



ENVIRONMENTAL PROTECTION AGENCY

INFORMAL MEMO

TO: File
FROM: Sides

DATE: 4/13 93

SUBJECT: LANE TA-40 Closure

Maason called today to inquire what type risk assessment we would be looking for in closure. I said that it is health based concern, numbers.

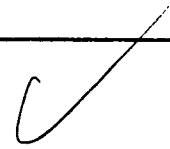
Maason said that they found some TCLP lead under the burn cage and would develop and send us a clean up plan for it

TR



2475

RCRIS Permit/Closure/Post-Closure Unit Group Data Entry Form



Screen 1
 Handler ID NM0850010515
 Facility Name LANL

Screen 2
 Permit Processing # R.D.D.2

Screen 3
 Permit Authority S/J/E S
 EPA Responsible Person _____
 State Responsible Person S.K.S

4.7.93

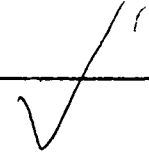
*AW 4/6/93
 not a valid process code
 for TOU*

Process Code	Unit ID	Capacity	UOM	#Units	Current Track	Add/Update/Delete
1. <u>T.O.4</u>	<u>H.Y.D.R.O.T.H.E.R.M.</u>		<u>R</u>	<u>1</u>	<u>O.P.</u>	<u>A</u>
Comments: _____						
2. _____						
Comments: _____						
3. _____						
Comments: _____						

Special Instructions: _____

Submitted By: [Signature] QA By: [Signature] Data Entry By: [Signature]
 Date Submitted: 4/7/93 QA Date: BACK TO SKS Date Entered: 4/7/93
for corrected UOM

RCRIS Permit/Closure/Post-Closure Event Data Entry Form



Handler ID NM0890010515
 Facility Name LANI

Permit Processing # R.P.D.2

Permit Authority S/J/E S
 EPA Responsible Person
 State Responsible Person S.K.S

Event Name	Activity Track	Event Code	Resp. Agency	Seq. #	Resp. Person	Status Code	Sched. Date (MM/DD/YY)	Actual Date (MM/DD/YY)	Add/Update/Delete/Path
<u>Part B Recd</u>	<u>RD</u>	<u>020</u>	<u>S</u>	<u> </u>	<u>S.K.S</u>	<u>CU</u>	<u> </u>	<u>032693</u>	<u>A</u>
Comments <u> </u>									

Link Event to These Unit Groups

Process Code	Unit ID	Process Code	Unit ID	Process Code	Unit ID
<u>T04</u>	<u>HYDROTHERM</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>

For Additional Unit Links Use Second Block Below

Event Name	Activity Track	Event Code	Resp. Agency	Seq. #	Resp. Person	Status Code	Sched. Date (MM/DD/YY)	Actual Date (MM/DD/YY)	Add/Update/Delete/Path
<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
Comments <u> </u>									

Link Event to These Unit Groups

Process Code	Unit ID	Process Code	Unit ID	Process Code	Unit ID
<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>

Special Instructions:

Submitted By: QA By: Data Entry By:
 Date Submitted: QA Date: 4/7/93 Date Entered: 4/7/93

RCRIS Permit/Closure/Post-Closure Event Data Entry Form

Screen 1

Handler ID N.M.0890010515
 Facility Name LANL

Screen 2

Permit Processing # R.P.D.2

Screen 3

Permit Authority S/J/E S
 EPA Responsible Person _____
 State Responsible Person C.V.S.

Screen 4

Event Name	Activity Track	Event Code	Resp. Agency	Seq. #	Resp. Person	Status Code	Sched. Date (MM/DD/YY)	Actual Date (MM/DD/YY)	Add/Update/Delete/Path
<u>Automatic Compliance Extension Requested</u>	<u>OP</u>	<u>014</u>	<u>S</u>	_____	<u>C.V.S.</u>	_____	052893	<u>052893</u>	<u>A</u>
Comments _____									

Screen 5

Link Event to These Unit Groups

Process Code	Unit ID	Process Code	Unit ID	Process Code	Unit ID
<u>T.O.H.</u>	<u>Hydrotherm</u>	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

For Additional Unit Links Use Second Block Below

Screen 6

Event Name	Activity Track	Event Code	Resp. Agency	Seq. #	Resp. Person	Status Code	Sched. Date (MM/DD/YY)	Actual Date (MM/DD/YY)	Add/Update/Delete/Path
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Comments _____									

Screen 7

Link Event to These Unit Groups

Process Code	Unit ID	Process Code	Unit ID	Process Code	Unit ID
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Special Instructions: _____

Submitted By: Carl V. Stubbs QA By: _____ Data Entry By: _____
 Date Submitted: 6-11-93 QA Date: _____ Date Entered: _____

RCRIS Permit/Closure/Post-Closure Event Data Entry Form

Screen 1

Handler ID N.M.08.90.01.05.1.5
 Facility Name LANK

Screen 2

Permit Processing #

R.P.D.2

Screen 3

Permit Authority S/J/E S
 EPA Responsible Person _____
 State Responsible Person C.V.S

