



FEDERAL EXPRESS

January 2, 1991
JJ 91-100

Mr. Dave Englert
New Mexico Environmental Improvement Division
1190 St. Francis Dr.
Santa Fe, New Mexico 87503

Subject: Albuquerque Service Center

Dear Mr. Englert,

I am writing to you in response to our phone conversation on December 19, 1990. Please find enclosed a signed Part A application and the Part B certification statement.

If you have any questions or require further information, please contact me on extension 2227.

Sincerely,

Jennifer M. Jendras
Environmental Permit Writer

JJ/dfh

For EPA Regional Use Only	 United States Environmental Protection Agency Washington, DC 20460 <h1 style="margin: 0;">Hazardous Waste Permit Application</h1> <h2 style="margin: 0;">Part A</h2> <p style="font-size: small;">(Read the Instructions before starting)</p>	For State Use Only
Date Received Month Day Year 		

I. ID Number(s)

A. EPA ID Number	B. Secondary ID Number (if applicable)
N M D O O O B O 4 2 9 4	

II. Name of Facility

S A F E T Y - K L E E N C O R P . (7 - 0 0 8 - 0 1)

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

A. Street	
2 7 2 0 G I R A R D N E	
Street (continued)	
City or Town	State ZIP Code
A L B U Q U E R Q U E	N M 8 7 1 0 7 -
County Code <small>(if known)</small>	County Name
	B E R N A L I L L O

B. Land Type	C. Geographic Location	D. Facility Existence Date
(enter code) P	LATITUDE (degrees, minutes, & seconds) LONGITUDE (degrees, minutes, & seconds) 3 5 0 6 4 4 N 1 0 6 3 6 4 6 W	Month Day Year 0 3 0 1 1 9 7 7

IV. Facility Mailing Address

Street or P.O. Box	
7 7 7 B I G T I M B E R R O A D	
City or Town	State ZIP Code
E L G I N	I L 6 0 1 2 3 -

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

Name (last)	(first)
W A C H S M U T H	R O B E R T
Job Title	Phone Number (area code and number)
R E G . E N V . E N G R .	7 0 8 - 6 9 7 - 8 4 6 0

VI. Facility Contact Address (See Instructions)

A. Contact Address Location	B. Street or P.O. Box
X	7 7 7 B I G T I M B E R R O A D
City or Town	State ZIP Code
E L G I N	I L 6 0 1 2 3 -

EPA I.D. Number (enter from page 1)	Secondary ID Number (enter from page 1)																								
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N	M	D	0	0	0	8	0	4	2	9	4														

XI. Nature of Business (provide a brief description)

THIS FACILITY INCLUDES A LOCAL SALES/SERVICE OFFICE AND ACCUMULATION/DIS-TRIBUTION WAREHOUSE AND TANKS FOR SPENT SOLVENTS AND ANTIFREEZE (WHICH ARE RECLAIMED BY SAFETY-KLEEN AT A DIFFERENT LOCATION) AND PRODUCTS (WHICH INCLUDE SMALL PARTS CLEANING EQUIPMENT, SOLVENTS, ANTIFREEZE, HAND CLEANER, FLOOR SOAP AND OTHER ALLIED PRODUCTS). SAFETY-KLEEN COLLECTS THE SPENT SOLVENT AND ANTIFREEZE FROM ITS CUSTOMERS ON A PERIODIC BASIS AND ACCUMULATES IT, EITHER IN A STORAGE TANK OR IN A CONTAINER STORAGE AREA. THE MAJORITY OF SAFETY-KLEEN'S CUSTOMERS ARE CONDITIONALLY EXEMPT SMALL QUANTITY GENER-ATORS. ONCE A SUFFICIENT QUANTITY OF SPENT MATERIAL IS COLLECTED, A TANKER TRUCK OR BOX TRAILER TRUCK IS DISPATCHED FROM A SAFETY-KLEEN RECLAM-ATION FACILITY TO COLLECT THE WASTE AND BRING IT TO THE RECLAMATION FACILITY FOR ITS MANAGEMENT.

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. Twelve lines are provided for entering codes. If more lines are needed, attach a separate sheet of paper with the additional information. If a process will be used that is not included in the list of codes below, then 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.
 - 1. **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.
 - 2. **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	UNIT OF MEASURE	UNIT OF MEASURE CODE
	DISPOSAL:		GALLONS	G
D79	INJECTION WELL	GALLONS; LITERS; GALLONS PER DAY; OR LITERS PER DAY	GALLONS PER HOUR	E
D80	LANDFILL	ACRE-FEET OR HECTARE-METER	GALLONS PER DAY	U
D81	LAND APPLICATION	ACRES OR HECTARES	LITERS	L
D82	OCEAN DISPOSAL	GALLONS PER DAY OR LITERS PER DAY	LITERS PER HOUR	H
D83	SURFACE IMPOUNDMENT	GALLONS OR LITERS	LITERS PER DAY	V
S01	CONTAINER (barrel, drum, etc.)	GALLONS OR LITERS	SHORT TONS PER HOUR	D
S02	TANK	GALLONS OR LITERS	METRIC TONS PER HOUR	W
S03	WASTE PILE	CUBIC YARDS OR CUBIC METERS	SHORT TONS PER DAY	N
S04	SURFACE IMPOUNDMENT	GALLONS OR LITERS	METRIC TONS PER DAY	S
	TREATMENT:		POUNDS PER HOUR	J
T01	TANK	GALLONS PER DAY OR LITERS PER DAY	KILOGRAMS PER HOUR	R
T02	SURFACE IMPOUNDMENT	GALLONS PER DAY OR LITERS PER DAY	CUBIC YARDS	Y
T03	INCINERATOR	SHORT TONS PER HOUR; METRIC TONS PER HOUR; GALLONS PER HOUR; LITERS PER HOUR; OR BTU'S PER HOUR	CUBIC METERS	C
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; OR SHORT TONS PER DAY	ACRES	B
	<small>(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundment or incinerators. Describe the processes in the space provided in Item XIII.)</small>		ACRE-FEET	A
			HECTARES	Q
			HECTARE-METER	F
			BTU's PER HOUR	K

EPA I.D. Number (enter from page 1)	Secondary ID Number (enter from page 1)																								
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N	M	D	0	0	0	8	0	4	2	9	4														

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 processes 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)						(2) PROCESS DESCRIPTION (if a code is not entered in D(1))					
X	1	K 0 5 4	P	T 0 3	D 8 0										
X	2	D 0 0 2	P	T 0 3	D 8 0										
X	3	D 0 0 1	P	T 0 3	D 8 0										
X	4	D 0 0 2													

Included With Above

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

Secondary ID Number (enter from page 1)

N M D 0 0 0 8 0 4 2 9 4

XIV. Description of Hazardous Wastes (continued)

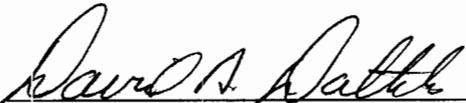
Line Number	A. EPA HAZARDOUS WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES																		
				(1) PROCESS CODES (enter)					(2) PROCESS DESCRIPTION (If a code is not entered in D(1))													
1	F 0 0 2	280	T	S	0	1																
2	F 0 0 3	80	T	S	0	1																
3	F 0 0 5																				INCLUDED WITH ABOVE	
4	F 0 0 2	70	T	S	0	1																
5	F 0 0 4																				INCLUDED WITH ABOVE	
6																						
7																						
8																						
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CERTIFICATION STATEMENT

Albuquerque, New Mexico Service Center

NMD 000804294

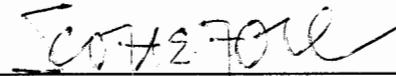
The undersigned, being a vice president of Safety-Kleen Corp., the permit applicant, certifies under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate 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.



David A. Dattilo
Vice President, Sales and Service

12/20/90

Date



Scott E. Fore
Vice President, Environment, Health and Safety

12/20/90

Date

ATTESTATION

The undersigned, attesting witness to the Certification Statement and this document dated 11/9/1990, of which this affidavit is a part, states that I am personally responsible for the preparation of the document, that I personally gathered the information contained herein, and further that the information, to the best of my knowledge and belief, is true, accurate and complete.



Jennifer Jendras
Environmental Permit Writer

12/20/90

Date