

# Los Alamos

Los Alamos National Laboratory  
Los Alamos, New Mexico 87545

*File in  
general*

DATE: July 1, 1986  
IN REPLY REFER TO: HSE-7B-86-43  
MAIL STOP: E518  
TELEPHONE: (505)667-4301

Hazardous Waste Section  
Environmental Improvement Division  
P. O. Box 968  
Santa Fe, NM 87504-0968

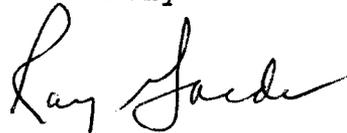
REF: Hazardous Waste Manifest

Dear Sirs

Enclosed is the Generator State copies of State of New York Hazardous Waste Manifest indicating that Los Alamos National Laboratory has made shipment of the listed material to Battery Disposal Technology.

Please contact Paul Emerson at (505)667-6095 if additional information is desired.

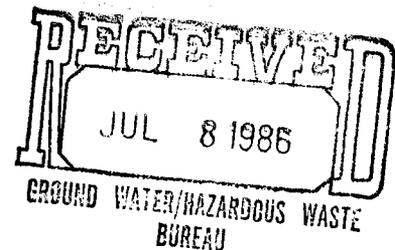
Sincerely



Ray Garde  
HSE-7 Group Leader

RG/rfg

cc D. Gallegos, DOE-LAAO, w/o enc, MS A316  
J. Aragon, HSE-DO, w/o enc, MS P228  
W. Hansen, HSE-DO w/o enc, MS P228  
P. Emerson, HSE-7, w/enc, MS J592  
CRM-4 (2) w/enc, MS A150  
HSE-7 files



RECEIVED

JUL 0 8 1986

HAZARDOUS WASTE SECTION



16456



STATE OF NEW YORK  
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION  
 DIVISION OF SOLID AND HAZARDOUS WASTE

**HAZARDOUS WASTE MANIFEST**

P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA No. N H 088 9 0 0 1 0 5 1 5		Manifest Document No. 11111111		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.		
3. Generator's Name and Mailing Address LOS ALAMOS NATIONAL LABORATORY P.O. BOX 1663, LOS ALAMOS, NM 87545						A. State Manifest Document No. NY A 416180 2				
4. Generator's Phone (505) 667-6095						B. Generator's ID				
5. Transporter 1 (Company Name) HazMat Environmental Group			6. US EPA ID Number NY D 9 8 0 7 0 9 8 4 7			C. State Transporter's ID				
7. Transporter 2 (Company Name)						D. Transporter's Phone (716) 877-5533				
9. Designated Facility Name and Site Address RPT, Inc. 4255 Research Pkwy. Clarence, NY 14031						10. US EPA ID Number NY D 6 0 0 6 3 2 3 7 2				
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. WASTE FLAMMABLE LIQUID, NOS/ FLAMMABLE LIQUID/UN 1993						1 DM		17	P	B003
b. WASTE FLAMMABLE SOLID, NOS/ FLAMMABLE SOLID/UN 1325						1 DM		19	P	B003
c. WASTE OXIDIZER, NOS/ OXIDIZER/UN 1479						1 DM		13	P	B003
d. WASTE SULFUR, SOLID/ ORM-C/UN 1350						1 DM		13	P	B003
J. Additional Descriptions for Materials listed Above						K. Handling Codes for Wastes Listed Above				
a						a <input checked="" type="checkbox"/> c <input type="checkbox"/>				
b						b <input checked="" type="checkbox"/> d <input type="checkbox"/>				
15. Special Handling Instructions and Additional Information										
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 and state laws and regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002 (b) of RCRA, I also certify that I have a program in place to reduce volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.										
Printed/Typed Name Ray Garde				Signature <i>Ray Garde</i>				Mo. Day Year XXXXXX		
17. Transporter 1 (Acknowledgement of Receipt of Materials)										
Printed/Typed Name <i>Ray Garde</i>				Signature <i>Ray Garde</i>				Mo. Day Year XXXXXX		
18. Transporter 2 (Acknowledgement or Receipt of Materials)										
Printed/Typed Name				Signature				Mo. 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				Signature				Mo. Day Year		

NY A 416180 2

**General Information**

New York State regulation requires proper completion of all information on a manifest. Omissions, false coding or illegibility is considered a violation. All generators are responsible under New York State and Federal Law for the proper identification, labeling, manifesting and ultimate disposal of all hazardous waste they generate. The manifest system is designed to track hazardous waste from the point of generation until its final disposal (cradle to grave). In order to accomplish this goal, it is essential that all items on a manifest be properly completed.

**Distribution**

Distribution of each copy of the manifest is indicated on the bottom of the form. Copies of the manifest must be mailed promptly. New York State regulations provide five (5) working days for generator and two (2) for a TSDF. The Disposer's state is the state in which the designated TSD facility is located. Generator's state is the state in which the installation generating the hazardous waste is located. TSD facility is a treatment, storage or disposal facility.

**Generator Section**

**Item 1-**Enter the US EPA ID number (twelve digit number issued by the federal government). The generator must assign a sequential unique, five digit number different for each manifest, as the manifest number.

**Item 2-**If a continuation sheet is used, please enter the total number of sheets here. Any EPA approved continuation sheet may be used, but distribution and completion must meet New York manifest requirements. The document number in Item A must be placed in Item L of each continuation sheet.

**Item 3 and 4-**Self Explanatory. These must correspond to the generators US EPA ID number.

**Items 5, 6, 7 and 8-**These are self explanatory. These numbers must be secured from the transporter. If more than one transporter is used, the generator must supply additional copies of this manifest (copy#5) for each transporter.

**Items 9 and 10-**The designated TSD facility, name, address and ID number should appear here.

**NOTE:** All US EPA ID numbers are a twelve digit code starting off with the letters corresponding to the state in which the facility or transporter is located.

**NOTE:** Only New York State authorized transporters and TSD facilities are allowed to transport or receive hazardous waste in New York State. The generator shall check for authorization.

**Item 11-**USDOT requires the word "waste" before or in the shipping name for all hazardous waste. See 49 CFR 171 thru 173. Contact USDOT office for description assistance. Any waste in this box is considered a hazardous waste.

**Item 12-**

Number—indicate number of containers (use whole numbers).

**Containers/Type**

DM-Metal drums, barrels  
TT-Cargo tank, tank trucks  
DT-Dump trucks  
CY-Cylinders

DW-Wooden drums, barrels  
TP-Tanks, portable  
CM-Metal boxes, cases, roll-offs  
CW-Wooden boxes

DF-Fiberboard or plastic drums (glass)  
TC-Tank cars  
CF-Fiber or plastic boxes, cartons  
BA-Burlap, plastic, paper bags

**Item 13-**Actual number of units indicated in box 14. (Do not use fractions or decimals).

**Item 14-Units (wt/vol)**

G-Gallons (liquids only)\* [8.3 pounds]  
L-Liters (liquid only)\* [2.2 pounds]  
Y-Cubic yards\* [.85 tons]

N-Cubic meters\* [2,200 pounds]  
P-Pounds  
T-Tons

K-Kilograms [2.2 pounds]  
M-Metric tons (1,000 kilograms) [2,200 pounds]

\*Specify gravity-1.00 unless indicated in box J.

**Item 15-**Use this space to indicate special transportation, treatment, storage or disposal or Bill of Lading information. If an alternate facility is designated, note it here. For international shipments, enter point of departure. Emergency response telephone numbers, or similar information may be included here.

**Item 16-**The authorized agent of the generator must read and then sign (by hand) and date this certification. The date is the date of receipt by transporter.

**NEW YORK STATE REQUIRES THIS ADDITIONAL INFORMATION**

**Item A-**Number preprinted by New York State Department of Environmental Conservation (NYSDEC).

**Item B-**Generator site address if different from mailing address. If same, write in same.

**Item C and E-**State of registration and motor vehicle license plate number of waste carrying portion of vehicle used to transport.

**Item D and F-**Telephone number of authorized agent.

**Item G-**No entry required by NYSDEC

**Item H-**Telephone number at site of TSD facility.

**Item I-**Hazardous waste numbers (letter and three digits) as assigned by Part 366/371 (40 CFR 261 subparts C and D) must be used to identify hazardous waste. If waste is not hazardous in New York but regulated by another state, enter that state's waste code.

**Item J-**If description in item 11 (a,b,c,d) contains NOS or other general term, the hazardous waste constituent must be provided here for each. The specific gravity assumed to be one (1.00) unless indicated in lower right of each box.

**Item K-**Each material must be assigned an ultimate disposal method code as follows: L = landfill. B = incineration, heat recovery, burning, T = Chemical, physical, or biological treatment. R = Material recovery of more than 75 percent of the total material. Both the generator and the TSDF should agree on codes assigned in this item.

**Transporter Section**

**Items 17 and 18-**Print or type the full name of person accepting responsibility and acknowledging receipt of material as listed on manifest for transport. Enter date of receipt and signature.

**TSDF Section**

**Item 19-**The authorized representative of the TSDF must note in the space any discrepancy between waste described on manifest and waste actually received. Any rejected materials should be listed and destination of those materials provided.

**Item 20-**The signature (by hand) of the authorized TSDF agent indicates acceptance (except for Item 19) and agreement with statements on this manifest. The date is the date of signature and receipt of shipment. A TSDF not providing ultimate disposal agrees to transfer waste to a TSDF authorized to provide ultimate disposal as indicated in Item K.

**Additional Information**

1. If the Disposer State supplies a manifest, that state's form must be used. In any case, New York requires that both the generator and TSDF mail copies to the generator's State and the disposer's State, with the ultimate disposal method indicated in Item K.
2. There may be variations in the requirements between various states regarding Items A thru K, therefore, the generator should contact the disposer's State for specific details.
3. If assistance is needed in completion of this manifest, please contact NYSDEC Manifest Section at 518/457-0530 weekdays from 9:00 a.m. to 4:00 p.m.



STATE OF NEW YORK  
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION  
 DIVISION OF SOLID AND HAZARDOUS WASTE  
**HAZARDOUS WASTE MANIFEST**

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4. Generator's Phone (505) 667-6095						B. Generator's ID					
5. Transporter 1 (Company Name) HAZMAT ENVIRONMENTAL GROUP				6. US EPA ID Number NYD950769917		C. State Transporter's ID					
7. Transporter 2 (Company Name)						D. Transporter's Phone ( )					
9. Designated Facility Name and Site Address BDI, INC. 4255 RESEARCH PKWY. CLARENCE, NY 14031						10. US EPA ID Number NYD000632372					
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol	
a. WASTE CORROSIVE SOLID NOS/ CORROSIVE SOLID/UN1759						No. Type		Quantity		Waste No.	
						1 0 H		1 3 P		D003	
J. Additional Descriptions for Materials listed Above						K. Handling Codes for Wastes Listed Above					
a						a <input checked="" type="checkbox"/> c <input type="checkbox"/>					
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Printed/Typed Name Ray Garde				Signature <i>Ray Garde</i>				Mo. Day Year 1 1 8 6			
17. Transporter 1 (Acknowledgement of Receipt of Materials)											
Printed/Typed Name <i>Bill Miller</i>				Signature <i>Bill Miller</i>				Mo. Day Year 1 1 8 6			
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