Screen 4

Event Name	Activity Track	Event Code	Resp. Agency	Seq. #	Resp. Person	Status Code	Sched. Date (MM/DD/YY)	Actual Date (MM/DD/YY)	Add/Update/Delete/Path
<u>Requested for Automatic Extension Granted</u>	<u>OP</u>	<u>023</u>	<u>S</u>		<u>C.V.S</u>			<u>060493</u>	<u>A</u>
Comments _____									

Screen 5

Link Event to These Unit Groups

Process Code	Unit ID	Process Code	Unit ID	Process Code	Unit ID
<u>T.04</u>	<u>HydroTherm</u>				

For Additional Unit Links Use Second Block Below

Screen 6

Event Name	Activity Track	Event Code	Resp. Agency	Seq. #	Resp. Person	Status Code	Sched. Date (MM/DD/YY)	Actual Date (MM/DD/YY)	Add/Update/Delete/Path
Comments _____									

Screen 7

Link Event to These Unit Groups

Process Code	Unit ID	Process Code	Unit ID	Process Code	Unit ID

Special Instructions: _____

Submitted By: Carl V. Stubbins QA By: _____ Data Entry By: _____
 Date Submitted: 6-11-93 QA Date: _____ Date Entered: _____

RCRIS Permit/Closure/Post-Closure Event Data Entry Form

Screen 1

Handler ID N.M.0.8.9.0.0.1.0.5.1.5,
 Facility Name LANL

Screen 2

Permit Processing # R.D.R.2

Screen 3

Permit Authority S/J/E S
 EPA Responsible Person
 State Responsible Person C.V.S

Screen 4

Event Name	Activity Track	Event Code	Hosp. Agency	Seq. #	Hosp. Person	Status Code	Sched. Date (MM/DD/YY)	Actual Date (MM/DD/YY)	Add/Update/Delete/Path
<u>Revisions Received</u>	<u>OP</u>	<u>1110</u>	<u>S</u>	<u> </u>	<u>C.V.S</u>	<u>CO</u>	<u>063093</u>	<u>063093</u>	<u>A</u>
Comments <u> </u>									

Screen 5

Link Event to These Unit Groups

Process Code	Unit ID	Process Code	Unit ID
<u>T.O.H</u>	<u>Hydrotherm</u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>

For Additional Unit Links Use Second Block Below

Screen 6

Event Name	Activity Track	Event Code	Hosp. Agency	Seq. #	Hosp. Person	Status Code	Sched. Date (MM/DD/YY)	Actual Date (MM/DD/YY)	Add/Update/Delete/Path
<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
Comments <u> </u>									

Screen 7

Link Event to These Unit Groups

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Special Instructions:

Submitted By: Carl V. Stubbles QA By: Data Entry By:
 Date Submitted: June 30, 93 QA Date: Date Entered:

RCRIS Permit/Closure/Post-Closure Event Data Entry Form

Screen 1

Handler ID AM0892010515
 Facility Name LANE

Screen 2

Permit Processing # RLR2

Screen 3

Permit Authority S/J/E S
 EPA Responsible Person _____
 State Responsible Person CVS

Event Name	Activity Track	Event Code	Resp. Agency	Seq. #	Resp. Person	Status Code	Sched. Date (MM/DD/YY)	Actual Date (MM/DD/YY)	Add/Update/Delete/Path
<i>intended to be complete</i>	<u>OP</u>	<u>150</u>	<u>S</u>	_____	<u>CVS</u>	_____	<u>093093</u>	<u>082193</u>	<u>A</u>

Comments _____

Link Event to These Unit Groups

Process Code	Unit ID	Process Code	Unit ID
<u>104</u>	<u>Hydrichor</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

For Additional Unit Links Use Second Block Below

Event Name	Activity Track	Event Code	Resp. Agency	Seq. #	Resp. Person	Status Code	Sched. Date (MM/DD/YY)	Actual Date (MM/DD/YY)	Add/Update/Delete/Path
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

Comments _____

Link Event to These Unit Groups

Process Code	Unit ID	Process Code	Unit ID
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Special Instructions: _____

Submitted By: Carl V. Stubbins QA By: _____ Data Entry By: _____
 Date Submitted: 9-1-93 QA Date: _____ Date Entered: _____

RCRIS Permit/Closure/Post-Closure Event Data Entry Form

Handler ID <u>N.M.089.001.05.15</u>	Screen 1
Facility Name <u>LANL</u>	

Permit Processing # <u>R.D.D.2</u>	Screen 2
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Permit Authority S/J/E <u>S</u>	Screen 3
EPA Responsible Person <u> </u>	
State Responsible Person <u>C.V.S</u>	

Event Name	Activity Track	Event Code	Resp. Agency	Seq. #	Resp. Person	Status Code	Sched. Date (MM/DD/YY)	Actual Date (MM/DD/YY)	Add/Update/Delete/Path
<u>Public Notice</u>	<u>D.P</u>	<u>1610</u>	<u>S</u>	<u> </u>	<u> </u>	<u>DP</u>	<u>110193</u>	<u>110193</u>	<u>A</u>
Comments <u> </u>									

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<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>

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 Date Submitted: QA Date: Date Entered: