORIGINAL-RETURN TO GENERATOR

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

Form Approved. OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21. Generator's US EPA ID No.: NM0890010515

Manifest Document No.: 05154

22. Page 2 of 4

Information in the shaded areas is not required by Federal law.

23. Generator's Name

U of CA LANL for US DOE
Los Alamos National Laboratory
P.O. Box 1663, MS J595, Los Alamos, NM 87545

L. State Manifest Document Number

M. State Generator's ID

24. Transporter 1 Company Name: ONYX ENVIRONMENTAL SERVICES, LLC

25. US EPA ID Number: NJD080631369

N. State Transporter's ID

O. Transporter's Phone: 800-688-4005

26. Transporter ___ Company Name

27. US EPA ID Number

P. State Transporter's ID

Q. Transporter's Phone

	28. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	29. Containers No.	Type	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
a.	WASTE ETHYLENE, 2.1, UN1962	X	1	CY	10	k	D001
b.	WASTE HYDROGEN, COMPRESSED, 2.1, UN1049	X	2	CY	9	k	D001
c.	WASTE HYDROGEN, COMPRESSED, 2.1, UN1049	X	1	CY	3	k	D001
d.	WASTE METHANE, COMPRESSED, 2.1, UN1971	X	2	CY	9	k	D001
e.	WASTE PROPANE, 2.1, UN1978	X	3	CY	1	k	D001
f.	WASTE PROPANE, 2.1, UN1978	X	2	CY	71	k	D001
g.	WASTE PROPYLENE, 2.1, UN1077	X	1	CY	36	k	D001
h.	WASTE COMPRESSED GAS, OXIDIZING, N.O.S., 2.2, UN3156, (OXYGEN, ARGON)	X	1	CY	56	k	D001
i.	WASTE DICHLORODIFLUOROMETHANE, 2.2, UN1028	X	1	CY	39	k	U075

GENERATOR

S. Additional Descriptions for Materials Listed Above

28a. 909926 — *592632
28b. C94042522 C94042523 —
28c. C93034682 —
28d. 903170 C98100437 —
28e. C02153219 C05177605 C92026375 —
28f. C94042519 C94042521 — *592632
28g. 90000077 — *592632
28h. C94042516 —
28i. 909372 —

T. Handling Codes for Wastes Listed Above

32. Special Handling Instructions and Additional Information

EMERGENCY PHONE NO: (505) 667-6211
28a. ERGNO: 116P 28b. ERGNO: 115 28c. ERGNO: 115 28d. ERGNO: 115 28e. ERGNO: 115 28f. ERGNO: 115
28g. ERGNO: 115 28h. ERGNO: 122 28i. ERGNO: 126

* mike fogel/MA 3-24-05

TRANSPORTER

33. Transporter ____ Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date (Month Day Year)

34. Transporter ____ Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date (Month Day Year)

FACILITY

35. Discrepancy Indication Space

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

Form Approved. OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21. Generator's US EPA ID No.: NM0890010515

Manifest Document No.: 05154

22. Page 3 4

Information in the shaded areas is not required by Federal law.

23. Generator's Name

U of CA LANL for US DOE
Los Alamos National Laboratory
P.O. Box 1663, MS J595, Los Alamos, NM 87545

L. State Manifest Document Number

M. State Generator's ID

24. Transporter 1 Company Name: ONYX ENVIRONMENTAL SERVICES, LLC

25. US EPA ID Number: NJD080631369

N. State Transporter's ID

O. Transporter's Phone: 800-688-4005

26. Transporter ___ Company Name

27. US EPA ID Number

P. State Transporter's ID

Q. Transporter's Phone

	HM	28. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	29. Containers No.	Type	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
a.	X	WASTE OXYGEN, COMPRESSED, 2.2, UN1072	1	CY	1	k	D001
b.	X	COMPRESSED GAS, TOXIC, CORROSIVE, N.O.S., 2.3, UN3304, (CHLORINE, ARGON), POISON - INHALATION HAZARD, ZONE B	1	CY	10	k	
c.	X	COMPRESSED GAS, TOXIC, CORROSIVE, N.O.S., 2.3, UN3304, (CHLORINE, CARBON DIOXIDE), POISON - INHALATION HAZARD, ZONE B	1	CY	7	k	
d.	X	COMPRESSED GAS, TOXIC, CORROSIVE, N.O.S., 2.3, UN3304, (CHLORINE, CARBON DIOXIDE), POISON-INHALATION HAZARD ZONE B	1	CY	27	k	
e.	X	COMPRESSED GAS, TOXIC, CORROSIVE, N.O.S., 2.3, UN3304, (CHLORINE, HYDROGEN CHLORIDE), POISON - INHALATION HAZARD, ZONE B	2	CY	7	k	
f.	X	COMPRESSED GASES, TOXIC, CORROSIVE, N.O.S., 2.3, UN3304, (HYDROGEN, CHLORIDE, CHLORINE), POISON - INHALATION HAZARD, ZONE B	1	CY	36	k	
g.	X	SULFUR DIOXIDE, LIQUEFIED, 2.3, UN1079, POISON INHALATION HAZARD ZONE C	1	~~CT~~ ** CY	5	k	
h.	X	** ~~WASTE~~ COMPRESSED GAS, TOXIC, CORROSIVE, N.O.S., 2.3, UN3304, (CHLORINE,HYDROGEN CHLORIDE), POISON - INHALATION HAZARD, ZONE B	1	CY	23	k	
i.	X	** ~~WASTE~~ COMPRESSED GAS, TOXIC, CORROSIVE, N.O.S., 2.3, UN3304, (CHLORINE,HYDROGEN,CHLORIDE), POISON - INHALATION HAZARD, ZONE B	1	CY	23	k	** ~~D002~~

S. Additional Descriptions for Materials Listed Above

28a. C98100431 – *592632
28b. 908021 –
28c. 91001393 –
28d. 908035 –
28e. 91001392 91001395 –
28f. 91001827 – *592632
28g. 91007573 –
28h. 91001449 –
28i. 91001448 –

T. Handling Codes for Wastes Listed Above

32. Special Handling Instructions and Additional Information

EMERGENCY PHONE NO: (505) 667-6211
28a. ERGNO: 122 28b. ERGNO: 123 28c. ERGNO: 123 28d. ERGNO: 123 28e. ERGNO: 123 28f. ERGNO: 123
28g. ERGNO: 125 28h. ERGNO: 123 28i. ERGNO: 123

GENERATOR

TRANSPORTER

33. Transporter ___ Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date Month Day Year

34. Transporter ___ Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date Month Day Year

FACILITY

35. Discrepancy Indication Space

*Nike Tope/NA 3-24-05

** Matt Sharahan/NA 3-29-05

Style CF 18 LABELMASTER® (800) 621-5808 www.labelmaster.com

EPA Form 8700-22A (Rev. 9-88) Previous editions are obsolete.

PRINTED ON RECYCLED PAPER

ORIGINAL-RETURN TO GENERATOR

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

Form Approved. OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST
(Continuation Sheet)

21. Generator's US EPA ID No.: NM0890010515

Manifest Document No.: 05154

Page 4 of 4

Information in the shaded areas is not required by Federal law.

23. Generator's Name

U of CA LANL for US DOE
Los Alamos National Laboratory
P.O. Box 1663, MS J595, Los Alamos, NM 87545

L. State Manifest Document Number

M. State Generator's ID

24. Transporter 1 Company Name: ONYX ENVIRONMENTAL SERVICES, LLC

25. US EPA ID Number: NJD080631369

N. State Transporter's ID

O. Transporter's Phone: 800-688-4005

26. Transporter 2 Company Name

27. US EPA ID Number

P. State Transporter's ID

Q. Transporter's Phone

	28. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	HM	29. Containers No.	Type	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
a.	WASTE COMPRESSED GAS, TOXIC, N.O.S., 2.3, UN1955, (METHYL BROMIDE, AIR), POISON INHALATION HAZARD ZONE C	x	1	CY	2	k	U029
b.	** ~~WASTE~~ HYDROGEN CHLORIDE, ANHYDROUS, 2.3, UN1050, POISON INHALATION HAZARD ZONE C	x	1	CY	55	k	** ~~D002~~
c.	WASTE HYDROGEN SULFIDE, 2.3, UN1053, POISON-INHALATION HAZARD ZONE B	x	1	CY	4	k	U135 D001 D003
d.	WASTE METHYL BROMIDE, 2.3, UN1062, POISON INHALATION HAZARD ZONE C	x	1	CY	1	k	U029 D001
e.							
f.							
g.							
h.							
i.							

** Matt Shanahan/MA 3-29-05

S. Additional Descriptions for Materials Listed Above

28a. 90248700 – * 592632
28b. 907437 –
28c. C92032654 –
28d. 91001477 –

* Mike Hope/MA 3-24-05

T. Handling Codes for Wastes Listed Above

32. Special Handling Instructions and Additional Information

EMERGENCY PHONE NO: (505) 667-6211
28a. ERGNO: 123 28b. ERGNO: 125 28c. ERGNO: 117 28d. ERGNO: 123

GENERATOR

TRANSPORTER

33. Transporter ____ Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date (Month Day Year)

34. Transporter ____ Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date (Month Day Year)

FACILITY

35. Discrepancy Indication Space