

General

 ENTERED

**Kielling, John, NMENV**

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**From:** Vollmer, Art, NMENV  
**Sent:** Monday, February 01, 2010 1:39 PM  
**To:** Kielling, John, NMENV  
**Subject:** FW: LANL RCRA 3016 Report

**Attachments:** Document.pdf



Document.pdf (577  
KB)

Art Vollmer  
Compliance Program Manager  
NMED Hazardous Waste Bureau  
Phone: (505) 476-6004  
P Please consider the environment before printing.

-----Original Message-----  
From: Turner, Gene E. [mailto:gturner@doeal.gov]  
Sent: Monday, February 01, 2010 12:26 PM  
To: Vollmer, Art, NMENV  
Subject: RCRA 3016 Report

Art-

As we discussed.

Regards,

GT

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This inbound email has been scanned for malicious software and transmitted safely to you using Webroot Email Security.

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**U.S. EPA 2010 INVENTORY OF FEDERAL HAZARDOUS WASTE ACTIVITIES  
AT CURRENTLY OWNED OR OPERATED FEDERAL FACILITIES**

*Complete this form for each Federally owned or operated facility*

This form applies to all Federal hazardous waste facilities which are currently owned or operated by the Government. A "Federally owned or operated facility" or "facility" is defined as all the contiguous property owned and/or operated by a Federal agency at any one location and at which hazardous waste is stored, treated, or disposed, or has been disposed. The boundary of the Federal facility is the perimeter of the contiguous property owned or operated by the Federal agency irrespective of the boundary of any CERCLA sites or RCRA facilities located on the property.

**A. FEDERALLY OWNED OR OPERATED FACILITY IDENTIFICATION**

1. Facility name:

2. Federal Facility Identification Number:

3. RCRA ID number (if applicable):

**B. RESPONSIBLE FEDERAL AGENCY**

1. Facility owner

Department:

Agency/Bureau:

Contractor:

Other:

2. Facility operator (if different from owner)

Department:

Agency/Bureau:

Contractor:

Other:

3. Facility type (check ONE)

GOGO     GOCO     GOPO     POGO     Lessee  
 Foreclosure     Trespass     Withdrawal     Forfeiture

**C. LOCATION OF FEDERALLY OWNED OR OPERATED FACILITY**

1.a. Facility location address

Address

City  State  Zip

1.b. If no street address, provide county or township and state in which the facility is located.

County/Township  State

2. Latitude and longitude of facility in degrees

Latitude  Longitude

**U.S. EPA 2006 INVENTORY OF FEDERAL HAZARDOUS WASTE ACTIVITIES  
AT CURRENTLY OWNED OR OPERATED FEDERAL FACILITIES**

*Complete this form for each Federally owned or operated facility*

Facility name:

Federal Facility Identification Number:

**3. Facility mailing address**

Address

City  State  Zip

**D. CONTACT INFORMATION**

Name, title, and telephone number of person completing this form

Name:

Title:

Phone:

**E. FACILITY HAZARDOUS WASTE INFORMATION**

1. Is/was environmental monitoring conducted at the facility?  
 Yes     No
2. Has hydrogeologic site characterization been conducted at the facility?  
 Yes     No     In Progress     Do Not Know
3. Have there been any releases of hazardous substances to the environment at the facility?  
 Yes     No
4. Have corrective actions been initiated at this facility under RCRA authority?  
 Yes     No
5. Is this facility currently, or has this facility ever treated, stored, or disposed of hazardous waste under RCRA authority? *(Answer only if the facility received hazardous waste on or after November 19, 1980.)*  
 Yes     No
6. Are there any areas at this facility being addressed under CERCLA authority? *(Answer only if the facility has disposed of hazardous substances.)*  
 Yes     No
7. If Yes to 6, are any areas of this facility listed or proposed on the NPL?  
 Yes     No

**F. PRELIMINARY ASSESSMENT (PA)/SITE INVESTIGATION (SI) INFORMATION**

1. Has a PA been conducted at this facility?     Yes     No     In Progress
2. If Yes, has the PA been submitted to EPA?     Yes     No    Date submitted:
3. Has an SI been conducted at this facility?     Yes     No     In Progress
4. If Yes, has the SI been submitted to EPA?     Yes     No    Date submitted: