



Department of Energy  
Carlsbad Field Office  
P. O. Box 3090  
Carlsbad, New Mexico 88221

ENTERED

MAR 20 2014

MAR 18 2014

NMED  
Hazardous Waste Bureau

Mr. John E. Kieling, Chief  
Hazardous Waste Bureau  
New Mexico Environment Department  
2905 Rodeo Park Drive East, Building 1  
Santa Fe, New Mexico 87505-6303

Subject: Notification of Class 1 Permit Modification to the Waste Isolation Pilot Plant  
Hazardous Waste Facility Permit Number: NM4890139088-TSDF

Dear Mr. Kieling:

Enclosed is a Class 1 Permit Modification Notification for the following item:

- Update Co-Permittee Project Manager

We certify under penalty of law that this document and all attachments were prepared under our direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on our 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 our knowledge and belief, true, accurate, and complete. We are aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

If you have any questions, please contact Mr. George T. Basabilvazo at 575-234-7488.

Sincerely,

  
Jose R. Franco, Manager  
Carlsbad Field Office

  
R. L. McQuinn, Project Manager  
Nuclear Waste Partnership LLC

Enclosure

cc: w/ enclosure  
T. Kliphuis, NMED \*ED  
T. Blaine, NMED ED  
CBFO M&RC  
\*ED denotes electronic distribution



**Class 1 Permit Modification Notification**

**Update Co-Permittee Project Manager**

**Waste Isolation Pilot Plant  
Carlsbad, New Mexico**

**WIPP Permit Number - NM4890139088-TSDF**

**March 2014**

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## Overview of the Permit Modification Notification

This document contains a Class 1 Permit Modification Notification (**PMN**) to modify the Waste Isolation Pilot Plant (**WIPP**) Hazardous Waste Facility Permit (**Permit**), Permit Number NM4890139088-TSDF.

This PMN is being submitted by the U.S. Department of Energy (**DOE**) and Nuclear Waste Partnership LLC, collectively referred to as the Permittees, in accordance with Permit Part 1, Section 1.3.1. (20.4.1.900 New Mexico Administrative Code (**NMAC**) incorporating Title 40 of the Code of Federal Regulations (**CFR**) §270.42(a)). The PMN in this document is necessary to notify the New Mexico Environment Department (**NMED**) of a change which impacts the Permit. This change does not reduce the ability of the Permittees to provide continued protection to human health and the environment.

The requested modification to the Permit and any related supporting documents are provided in this PMN. The proposed modification to the text of the Permit has been identified using red text and double underline and a ~~strikeout~~ font for deleted information. All direct quotations are indicated by italicized text.

**Attachment A**  
**Description of the Class 1 Permit Modification Notification**

**Table 1. Class 1 Hazardous Waste Facility Permit Modification Notification**

| <b>Item No</b> | <b>Affected Permit Section</b>                     | <b>Change Description</b>   | <b>Category</b> |
|----------------|--|---|-----------------|
| 1.             | Attachment A, Section A-1,<br>Attachment B, Part A | This modification revises Attachment A Section A-1, and Attachment B, <i>Hazardous Waste Permit Application</i> Part A to change the Project Manager for Nuclear Waste Partnership, LLC from Mr. Farok Sharif to Mr. Robert L. McQuinn, effective March 17, 2014. | A.1             |

## Item 1

### Description

This modification revises Attachment A, Section A-1, and Attachment B, *Hazardous Waste Permit Application Part A* to change the Project Manager for Nuclear Waste Partnership, LLC from Mr. Farok Sharif to Mr. Robert L. McQuinn, effective March 17, 2014.

### Basis

The change is classified as an "Administrative and informational change" and is, therefore, a Class 1 modification pursuant to 20.4.1.900 NMAC (incorporating 40 CFR 270.42, Appendix I, A.1).

### Discussion

On March 17, 2014 Mr. Robert L. McQuinn replaced Mr. Farok Sharif, as the Project Manager and responsible official for Nuclear Waste Partnership LLC, the Co-Permittee at the WIPP facility. This change is necessary as Mr. McQuinn is the signatory authority for Nuclear Waste Partnership LLC.

Proposed Revised Permit Text:

**ATTACHMENT A**  
**GENERAL FACILITY DESCRIPTION AND**  
**PROCESS INFORMATION**

A-1 Facility Description

**Abstract**

|                           |  |
|---------------------------|--|
| NAME OF FACILITY:         | Waste Isolation Pilot Plant  |
| OWNER and CO-OPERATOR:    | U.S. Department of Energy<br>P.O. Box 3090<br>Carlsbad, NM 88221   |
| CO-OPERATOR:              | Nuclear Waste Partnership LLC<br>P.O. Box 2078<br>Carlsbad, NM 88221   |
| RESPONSIBLE OFFICIALS:    | Jose R. Franco<br>Manager, DOE/Carlsbad Field Office<br><a href="#">Robert L. McQuinn</a> Farok Sharif, Project Manager<br><a href="#">Project Manager</a> , Nuclear Waste Partnership LLC |
| FACILITY MAILING ADDRESS: | U.S. Department of Energy<br>P.O. Box 3090<br>Carlsbad, NM 88221   |
| FACILITY LOCATION:        | 30 miles east of Carlsbad on the Jal Highway, in<br>Eddy County.   |
| TELEPHONE NUMBER:         | 575/234-7300   |
| U.S. EPA I.D. NUMBER:     | NM4890139088   |
| GEOGRAPHIC LOCATION:      | 32° 22' 30" N<br>103° 47' 30" W  |
| DATE OPERATIONS BEGAN:    | November 26, 1999  |

**Attachment B**  
**Hazardous Waste Permit Application, Part A**

|   |  |  |   |
|---|--|--|---|
| <p><b>SEND COMPLETED FORM TO:</b><br/>The Appropriate State or Regional Office.</p> | <p><b>United States Environmental Protection Agency</b><br/><b>RCRA SUBTITLE C SITE IDENTIFICATION FORM</b></p>  |  |  |
| <p><b>1. Reason for Submittal</b></p> <p>MARK ALL BOX(ES) THAT APPLY</p>            | <p><b>Reason for Submittal:</b></p> <p><input type="checkbox"/> To provide an Initial Notification (first time submitting site identification information / to obtain an EPA ID number for this location)</p> <p><input checked="" type="checkbox"/> To provide a Subsequent Notification (to update site identification information for this location)</p> <p><input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application</p> <p><input checked="" type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # <u>28</u>)</p> <p><input type="checkbox"/> As a component of the Hazardous Waste Report (If marked, see sub-bullet below)</p> <p><input type="checkbox"/> Site was a TSD facility and/or generator of <math>\geq 1,000</math> kg of hazardous waste, <math>&gt;1</math> kg of acute hazardous waste, or <math>&gt;100</math> kg of acute hazardous waste spill cleanup <u>in one or more months</u> of the report year (or State equivalent LQG regulations)</p> |  |   |
| <p><b>2. Site EPA ID Number</b></p>   | <p>EPA ID Number <input type="text" value="N"/> <input type="text" value="M"/> <input type="text" value="4"/> <input type="text" value="8"/> <input type="text" value="9"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="3"/> <input type="text" value="9"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p>   |  |   |
| <p><b>3. Site Name</b></p>  | <p>Name: Waste Isolation Pilot Plant</p>   |  |   |
| <p><b>4. Site Location Information</b></p>  | <p>Street Address: 30 miles east of Carlsbad on Jal Highway</p> <p>City, Town, or Village: Carlsbad County: Eddy</p> <p>State: NM Country: USA Zip Code: 88221</p>   |  |   |
| <p><b>5. Site Land Type</b></p>   | <p><input type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>   |  |   |
| <p><b>6. NAICS Code(s) for the Site (at least 5-digit codes)</b></p>                | <p>A. <input type="text" value="5"/> <input type="text" value="6"/> <input type="text" value="2"/> <input type="text" value="2"/> <input type="text" value="1"/></p> <p>B. <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/></p> <p>C. <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/></p> <p>D. <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/></p>   |  |   |
| <p><b>7. Site Mailing Address</b></p>   | <p>Street or P.O. Box: P.O. Box 3090</p> <p>City, Town, or Village: Carlsbad</p> <p>State: NM Country: USA Zip Code: 88221</p>   |  |   |
| <p><b>8. Site Contact Person</b></p>  | <p>First Name: Jose MI: R. Last: Franco</p> <p>Title: Manager, Carlsbad Field Office (CBFO)</p> <p>Street or P.O. Box: P.O. Box 3090</p> <p>City, Town or Village: Carlsbad</p> <p>State: NM Country: USA Zip Code: 88221</p> <p>Email: jose.franco@wipp.ws</p> <p>Phone: (575) 234-7300 Ext.: Fax: (575) 234-7027</p>   |  |   |
| <p><b>9. Legal Owner and Operator of the Site</b></p>                               | <p>A. Name of Site's Legal Owner: U.S. Department of Energy Date Became Owner: 05/18/1981</p> <p>Owner Type: <input type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p> <p>Street or P.O. Box: P.O. Box 3090</p> <p>City, Town, or Village: Carlsbad Phone: (575) 234-7300</p> <p>State: NM Country: USA Zip Code: 88221</p> <p>B. Name of Site's Operator: U.S. Department of Energy Date Became Operator: 05/18/1981</p> <p>Operator Type: <input type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>  |  |   |

**10. Type of Regulated Waste Activity (at your site)**  
 Mark "Yes" or "No" for all current activities (as of the date submitting the form); complete any additional boxes as instructed.

**A. Hazardous Waste Activities; Complete all parts 1-10.**

- |  |   |
|--|---|
| <p><b>Y <input checked="" type="checkbox"/> N <input type="checkbox"/> 1. Generator of Hazardous Waste</b><br/>                 If "Yes", mark only one of the following – a, b, or c.</p> <p><input checked="" type="checkbox"/> a. LQG: Generates, in any calendar month, 1,000 kg/mo (2,200 lbs./mo.) or more of hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 1 kg/mo (2.2 lbs./mo) of acute hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 100 kg/mo (220 lbs./mo) of acute hazardous spill cleanup material.</p> <p><input type="checkbox"/> b. SQG: 100 to 1,000 kg/mo (220 – 2,200 lbs./mo) of non-acute hazardous waste.</p> <p><input type="checkbox"/> c. CESQG: Less than 100 kg/mo (220 lbs./mo) of non-acute hazardous waste.</p> <p>If "Yes" above, indicate other generator activities in 2-4.</p> <p><b>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 2. Short-Term Generator</b> (generate from a short-term or one-time event and not from on-going processes). If "Yes", provide an explanation in the Comments section.</p> <p><b>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 3. United States Importer of Hazardous Waste</b></p> <p><b>Y <input checked="" type="checkbox"/> N <input type="checkbox"/> 4. Mixed Waste (hazardous and radioactive) Generator</b></p> | <p><b>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 5. Transporter of Hazardous Waste</b><br/>                 If "Yes", mark all that apply.</p> <p><input type="checkbox"/> a. Transporter</p> <p><input type="checkbox"/> b. Transfer Facility (at your site)</p> <p><b>Y <input checked="" type="checkbox"/> N <input type="checkbox"/> 6. Treater, Storer, or Disposer of Hazardous Waste</b> Note: A hazardous waste Part B permit is required for these activities.</p> <p><b>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 7. Recycler of Hazardous Waste</b></p> <p><b>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 8. Exempt Boiler and/or Industrial Furnace</b><br/>                 If "Yes", mark all that apply.</p> <p><input type="checkbox"/> a. Small Quantity On-site Burner Exemption</p> <p><input type="checkbox"/> b. Smelting, Melting, and Refining Furnace Exemption</p> <p><b>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 9. Underground Injection Control</b></p> <p><b>Y <input checked="" type="checkbox"/> N <input type="checkbox"/> 10. Receives Hazardous Waste from Off-site</b></p> |
|--|---|

**B. Universal Waste Activities; Complete all parts 1-2.**

- Y  N  1. Large Quantity Handler of Universal Waste** (you accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste managed at your site. If "Yes", mark all that apply.
- |                                 |                          |
|---------------------------------|--------------------------|
| a. Batteries                    | <input type="checkbox"/> |
| b. Pesticides                   | <input type="checkbox"/> |
| c. Mercury containing equipment | <input type="checkbox"/> |
| d. Lamps                        | <input type="checkbox"/> |
| e. Other (specify) _____        | <input type="checkbox"/> |
| f. Other (specify) _____        | <input type="checkbox"/> |
| g. Other (specify) _____        | <input type="checkbox"/> |
- Y  N  2. Destination Facility for Universal Waste**  
 Note: A hazardous waste permit may be required for this activity.

**C. Used Oil Activities; Complete all parts 1-4.**

- Y  N  1. Used Oil Transporter**  
 If "Yes", mark all that apply.
- a. Transporter
- b. Transfer Facility (at your site)
- Y  N  2. Used Oil Processor and/or Re-refiner**  
 If "Yes", mark all that apply.
- a. Processor
- b. Re-refiner
- Y  N  3. Off-Specification Used Oil Burner**
- Y  N  4. Used Oil Fuel Marketer**  
 If "Yes", mark all that apply.
- a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
- b. Marketer Who First Claims the Used Oil Meets the Specifications

**D. Eligible Academic Entities with Laboratories—Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K**

- ❖ You can **ONLY** Opt into Subpart K if:
  - you are at least one of the following: a college or university; a teaching hospital that is owned by or has a formal affiliation agreement with a college or university; or a non-profit research institute that is owned by or has a formal affiliation agreement with a college or university; AND
  - you have checked with your State to determine if 40 CFR Part 262 Subpart K is effective in your state

Y  N  1. Opting into or currently operating under 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories  
 See the item-by-item instructions for definitions of types of eligible academic entities. Mark all that apply:

a. College or University

b. Teaching Hospital that is owned by or has a formal written affiliation agreement with a college or university

c. Non-profit Institute that is owned by or has a formal written affiliation agreement with a college or university

Y  N  2. Withdrawing from 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories

**11. Description of Hazardous Waste**

**A. Waste Codes for Federally Regulated Hazardous Wastes.** Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

|      |      |      |      |      |      |                   |
|------|------|------|------|------|------|-------------------|
| D004 | D019 | D033 | F001 | P030 | U043 | U108              |
| D005 | D021 | D034 | F002 | P098 | U044 | U122              |
| D006 | D022 | D035 | F003 | P099 | U052 | U133              |
| D007 | D026 | D036 | F004 | P106 | U070 | U134              |
| D008 | D027 | D037 | F005 | P120 | U072 | U151              |
| D009 | D028 | D038 | F006 | U002 | U078 | U154              |
| D010 | D029 | D039 | F007 | U003 | U079 | U159              |
| D011 | D030 | D040 | F009 | U019 | U103 | U196              |
| D018 | D032 | D043 | P015 | U037 | U105 | More Codes Attch. |

**B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes.** Please list the waste codes of the State-Regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed.

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| Additional Hazardous Waste Numbers from Section 10 |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| U209   |  |  |  |  |  |  |
| U210   |  |  |  |  |  |  |
| U220   |  |  |  |  |  |  |
| U226   |  |  |  |  |  |  |
| U228   |  |  |  |  |  |  |
| U239   |  |  |  |  |  |  |



**United States Environmental Protection Agency  
HARDOUS WASTE PERMIT INFORMATION FORM**

|   |   |                              |                                   |
|---|---|------------------------------|-----------------------------------|
| <b>1. Facility Permit Contact</b>                       | <b>First Name:</b> Jose                                 | <b>MI:</b> R.                | <b>Last Name:</b> Franco          |
|   | <b>Contact Title:</b> Manager, Carlsbad Field Office    |                              |                                   |
|   | <b>Phone:</b> (575) 234-7300                            | <b>Ext.:</b>                 | <b>Email:</b> jose.franco@wipp.ws |
| <b>2. Facility Permit Contact Mailing Address</b>       | <b>Street or P.O. Box:</b> P.O. Box 3090                |                              |                                   |
|   | <b>City, Town, or Village:</b> Carlsbad                 |                              |                                   |
|   | <b>State:</b> NM  |                              |                                   |
|   | <b>Country:</b> USA                                     | <b>Zip Code:</b> 88221       |                                   |
| <b>3. Operator Mailing Address and Telephone Number</b> | <b>Street or P.O. Box:</b> P.O. Box 3090                |                              |                                   |
|   | <b>City, Town, or Village:</b> Carlsbad                 |                              |                                   |
|   | <b>State:</b> NM  | <b>Phone:</b> (575) 234-7300 |                                   |
|   | <b>Country:</b> USA                                     | <b>Zip Code:</b> 88221       |                                   |
| <b>4. Facility Existence Date</b>                       | <b>Facility Existence Date (mm/dd/yyyy):</b> 05/18/1981 |                              |                                   |

| <b>5. Other Environmental Permits</b>          |                         |  |  |  |  |  |  |  |  |  |  |                       |                                      |
|--|-------------------------|--|--|--|--|--|--|--|--|--|--|-----------------------|--------------------------------------|
| <b>A. Facility Type</b><br><i>(Enter code)</i> | <b>B. Permit Number</b> |  |  |  |  |  |  |  |  |  |  | <b>C. Description</b> |                                      |
|  |                         |  |  |  |  |  |  |  |  |  |  |                       | See Permit Attachment B, Appendix B1 |
|  |                         |  |  |  |  |  |  |  |  |  |  |                       |                                      |
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|  |                         |  |  |  |  |  |  |  |  |  |  |                       |                                      |

**6. Nature of Business:** The Waste Isolation Pilot Plant (WIPP) is a U.S. Department of Energy facility which entails receiving, unloading, and transferring radioactive-mixed waste from the surface of the site to the underground hazardous waste management units. Waste will be emplaced in an underground geologic repository horizon located in a deep-bedded salt formation approximately 2,150 feet beneath the surface.

**7. Process Codes and Design Capacities – Enter information in the Section on Form Page 3**

**A. PROCESS CODE** – Enter the code from the list of process codes below that best describes each process to be used at the facility. If more lines are needed, attach a separate sheet of paper with the additional information. For “other” processes (i.e., D99, S99, T04 and X99), describe the process (including its design capacity) in the space provided in Item 8.

**B. PROCESS DESIGN CAPACITY** – For each code entered in Item 7.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.

2. **UNIT OF MEASURE** – For each amount entered in Item 7.B(1), enter the code in Item 7.B(2) from the list of unit of measure codes below that describes the unit of measure used. Select only from the units of measure in this list.

**C. PROCESS TOTAL NUMBER OF UNITS** – Enter the total number of units for each corresponding process code.

| Process Code     | Process                             | Appropriate Unit of Measure for Process Design Capacity  | Process Code                     | Process  | Appropriate Unit of Measure for Process Design Capacity   |
|------------------|-------------------------------------|--|----------------------------------|--|---|
| <b>Disposal</b>  |                                     |  | <b>Treatment (Continued)</b>     |  |   |
| D79              | Underground Injection Well Disposal | Gallons; Liters; Gallons Per Day; or Liters Per Day  | T81                              | Cement Kiln  | Gallons Per Day; Liters Per Day; Pounds Per Hour; Short Tons Per Hour;  |
| D80              | Landfill                            | Acre-feet; Hectares-meter; Acres; Cubic Meters; Hectares; Cubic Yards  | T82                              | Lime Kiln  | Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Short Tons Per Day; BTU Per Hour; Liters Per Hour;   |
| D81              | Land Treatment                      | Acres or Hectares  | T83                              | Aggregate Kiln   | Hour  |
| D82              | Ocean Disposal                      | Gallons Per Day or Liters Per Day  | T84                              | Phosphate Kiln   |   |
| D83              | Surface Impoundment Disposal        | Gallons; Liters; Cubic Meters; or Cubic Yards  | T85                              | Coke Oven  |   |
| D99              | Other Disposal                      | Any Unit of Measure Listed Below   | T86                              | Blast Furnace  |   |
| <b>Storage</b>   |                                     |  | T87                              | Smelting, Melting, or Refining Furnace   |   |
| S01              | Container                           | Gallons; Liters; Cubic Meters; or Cubic Yards  | T88                              | Titanium Dioxide Chloride Oxidation Reactor                                      |   |
| S02              | Tank Storage                        | Gallons; Liters; Cubic Meters; or Cubic Yards  | T89                              | Methane Reforming Furnace  |   |
| S03              | Waste Pile                          | Cubic Yards or Cubic Meters  | T90                              | Pulping Liquor Recovery Furnace  |   |
| S04              | Surface Impoundment                 | Gallons; Liters; Cubic Meters; or Cubic Yards  | T91                              | Combustion Device Used in the Recovery of Sulfur Values from Spent Sulfuric Acid |   |
| S05              | Drip Pad                            | Gallons; Liters; Cubic Meters; Hectares; or Cubic Yards  | T92                              | Halogen Acid Furnaces  |   |
| S06              | Containment Building Storage        | Cubic Yards or Cubic Meters  | T93                              | Other Industrial Furnaces Listed in 40 CFR 260.10                                |   |
| S99              | Other Storage                       | Any Unit of Measure Listed Below   | T94                              | Containment Building Treatment   | Cubic Yards; Cubic Meters; Short Tons Per Hour; Gallons Per Hour; Liters Per Hour; BTU Per Hour; Pounds Per Hour; Short Tons Per Day; Kilograms Per Hour; Metric Tons Per Day; Gallons Per Day; Liters Per Day; Metric Tons Per Hour; or Million BTU Per Hour |
| <b>Treatment</b> |                                     |  | <b>Miscellaneous (Subpart X)</b> |  |   |
| T01              | Tank Treatment                      | Gallons Per Day; Liters Per Day  | X01                              | Open Burning/Open Detonation   | Any Unit of Measure Listed Below  |
| T02              | Surface Impoundment                 | Gallons Per Day; Liters Per Day  | X02                              | Mechanical Processing  | Short Tons Per Hour; Metric Tons Per Hour; Short Tons Per Day; Metric Tons Per Day; Pounds Per Hour; Kilograms Per Hour; Gallons Per Day; Metric Tons Per Hour; or Million BTU Per Hour   |
| T03              | Incinerator                         | Short Tons Per Hour; Metric Tons Per Hour; Gallons Per Hour; Liters Per Hour; BTUs Per Hour; Pounds Per Hour; Short Tons Per Day; Kilograms Per Hour; Gallons Per Day; Metric Tons Per Hour; or Million BTU Per Hour | X03                              | Thermal Unit   | Gallons Per Day; Liters Per Day; Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Short Tons Per Day; BTU Per Hour; Gallons Per Day; Liters Per Hour; or Million BTU Per Hour                             |
| T04              | Other Treatment                     | Gallons Per Day; Liters Per Day; Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Short Tons Per Day; BTUs Per Hour; Gallons Per Day; Liters Per Hour; or Million BTU Per Hour         | X04                              | Geologic Repository  | Cubic Yards; Cubic Meters; Acre-feet; Hectare-meter; Gallons; or Liters   |
| T80              | Boiler                              | Gallons; Liters; Gallons Per Hour; Liters Per Hour; BTUs Per Hour; or Million BTU Per Hour   | X99                              | Other Subpart X  | Any Unit of Measure Listed Below  |

| Unit of Measure  | Unit of Measure Code | Unit of Measure      | Unit of Measure Code | Unit of Measure | Unit of Measure Code |
|------------------|----------------------|----------------------|----------------------|-----------------|----------------------|
| Gallons          | G                    | Short Tons Per Hour  | D                    | Cubic Yards     | Y                    |
| Gallons Per Hour | E                    | Short Tons Per Day   | N                    | Cubic Meters    | C                    |
| Gallons Per Day  | U                    | Metric Tons Per Hour | W                    | Acres           | B                    |
| Liters           | L                    | Metric Tons Per Day  | S                    | Acre-feet       | A                    |
| Liters Per Hour  | H                    | Pounds Per Hour      | J                    | Hectares        | Q                    |
| Liters Per Day   | V                    | Kilograms Per Hour   | X                    | Hectare-meter   | F                    |
|                  |                      | Million BTU Per Hour | X                    | BTU Per Hour    | I                    |

**7. Process Codes and Design Capacities (Continued)**

**EXAMPLE FOR COMPLETING Item 7 (shown in line number X-1 below): A facility has a storage tank, which can hold 533.788 gallons.**

| Line Number | A. Process Code<br>(From list above) |   |   | B. PROCESS DESIGN CAPACITY |                     | C. Process Total Number of Units | For Official Use Only |  |  |  |  |
|-------------|--------------------------------------|---|---|----------------------------|---------------------|----------------------------------|-----------------------|--|--|--|--|
|             |                                      |   |   | (1) Amount (Specify)       | (2) Unit of Measure |                                  |                       |  |  |  |  |
| X 1         | S                                    | 0 | 2 | 533.788                    | G                   | 001                              |                       |  |  |  |  |
| 1 1         | X                                    | 0 | 4 | 175600.0                   | C                   | 010                              |                       |  |  |  |  |
| 2           | S                                    | 0 | 1 | 194.1                      | C                   | 001                              |                       |  |  |  |  |
| 3           | S                                    | 0 | 1 | 242.0                      | C                   | 001                              |                       |  |  |  |  |
| 4           |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |
| 5           |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |
| 6           |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |
| 7           |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |
| 8           |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |
| 9           |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |
| 1 0         |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |
| 1 1         |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |
| 1 2         |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |
| 1 3         |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |

*Note: If you need to list more than 13 process codes, attach an additional sheet(s) with the information in the same format as above. Number the line sequentially, taking into account any lines that will be used for "other" process (i.e., D99, S99, T04, and X99) in Item 8.*

**8. Other Processes (Follow instructions from Item 7 for D99, S99, T04, and X99 process codes)**

| Line Number<br>(Enter #s in sequence with Item 7) | A. Process Code<br>(From list above) |   |   | B. PROCESS DESIGN CAPACITY |                     | C. Process Total Number of Units | For Official Use Only |  |  |  |  |
|---|--------------------------------------|---|---|----------------------------|---------------------|----------------------------------|-----------------------|--|--|--|--|
|   |                                      |   |   | (1) Amount (Specify)       | (2) Unit of Measure |                                  |                       |  |  |  |  |
| X 2   | T                                    | 0 | 4 | 100.00                     | U                   | 001                              |                       |  |  |  |  |
|   |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |
|   |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |
|   |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |
|   |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |
|   |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |
|   |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |
|   |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |
|   |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |
|   |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |
|   |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |
|   |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |
|   |                                      |   |   |                            |                     |                                  |                       |  |  |  |  |

**9. Description of Hazardous Wastes - Enter Information in the Sections on Form Page 5**

- 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 Item 9.A, estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in Item 9.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 Item 9.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 Item 9.A, select the code(s) from the list of process codes contained in Items 7.A and 8.A on page 3 to indicate all the processes that will be used to store, treat, and/or dispose of all listed hazardous wastes.

**For non-listed waste:** For each characteristic or toxic contaminant entered in Item 9.A, select the code(s) from the list of process codes contained in Items 7.A and 8.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 possess 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 9.D(1).
3. Use additional sheet, enter line number from previous sheet, and enter additional code(s) in Item 9.E.

**2. PROCESS DESCRIPTION:** If code is not listed for a process that will be used, describe the process in Item 9.D(2) or in Item 9.E(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 Item 9.A. On the same line complete Items 9.B, 9.C, and 9.D by estimating the total annual quantity of the waste and describing all the processes to be used to store, treat, and/or dispose of the waste.
2. In Item 9.A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In Item 9.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 9** (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 operations. 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 Hazardous Waste No. (Enter code) |   |   |   |   | B. Estimated Annual Qty of Waste | C. Unit of Measure (Enter code) | D. PROCESSES |   |   |  |   |   |  |  |  |  |  |  |  |  |  |  |                     |
|-------------|---|---|---|---|---|----------------------------------|---------------------------------|--------------|---|---|--|---|---|--|--|--|--|--|--|--|--|--|--|---------------------|
|             | (1) PROCESS CODES (Enter Code)          |   |   |   |   |                                  |                                 |              |   |   | (2) PROCESS DESCRIPTION (If code is not entered in 9.D(1)) |   |   |  |  |  |  |  |  |  |  |  |  |                     |
| X           | 1                                       | K | 0 | 5 | 4 | 900                              | P                               | T            | 0 | 3 | D  | 8 | 0 |  |  |  |  |  |  |  |  |  |  |                     |
| X           | 2                                       | D | 0 | 0 | 2 | 400                              | P                               | T            | 0 | 3 | D  | 8 | 0 |  |  |  |  |  |  |  |  |  |  |                     |
| X           | 3                                       | D | 0 | 0 | 1 | 100                              | P                               | T            | 0 | 3 | D  | 8 | 0 |  |  |  |  |  |  |  |  |  |  |                     |
| X           | 4                                       | D | 0 | 0 | 2 |                                  |                                 |              |   |   |  |   |   |  |  |  |  |  |  |  |  |  |  | Included With Above |

| 9. Description of Hazardous Wastes (Continued. Use additional sheet(s) as necessary; number pages as 5a, etc.) |   |   |   |   |                                  |                                 |              |   |  |   |   |   |   |   |   |   |  |
|--|---|---|---|---|----------------------------------|---------------------------------|--------------|---|--|---|---|---|---|---|---|---|--|
| Line Number  | A. EPA Hazardous Waste No. (Enter code) |   |   |   | B. Estimated Annual Qty of Waste | C. Unit of Measure (Enter code) | D. PROCESSES |   |  |   |   |   |   |   |   |   |  |
|  | (1) PROCESS CODES (Enter Code)          |   |   |   |                                  |                                 |              |   | (2) PROCESS DESCRIPTION (If code is not entered in 9.D(1)) |   |   |   |   |   |   |   |  |
|  | 1                                       | F | 0 | 0 | 1                                | 1891                            | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
|  | 2                                       | F | 0 | 0 | 2                                | 1860                            | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
|  | 3                                       | F | 0 | 0 | 3                                | 1593                            | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
|  | 4                                       | F | 0 | 0 | 4                                | 26                              | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
|  | 5                                       | F | 0 | 0 | 5                                | 1829                            | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
|  | 6                                       | F | 0 | 0 | 6                                | 915                             | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
|  | 7                                       | F | 0 | 0 | 7                                | 915                             | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
|  | 8                                       | F | 0 | 0 | 9                                | 915                             | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
|  | 9                                       | D | 0 | 0 | 4                                | 903                             | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 1  | 0                                       | D | 0 | 0 | 5                                | 484                             | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 1  | 1                                       | D | 0 | 0 | 6                                | 1819                            | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 1  | 2                                       | D | 0 | 0 | 7                                | 1248                            | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 1  | 3                                       | D | 0 | 0 | 8                                | 3246                            | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 1  | 4                                       | D | 0 | 0 | 9                                | 1727                            | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 1  | 5                                       | D | 0 | 1 | 0                                | 186                             | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 1  | 6                                       | D | 0 | 1 | 1                                | 1090                            | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 1  | 7                                       | D | 0 | 1 | 8                                | 749                             | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 1  | 8                                       | D | 0 | 1 | 9                                | 761                             | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 1  | 9                                       | D | 0 | 2 | 1                                | 26                              | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 2  | 0                                       | D | 0 | 2 | 2                                | 1098                            | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 2  | 1                                       | D | 0 | 2 | 6                                | 609                             | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 2  | 2                                       | D | 0 | 2 | 7                                | 26                              | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 2  | 3                                       | D | 0 | 2 | 8                                | 449                             | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 2  | 4                                       | D | 0 | 2 | 9                                | 478                             | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 2  | 5                                       | D | 0 | 3 | 0                                | 26                              | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 2  | 6                                       | D | 0 | 3 | 2                                | 26                              | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 2  | 7                                       | D | 0 | 3 | 4                                | 26                              | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 2  | 8                                       | D | 0 | 3 | 5                                | 139                             | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 2  | 9                                       | D | 0 | 3 | 6                                | 26                              | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 3  | 0                                       | D | 0 | 3 | 7                                | 26                              | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 3  | 1                                       | D | 0 | 3 | 8                                | 26                              | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 3  | 2                                       | D | 0 | 3 | 9                                | 26                              | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 3  | 3                                       | D | 0 | 4 | 0                                | 140                             | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 3  | 4                                       | D | 0 | 4 | 3                                | 26                              | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 3  | 5                                       | P | 0 | 1 | 5                                | 945                             | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |
| 3  | 6                                       | U | 0 | 0 | 2                                | 344                             | M            | X | 0  | 4 | S | 0 | 1 | S | 0 | 1 |  |

| 9. Description of Hazardous Wastes (Continued. Use additional sheet(s) as necessary; number pages as 5a, etc.) |   |   |   |   |   |                                  |                                 |                                |   |   |   |   |   |   |   |   |  |
|--|---|---|---|---|---|----------------------------------|---------------------------------|--------------------------------|---|---|---|---|---|---|---|---|--|
| Line Number  |   | A. EPA Hazardous Waste No. (Enter code) |   |   |   | B. Estimated Annual Qty of Waste | C. Unit of Measure (Enter code) | D. PROCESSES                   |   |   |   |   |   |   |   |   |  |
|  |   |   |   |   |   |                                  |                                 | (1) PROCESS CODES (Enter Code) |   |   |   |   |   |   |   | (2) PROCESS DESCRIPTION (If code is not entered in 9.D.1) |  |
| 3  | 7 | U                                       | 0 | 1 | 9 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 3  | 8 | U                                       | 0 | 3 | 7 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 3  | 9 | U                                       | 0 | 4 | 3 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 4  | 0 | U                                       | 0 | 4 | 4 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 4  | 1 | U                                       | 0 | 5 | 2 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 4  | 2 | U                                       | 0 | 7 | 0 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 4  | 3 | U                                       | 0 | 7 | 2 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 4  | 4 | U                                       | 0 | 7 | 8 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 4  | 5 | U                                       | 0 | 7 | 9 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 4  | 6 | U                                       | 1 | 0 | 5 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 4  | 7 | U                                       | 1 | 2 | 2 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 4  | 8 | U                                       | 1 | 3 | 3 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 4  | 9 | U                                       | 1 | 5 | 1 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 5  | 0 | U                                       | 1 | 5 | 4 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 5  | 1 | U                                       | 1 | 5 | 9 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 5  | 2 | U                                       | 1 | 9 | 6 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 5  | 3 | U                                       | 2 | 0 | 9 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 5  | 4 | U                                       | 2 | 1 | 0 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 5  | 5 | U                                       | 2 | 2 | 0 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 5  | 6 | U                                       | 2 | 2 | 6 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 5  | 7 | U                                       | 2 | 2 | 8 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 5  | 8 | U                                       | 2 | 3 | 9 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 5  | 9 | P                                       | 1 | 2 | 0 | 3.3                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 6  | 0 | U                                       | 1 | 3 | 4 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 6  | 1 | D                                       | 0 | 3 | 3 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 6  | 2 | P                                       | 0 | 3 | 0 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 6  | 3 | P                                       | 0 | 9 | 8 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 6  | 4 | P                                       | 0 | 9 | 9 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 6  | 5 | P                                       | 1 | 0 | 6 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 6  | 6 | U                                       | 0 | 0 | 3 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 6  | 7 | U                                       | 1 | 0 | 3 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
| 6  | 8 | U                                       | 1 | 0 | 8 | 344                              | M                               | X                              | 0 | 4 | S | 0 | 1 | S | 0 | 1   |  |
|  |   |   |   |   |   |                                  |                                 |                                |   |   |   |   |   |   |   |   |  |
|  |   |   |   |   |   |                                  |                                 |                                |   |   |   |   |   |   |   |   |  |
|  |   |   |   |   |   |                                  |                                 |                                |   |   |   |   |   |   |   |   |  |
|  |   |   |   |   |   |                                  |                                 |                                |   |   |   |   |   |   |   |   |  |

**10. Map**

Attach to this application a topographical map, or other equivalent map, of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all spring, rivers, and other surface water bodies in this map area. See instructions for precise requirements.

**11. Facility Drawing**

All existing facilities must include a scale drawing of the facility (see instructions for more detail).

**12. Photographs**

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment, and disposal areas; and sites of future storage, treatment, or disposal areas (see instructions for more detail).

**13. Comments**

See attached narrative from previous Part A Form (Section XII)

1 NM4890139088

2 **RCRA PART A APPLICATION CERTIFICATION**

3 The U.S. Department of Energy (DOE), through its Carlsbad Field Office, has signed as "owner  
4 and operator," and Nuclear Waste Partnership LLC, the Management and Operating Contractor  
5 (MOC), has signed this application for the permitted facility as "co-operator."

6 The DOE has determined that dual signatures best reflect the actual apportionment of Resource  
7 Conservation and Recovery Act (RCRA) responsibilities as follows:

8 The DOE's RCRA responsibilities are for policy, programmatic directives, funding and  
9 scheduling decisions, Waste Isolation Pilot Plant (WIPP) requirements of DOE generator  
10 sites, auditing, and oversight of all other parties engaged in work at the WIPP, as well as  
11 general oversight.

12 The MOC's RCRA responsibilities are for certain day-to-day operations (in accordance  
13 with general directions given by the DOE and in the Management and Operating Contract  
14 as part of its general oversight responsibility), including, but not limited to, the following:  
15 certain waste handling, monitoring, record keeping, certain data collection, reporting,  
16 technical advice, and contingency planning.

17 For purposes of the certification required by Title 20 of the New Mexico Administrative  
18 Code, Chapter 4, Part 1 (20.4.1 NMAC), Subpart IX, §270.11(d), the DOE's and the  
19 MOC's representatives certify, under penalty of law that this document and all attachments  
20 were prepared under their direction or supervision in accordance with a system designed  
21 to assure that qualified personnel properly gather and evaluate the information submitted.  
22 Based on their inquiry of the person or persons who manage the system, or those persons  
23 directly responsible for gathering the information, the information submitted is, to the best  
24 of their knowledge and belief, true, accurate, and complete for their respective areas of  
25 responsibility. We are aware that there are significant penalties for submitting false  
26 information, including the possibility of fine and imprisonment for knowing violations.

27 Owner and Operator Signature:   
28 Title: Manager, Carlsbad Field Office  
29 for: U.S. Department of Energy  
30 Date: 3-17-14

31 Co-Operator Signature:   
32 Title: Project Manager  
33 for: Nuclear Waste Partnership LLC  
34 Date: 3-17-14  
35