

February 28, 2022

FRNP-22-5950

Ms. NaKayla Casey
Kentucky Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd., 2nd Floor
Frankfort, KY 40601

Dear Ms. Casey:

2021 Annual Hazardous Waste Report, Assessment Return, and Claim for Exclusion for the Paducah Gaseous Diffusion Plant, McCracken County, Kentucky, Permit No. KY8-890-008-982, Agency Interest No. 3059

Enclosed is the Hazardous Waste Report for calendar year (CY) 2021 for activities conducted under Kentucky Division of Waste Management Hazardous Waste Management Facility Permit Number KY8-890-008-982 (Permit).

Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) wastes are reported in accordance with the December 14, 2011, U.S. Environmental Protection Agency guidance, "Resource Conservation and Recovery Act (RCRA) Biennial Report Requirements for Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) Response Actions." CERCLA wastes are identified in the report using source code G49, Other Remediation.

A summary of potential noncompliances identified during CY 2021 is enclosed, in accordance with Condition III.E.17 of the Permit.

There was no reportable claim for exclusion during CY 2021.

A check in the amount of \$1,333.94 is enclosed for waste generated in CY 2021 that subsequently was disposed of, treated, or stored.

If you have any questions, please contact Carrie Maxie at (270) 816-5100.

Sincerely,



Myrna Espinosa Redfield
Program Manager

Enclosures:

1. Hazardous Waste Assessment Return
2. Claim for Exclusion
3. Summary of Noncompliance
4. 2021 Annual Hazardous Waste Report EPA Form 8700-13 A/B (SI)
5. 2021 Annual Hazardous Waste Report EPA Form 8700-13 A/B (GM)
6. 2021 Annual Hazardous Waste Report EPA Form 8700-13 A/B (OI)
7. 2021 Annual Hazardous Waste Report Kentucky Addendum Form 1
8. 2021 Annual Hazardous Waste Report Kentucky Addendum Form 2
9. 2021 Annual Hazardous Waste Report Kentucky Addendum Form 4
10. Check in the Amount of \$1,333.94

cc w/ enclosures:

McCracken County Judge Executive

e-copy:

J. Davis, PPPO
T. Duncan, PPPO
A. Ladd, PPPO
C. Maxie, FRNP
A. Parish, PPPO
J. Woodard, PPPO

**2021 Annual Hazardous Waste Report,
Assessment Return, and
Claim for Exclusion
for the
Paducah Gaseous Diffusion Plant,
McCracken County, Kentucky**

**Permit Number KY8-890-008-982
Agency Interest No. 3059**

CLEARED FOR PUBLIC RELEASE

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ENCLOSURE 1

**2021 ANNUAL HAZARDOUS WASTE REPORT, ASSESSMENT RETURN,
AND CLAIM FOR EXCLUSION FOR THE
PADUCAH GASEOUS DIFFUSION PLANT,
MCCRACKEN COUNTY, KENTUCKY,
PERMIT NUMBER KY8-890-008-982**

HAZARDOUS WASTE ASSESSMENT RETURN

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For official use only:

Amt. \$ _____ Receipt # _____ Receipt Date _____ Initials _____

****SEND NO CHECK IF TOTAL AMOUNT DUE IS LESS THAN \$50.00****

Commonwealth of Kentucky
HAZARDOUS WASTE ASSESSMENT RETURN
 From January - December

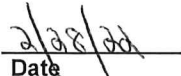
Return **BEFORE March 1st**. Late fees apply to Assessments date stamped by the Branch after March 1st.
 Make checks payable to the **KENTUCKY STATE TREASURER**.

1. EPA ID Number: KY8-890-008-982		County: McCracken	Agency Interest Number (AI#): 3059
Site Name: U.S. DOE Paducah Gaseous Diffusion Plant			
Contact Person: Myrna E. Redfield		Phone No: (270) 441-5113	Extension: N/A
Mailing Address: 5511 Hobbs Road			
City, State and Zip: Kevil, Kentucky 42053			
ASSESSMENT CATEGORIES List waste generated and/or Received from out-of-state from January 1 st - December 31 st	Column A QUANTITY List quantity in pounds.	Column B RATE	Column C AMOUNT DUE Multiply Column A x B
2a. Solid hazardous waste generated and destined for disposal off-site	196,657	\$0.002 (if 2a)	\$ 393.31
2b. <i>Solid hazardous waste burned off-site for energy recovery in an industrial boiler or furnace</i>	0	\$0.001 (if 2b)	\$ 0
3a. Solid hazardous waste generated and treated, recycled, or disposed of on-site	0	\$0.001 (if 3a)	\$ 0
3b. <i>Solid hazardous waste burned on-site for energy recovery in an industrial boiler or furnace</i>	0	\$0.0005 (if 3b)	\$ 0
4a. Liquid hazardous waste generated and destined for disposal off-site	78,386	\$0.012 (if 4a)	\$ 940.63
4b. <i>Liquid hazardous waste burned off-site for energy recovery in an industrial boiler or furnace</i>	0	\$0.006 (if 4b)	\$ 0
5a. Liquid hazardous waste generated and treated, recycled, or disposed of on-site	0	\$0.006 (if 5a)	\$ 0
5b. <i>Liquid hazardous waste burned on-site for energy recovery in an industrial boiler or furnace</i>	0	\$0.003 (if 5b)	\$ 0
6. Waste excluded from all Exclusions Forms	0		
7. SUBTOTAL			\$ 1,333.94
8. Interest on late submittals calculated from January 1 to Branch receipt date stamp			\$ 0
9. Penalties on late submittals calculated from January 1 to Branch receipt date stamp			\$ 0
10. Adjustments from over payments And under payments			\$ 0
11. TOTAL AMOUNT DUE (ASSESSMENT WAIVED IF UNDER \$50.00)			\$ 1,333.94

CERTIFICATION: I certify 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.


 Original Signature

Myrna E. Redfield, Four Rivers Nuclear Partnership, LLC, Program Manager
 Name and Title


 Date

Hazardous Waste Assessment Return for 2021

Schedule 1

US DOE Paducah Gaseous Diffusion Plant
EPA ID: KY8-890-008-982

Solid hazardous waste received from off-site

0 pounds

Hazardous Waste Assessment Return for 2021

Schedule 2

US DOE Paducah Gaseous Diffusion Plant
EPA ID: KY8-890-008-982

Liquid hazardous waste received from off-site

0 pounds

Hazardous Waste Assessment Return for 2021

Schedule 3

US DOE Paducah Gaseous Diffusion Plant
EPA ID: KY8-890-008-982

Solid hazardous waste generated and sent off-site	196,657	pounds
Solid hazardous waste generated and treated, recycled, or disposed of on-site	0	pounds
Liquid hazardous waste generated and sent off-site	78,386	pounds
Liquid hazardous waste generated and treated, recycled, or disposed of on-site	0	pounds

ENCLOSURE 2

**2021 ANNUAL HAZARDOUS WASTE REPORT, ASSESSMENT RETURN,
AND CLAIM FOR EXCLUSION FOR THE
PADUCAH GASEOUS DIFFUSION PLANT,
MCCRACKEN COUNTY, KENTUCKY,
PERMIT NUMBER KY8-890-008-982**

CLAIM FOR EXCLUSION FROM THE HAZARDOUS WASTE ASSESSMENT

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CLAIM FOR EXCLUSION

There was no reportable claim for exclusion in calendar year 2021.

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ENCLOSURE 3

**2021 ANNUAL HAZARDOUS WASTE REPORT, ASSESSMENT RETURN,
AND CLAIM FOR EXCLUSION FOR THE
PADUCAH GASEOUS DIFFUSION PLANT,
MCCRACKEN COUNTY, KENTUCKY,
PERMIT NUMBER KY8-890-008-982**

SUMMARY OF NONCOMPLIANCE

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SUMMARY ONE

Improper Management of Hazardous Waste

A. Owner Information

Name: U.S. Department of Energy (DOE)
Address: 5501 Hobbs Road
Kevil, Kentucky 42053
Telephone Number: (270) 441-6800

B. Facility Information

Name: U.S. Department of Energy Paducah Site
Operator: Four Rivers Nuclear Partnership, LLC (FRNP)
Street Address: 5511 Hobbs Road
Kevil, Kentucky 42053
Telephone Number: (270) 441-5113
EPA ID Number: KY8-890-008-982

C. Description of the Potential Noncompliance and Its Cause

On June 3, 2021, Four Rivers Nuclear Partnership, LLC, (FRNP) started the generation of waste in a roll-off bin for dry active waste (DAW) in an on-site process building. DAW is low-level radioactive waste, which is dry waste primarily made up of cloth, plastic, rubber, paper products, etc. On October 13, 2021, while transferring the contents of the roll-off bin to a gondola for shipment at an on-site transfer facility, nonconforming RCRA items (i.e., one fuse, three bulbs, and one circuit board) were found that were being improperly managed. During a review of the roll-off bins at the transfer facility, a second roll-off bin was found with nonconforming RCRA items (i.e., 20 fuses, 2 circuit boards, 2 light bulbs, 1-inch lead solder pieces, and assorted batteries).

D. The Period(s) of Potential Noncompliance

The period of potential noncompliance for the first roll-off bin began on June 3, 2021, when generation of waste started and ended on October 13, 2021, when the nonconforming RCRA items were discovered and placed into RCRA-compliant storage. The period of potential noncompliance for the second roll-off bin began on September 10, 2021, and ended on October 27, 2021, when the nonconforming RCRA items were discovered and placed into RCRA-compliant storage.

E. Whether the Potential Noncompliance Has Been Corrected; If Not Corrected, the Anticipated Date That It Will Be Corrected

The noncompliance for the improper storage has been corrected by moving the nonconforming RCRA items into RCRA-compliant storage.

F. The Date the Potential Noncompliance Will Be Corrected

The noncompliances for the improper storage have been corrected as described in section E.

G. Steps Taken to Reduce, Eliminate, and Prevent Recurrence of the Potential Noncompliance

- A waste coordinator was present during the repackaging of additional DAW roll-off bins at the on-site transfer facility to ensure that nonconforming items were not placed in the gondola.
- FRNP Waste Management compiled an informational communication bulletin that was released to the entire company on November 4, 2021, that covered prohibited items for low-level waste/sanitary waste streams.
- New signage is being developed and will be posted near the waste accumulation areas listing the nonconforming items for the DAW waste stream.
- CP2-WM-0011, *Waste Acceptance Criteria for the Treatment, Storage, and Disposal Facilities at the Paducah U.S. Department of Energy Site*, and CP3-WM-3015, *Waste Packaging*, and their associated forms are being revised to clarify nonconforming items.
- Waste generator-specific training is being revised to more specifically describe nonconforming items.
- A follow-up assessment will be completed to verify waste generator knowledge of waste generation and acceptable waste practices.

H. Quantities of Waste and All Applicable Waste Codes

Approximately 7 lb of RCRA items removed from the roll-off bins were placed in a collection container, which is managed under RCRA codes Cadmium (D006), Lead (D008), Mercury (D009), and Silver (D011).

I. Potential for Release


No evidence of a potential or known release was noted during the storage or shipment of this waste.

ENCLOSURE 4

**2021 ANNUAL HAZARDOUS WASTE REPORT, ASSESSMENT RETURN,
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PADUCAH GASEOUS DIFFUSION PLANT,
MCCRACKEN COUNTY, KENTUCKY,
PERMIT NUMBER KY8-890-008-982**

EPA FORM 8700-13 A/B (S1) – IDENTIFICATION AND CERTIFICATION

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United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM	
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1. Reason for Submittal (Select only one.)

<input type="checkbox"/>	Obtaining or updating an EPA ID number for on-going regulated activities (Items 10-17 below) that will continue for a period of time.
<input checked="" type="checkbox"/>	Submitting as a component of the Hazardous Waste Report for <u>2021</u> (Reporting Year)
<input checked="" type="checkbox"/>	Site was a TSD facility, a reverse distributor, and/or generator of $\geq 1,000$ kg of non-acute hazardous waste, > 1 kg of acute hazardous waste, or > 100 kg of acute hazardous waste spill cleanup in one or more months of the reporting year (or State equivalent LQG regulations)
<input type="checkbox"/>	Notifying that regulated activity is no longer occurring at this Site
<input type="checkbox"/>	Obtaining or updating an EPA ID number for conducting Electronic Manifest Broker activities
<input type="checkbox"/>	Submitting a new or revised Part A (permit) Form

2. Site EPA ID Number

K	Y	8	8	9	0	0	0	8	9	8	2
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3. Site Name

United States Department of Energy-Paducah Gaseous Diffusion Plant

4. Site Location Address

Street Address 5600 Hobbs Road			
City, Town, or Village Kevil		County McCracken	
State Kentucky	Country USA	Zip Code 42053	
Latitude 37° 6' 41.95"	Longitude 88° 48' 46.09"	<input type="checkbox"/> Use Lat/Long as Primary Address	

5. Site Mailing Address

Same as Location Street Address

Street Address 5511 Hobbs Road			
City, Town, or Village Kevil			
State Kentucky	Country USA	Zip Code 42053	

6. Site Land 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
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7. North American Industry Classification System (NAICS) Code(s) for the Site (at least 5-digit codes)

A. (Primary) 562910	C. 562212
B. 562211	D. NA

8. Site Contact Information

 Same as Location Address

First Name	Myrna	MI	E	Last Name	Redfield
Title	Program Manager				
Street Address	5511 Hobbs Road				
City, Town, or Village	Kevil				
State	Kentucky	Country	USA	Zip Code	42053
Email	myrna.redfield@pad.pppo.gov				
Phone	270-441-5113	Ext	NA	Fax	NA

9. Legal Owner and Operator of the Site

A. Name of Site's Legal Owner

 Same as Location Address

Full Name	U. S. Department of Energy			Date Became Owner (mm/dd/yyyy)	10/18/1950
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				
Street Address	5501 Hobbs Road				
City, Town, or Village	Kevil				
State	Kentucky	Country	USA	Zip Code	42053
Email	jennifer.woodard@pppo.gov				
Phone	270-441-6820	Ext	NA	Fax	NA
Comments	NA				

B. Name of Site's Legal Operator

 Same as Location Address

Full Name	Four Rivers Nuclear Partnership, LLC			Date Became Operator (mm/dd/yyyy)	10/20/2017
Operator Type	<input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other				
Street Address	5511 Hobbs Road				
City, Town, or Village	Kevil				
State	Kentucky	Country	USA	Zip Code	42053
Email	myrna.redfield@pad.pppo.gov				
Phone	270-441-5113	Ext	NA	Fax	NA
Comments	NA				

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

<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	1. Generator of Hazardous Waste—If "Yes", mark only one of the following—a, b, c	
	<input checked="" type="checkbox"/>	a. LQG	-Generates, in any calendar month, 1,000 kg/mo (2,200 lb/mo) or more of non-acute hazardous waste (includes quantities imported by importer site); or - Generates, in any calendar month, or accumulates at any time, more than 1 kg/mo (2.2 lb/mo) of acute hazardous waste; or - Generates, in any calendar month or accumulates at any time, more than 100 kg/mo (220 lb/mo) of acute hazardous spill cleanup material.
	<input type="checkbox"/>	b. SQG	100 to 1,000 kg/mo (220-2,200 lb/mo) of non-acute hazardous waste and no more than 1 kg (2.2 lb) of acute hazardous waste and no more than 100 kg (220 lb) of any acute hazardous spill cleanup material.
	<input type="checkbox"/>	c. VSQG	Less than or equal to 100 kg/mo (220 lb/mo) of non-acute hazardous waste.
<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N	2. Short-Term Generator (generates from a short-term or one-time event and not from on-going processes). If "Yes", provide an explanation in the Comments section. <i>Note: If "Yes", you MUST indicate that you are a Generator of Hazardous Waste in Item 10.A.1 above.</i>	
<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	3. Treater, Storer or Disposer of Hazardous Waste—Note: Part B of a hazardous waste permit is required for these activities.	
<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N	4. Receives Hazardous Waste from Off-site	
<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N	5 Recycler of Hazardous Waste	
	<input type="checkbox"/>	a. Recycler who stores prior to recycling	
	<input type="checkbox"/>	b. Recycler who does not store prior to recycling	
<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N	6. Exempt Boiler and/or Industrial Furnace—If "Yes", mark all that apply.	
	<input type="checkbox"/>	a. Small Quantity On-site Burner Exemption	
	<input type="checkbox"/>	b. Smelting, Melting, and Refining Furnace Exemption	

B. 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.

D001	D002	D003	D004	D005	D006	D007
D008	D009	D010	D011	D018	D019	D021
D022	D027	D032	D035	D039	D040	F001
F002	F027	F039	U228			

C. Waste Codes for State Regulated (non-Federal) Hazardous Wastes. Please list the waste codes of the State 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.

NA						

11. Additional Regulated Waste Activities (NOTE: Refer to your State regulations to determine if a separate permit is required.)

A. Other Waste Activities

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	1. Transporter of Hazardous Waste—If “Yes”, mark all that apply.
<input checked="" type="checkbox"/>	a. Transporter
<input type="checkbox"/>	b. Transfer Facility (at your site)
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	2. Underground Injection Control
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	3. United States Importer of Hazardous Waste
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	4. Recognized Trader—If “Yes”, mark all that apply.
<input type="checkbox"/>	a. Importer
<input type="checkbox"/>	b. Exporter
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	5. Importer/Exporter of Spent Lead-Acid Batteries (SLABs) under 40 CFR 266 Subpart G—If “Yes”, mark all that apply.
<input type="checkbox"/>	a. Importer
<input type="checkbox"/>	b. Exporter

B. Universal Waste Activities

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

C. Used Oil Activities

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

D. Pharmaceutical Activities

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	1. Operating under 40 CFR Part 266, Subpart P for the management of hazardous waste pharmaceuticals—if “Yes”, mark only one. Note: See the item-by-item instructions for definitions of healthcare facility and reverse distributor.
<input type="checkbox"/>	a. Healthcare Facility
<input type="checkbox"/>	b. Reverse Distributor
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	2. Withdrawing from operating under 40 CFR Part 266, Subpart P for the management of hazardous waste pharmaceuticals. Note: You may only withdraw if you are a healthcare facility that is a VSQG for all of your hazardous waste, including hazardous waste pharmaceuticals.

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

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Opting into or currently operating under 40 CFR Part 262, Subpart K for the management of hazardous wastes in laboratories— If “Yes”, mark all that apply. Note: See the item-by-item instructions for definitions of types of eligible academic entities.
<input type="checkbox"/>	1. College or University
<input type="checkbox"/>	2. Teaching Hospital that is owned by or has a formal written affiliation with a college or university
<input type="checkbox"/>	3. Non-profit Institute that is owned by or has a formal written affiliation with a college or university
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	B. Withdrawing from 40 CFR Part 262, Subpart K for the management of hazardous wastes in laboratories.

13. Episodic Generation

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Are you an SQG or VSQG generating hazardous waste from a planned or unplanned episodic event, lasting no more than 60 days, that moves you to a higher generator category. If “Yes”, you must fill out the Addendum for Episodic Generator.
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14. LQG Consolidation of VSQG Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Are you an LQG notifying of consolidating VSQG Hazardous Waste Under the Control of the Same Person pursuant to 40 CFR 262.17(f)? If “Yes”, you must fill out the Addendum for LQG Consolidation of VSQG hazardous waste.
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15. Notification of LQG Site Closure for a Central Accumulation Area (CAA) (optional) OR Entire Facility (required)

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	LQG Site Closure of a Central Accumulation Area (CAA) or Entire Facility.
A. <input type="checkbox"/> Central Accumulation Area (CAA) or <input type="checkbox"/> Entire Facility	
B. Expected closure date: _____ mm/dd/yyyy	
C. Requesting new closure date: _____ mm/dd/yyyy	
D. Date closed : _____ mm/dd/yyyy	
<input type="checkbox"/>	1. In compliance with the closure performance standards 40 CFR 262.17(a)(8)
<input type="checkbox"/>	2. Not in compliance with the closure performance standards 40 CFR 262.17(a)(8)

16. Notification of Hazardous Secondary Material (HSM) Activity

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Are you notifying under 40 CFR 260.42 that you will begin managing, are managing, or will stop managing hazardous secondary material under 40 CFR 260.30, 40 CFR 261.4(a)(23), (24), (25), or (27)? If "Yes", you must fill out the Addendum to the Site Identification Form for Managing Hazardous Secondary Material.
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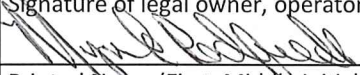
17. Electronic Manifest Broker

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Are you notifying as a person, as defined in 40 CFR 260.10, electing to use the EPA electronic manifest system to obtain, complete, and transmit an electronic manifest under a contractual relationship with a hazardous waste generator?
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18. Comments (include item number for each comment)

This report includes those Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) wastes subject to reporting pursuant to EPA guidance dated December 14, 2011, "Resource Conservation and Recovery Act (RCRA) Biennial Report Requirements for Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) Response Actions." The CERCLA wastes are identified in the report using source code G49, Other remediation.

19. Certification I certify 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 fines and imprisonment for knowing violations. **Note: For the RCRA Hazardous Waste Part A permit Application, all owners and operators must sign (see 40 CFR 270.10(b) and 270.11).**

Signature of legal owner, operator or authorized representative	Date (mm/dd/yyyy)
	2/28/22
Printed Name (First, Middle Initial Last)	Title
Myrna Espinosa Redfield	Program Manager
Email	
myrna.redfield@pad.pppo.gov	

Signature of legal owner, operator or authorized representative	Date (mm/dd/yyyy)
Printed Name (First, Middle Initial Last)	Title
Email	

ENCLOSURE 5

**2021 ANNUAL HAZARDOUS WASTE REPORT, ASSESSMENT RETURN,
AND CLAIM FOR EXCLUSION FOR THE
PADUCAH GASEOUS DIFFUSION PLANT,
MCCRACKEN COUNTY, KENTUCKY,
PERMIT NUMBER KY8-890-008-982**

EPA FORM 8700-13 A/B (GM) – WASTE GENERATION AND MANAGEMENT

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United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	VERY DILUTE AQUEOUS WASTE MORE THAN 99% WATER FROM LEACHATE COLLECTION (FROM LANDFILL OPERATIONS OR OTHER LAND UNITS)		
B. EPA Hazardous Waste Code(s)	F001 F002 F039 U228		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G26	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W101	F. Waste Minimization Code N	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 11520	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	34440	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D002 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W309	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 9054	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	9054	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D006 D008 D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W219	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 2913	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	2913
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

ANTIFREEZE / GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D006 D008 D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W219	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 2621	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	2766
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

ANTIFREEZE / GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D001 D018		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W206	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 2748	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	2748
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM



1. Waste Characteristics

A. Waste Description	WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D005 D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W206	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 1514	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	2708	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D018 D022 D039		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W206	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 2612	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	2612
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D018 D039		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W206	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 1575	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	2103	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W206	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 449	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	1743
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D018 D022 D039		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W206	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 903	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	903
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W206	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 819	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	819	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D018		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W206	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 576	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	576
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	SPENT CONCENTRATED ACID (5% OR MORE) FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D002 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W103	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	538
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D002		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W001	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	462	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D006 D008 D018		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W206	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 384	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	440
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D006 D008 D018		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W206	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 434	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	434
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D006 D008 D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W219	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 385	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste


<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	385	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

ANTIFREEZE / GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency HAZARDOUS WASTE REPORT <u>2021</u> (reporting cycle) WASTE GENERATION AND MANAGEMENT (GM) FORM	
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1. Waste Characteristics

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001 D035		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W001	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 338	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	338	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25)	NA	Country Code (G62) NA
E. Form Code W001	F. Waste Minimization Code	X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
H. Quantity 207	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	207	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D006 D008 D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W219	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 200	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	200
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

ANTIFREEZE / GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W001	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 197	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	197	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D018		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W206	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 180	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	180
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001 D011 D035		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W001	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	170	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D002		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W001	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 60	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	135	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D006 D008 D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W219	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 116	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	116
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

ANTIFREEZE / GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D002		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25)	NA	Country Code (G62) NA
E. Form Code W001	F. Waste Minimization Code	X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
H. Quantity 103	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	103
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D002		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W001	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	103	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001 D035		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W001	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	96	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001 D005		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W001	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste


<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	92	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency HAZARDOUS WASTE REPORT <u>2021</u> (reporting cycle) WASTE GENERATION AND MANAGEMENT (GM) FORM	
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1. Waste Characteristics

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W001	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 89	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	89	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W001	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 60	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	60	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D002 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W309	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 34	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	34
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	SPENT CONCENTRATED ACID (5% OR MORE) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D002 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W103	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 34	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste


<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	34
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency HAZARDOUS WASTE REPORT <u>2021</u> (reporting cycle) WASTE GENERATION AND MANAGEMENT (GM) FORM	
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1. Waste Characteristics

A. Waste Description	SPENT CONCENTRATED ACID (5% OR MORE) FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D002 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code <small>G16</small>	Management Method (G25) <small>NA</small>	Country Code (G62) <small>NA</small>	
E. Form Code <small>W103</small>	F. Waste Minimization Code <small>A</small>	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity <small>0</small>	UOM <small>1</small>	Density <small>NA</small>	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	30	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM



1. Waste Characteristics

A. Waste Description	OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D006 D008 D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W219	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 28	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	28
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

ANTIFREEZE / GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001 D003		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W801	F. Waste Minimization Code X	G. Radioactive Mixed <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input checked="" type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 Clean Harbors Deer Park, LLC			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
TXD055141378	H040	21	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001 D018		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W001	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	20	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001 D035		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W001	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 14	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	14	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D002		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W001	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 13	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	13	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D002 D004 D006		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W001	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 13	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions, Inc.			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
TND982157570	H110	13	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D002		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W001	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	13	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D002		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W001	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	12	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W001	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	11	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ACIDIC AQUEOUS WASTES LESS THAN 5% ACID (DILUTED BUT PH <2) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D002		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W105	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 29	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D002 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W309	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 3784	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D002 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W309	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 3365	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D002		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W001	F. Waste Minimization Code X	G. Radioactive Mixed <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
H. Quantity 784	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input checked="" type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM



1. Waste Characteristics

A. Waste Description	OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D006 D008 D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W219	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 2274	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

ANTIFREEZE / GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D018 D021 D027 D032		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W219	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 574	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

PCB SIGHT GLASS LUBE OIL / GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D006 D008 D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W219	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 56	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

ANTIFREEZE / GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D001		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25)	NA	Country Code (G62) NA
E. Form Code W219	F. Waste Minimization Code	X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
H. Quantity 27	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

SOLUTIONS FOR DI CONDUCTIVITY ANALYSIS / GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	SPENT CONCENTRATED ACID (5% OR MORE) FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D002 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W103	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 938	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	VERY DILUTE AQUEOUS WASTE MORE THAN 99% WATER FROM LEACHATE COLLECTION (FROM LANDFILL OPERATIONS OR OTHER LAND UNITS)		
B. EPA Hazardous Waste Code(s)	F001 F002 F039 U228		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G26	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W101	F. Waste Minimization Code N	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 16680	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM



1. Waste Characteristics

A. Waste Description	VERY DILUTE AQUEOUS WASTE MORE THAN 99% WATER FROM LEACHATE COLLECTION (FROM LANDFILL OPERATIONS OR OTHER LAND UNITS)		
B. EPA Hazardous Waste Code(s)	F039		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G26	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W101	F. Waste Minimization Code N	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 7506	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM



1. Waste Characteristics

A. Waste Description	WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D001 D018		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W206	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 911	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D006 D008 D018		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W206	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 732	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D018 D039		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W206	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 450	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W206	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 56	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W206	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 18	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D005 D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W206	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 9	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D007		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 33200	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	33200	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste


<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	28420	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency HAZARDOUS WASTE REPORT <u>2021</u> (reporting cycle) WASTE GENERATION AND MANAGEMENT (GM) FORM	
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1. Waste Characteristics

A. Waste Description	METAL SCALE, FILINGS AND SCRAP (INCLUDING METAL DRUMS) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D002 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W307	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 20340	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste


<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	20340
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY
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United States Environmental Protection Agency HAZARDOUS WASTE REPORT <u>2021</u> (reporting cycle) WASTE GENERATION AND MANAGEMENT (GM) FORM	
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1. Waste Characteristics

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	19740
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY
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United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	18490
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OTHER REMEDIATION		
B. EPA Hazardous Waste Code(s)	D019 D040 F001 F002 U228		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G49	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W310	F. Waste Minimization Code A	G. Radioactive Mixed <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
H. Quantity 17347	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 Evoqua Water Technologies, LLC		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
PAD987270725	H039	17347
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

CERCLA WASTE - REFERENCE EPA FORM 8700-13 A/B COMMENTS BLOCK 18

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W801	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 16495	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 Diversified Scientific Services, Inc. (DSSI)		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
TND982109142	H129	16495
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste


<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	13040	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency HAZARDOUS WASTE REPORT <u>2021</u> (reporting cycle) WASTE GENERATION AND MANAGEMENT (GM) FORM	
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1. Waste Characteristics

A. Waste Description	CONTAMINATED SOIL FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	F001 F002 U228		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W301	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 9336	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	9336
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY
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United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 8884	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	8884
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D007 D008 D010 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 8316	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	8316
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 5979	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	5979
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D005 D006 D007 D008 D009 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25)	NA	Country Code (G62) NA
E. Form Code W320	F. Waste Minimization Code	A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
H. Quantity 5884	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	5884
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D009 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	4460
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D006 D008 D010 D018		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W310	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 4003	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	4003
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D006 D008 D010 D018		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W310	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 3836	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste


<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	3836	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency HAZARDOUS WASTE REPORT <u>2021</u> (reporting cycle) WASTE GENERATION AND MANAGEMENT (GM) FORM	
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1. Waste Characteristics

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D005 D006 D007 D008 D009 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25)	NA	Country Code (G62) NA
E. Form Code W320	F. Waste Minimization Code	A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
H. Quantity 2798	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	3600
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY
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United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D009 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 2209	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	3440
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 3037	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	3037
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 2740	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	2740
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D005 D006 D007 D008 D009 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 2739	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	2739
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W309	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	2624
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 2560	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	2560
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D009 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 2374	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	2374
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D009 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 2235	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	2235
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM



1. Waste Characteristics

A. Waste Description	FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D006 D008 D018		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W310	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	1884
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	METAL SCALE, FILINGS AND SCRAP (INCLUDING METAL DRUMS) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W307	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	1862
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	METAL SCALE, FILINGS AND SCRAP (INCLUDING METAL DRUMS) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25)	NA	Country Code (G62) NA
E. Form Code W307	F. Waste Minimization Code	X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
H. Quantity 1742	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	1742
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 458	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	1700	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	OTHER INORGANIC SOLIDS FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W319	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 415	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	1592
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

ARSENIC AND LEAD CONTAMINATED PPE / GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D005 D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W310	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 486	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	1438	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D009 D010 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 1430	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	1430
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W309	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	1224
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 1171	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	1171	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D009 D010 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 1122	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	1122	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D009		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	1118
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D009 D010 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 1027	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste


<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	1027
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency HAZARDOUS WASTE REPORT <u>2021</u> (reporting cycle) WASTE GENERATION AND MANAGEMENT (GM) FORM	
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1. Waste Characteristics

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D009		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 527	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	973
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D007 D008 D009 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 960	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 Diversified Scientific Services, Inc. (DSSI)			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
TND982109142	H110	960	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W310	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 191	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	905
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D007 D008 D009 D010 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 851	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	851
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	696
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W801	F. Waste Minimization Code A	G. Radioactive Mixed <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
H. Quantity 600	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input checked="" type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 Clean Harbors LaPorte, LLC			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
TXD982290140	H129	600	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D009		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 577	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	577	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G06	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W406	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 531	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	531
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 511	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	511	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D006 D008 D018		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W310	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 439	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	495	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D009 D010 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 483	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	483	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D006 D008 D018 D022 D039		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W310	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 334	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	480	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D009		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	448
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D022 D039		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W310	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 413	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	413	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W309	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 355	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	411	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G06	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W406	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 410	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	410	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D009 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 407	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	407	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W309	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 398	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	398
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G06	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W406	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 342	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	342	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D009 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 330	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	330	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D006 D008 D018 D022 D039		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W310	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 198	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	328	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 305	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	305
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G06	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W406	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	290	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G06	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W406	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 185	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	241	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	236	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	230	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001 D003 D039 D040		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W801	F. Waste Minimization Code A	G. Radioactive Mixed <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input checked="" type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 Clean Harbors Deer Park, LLC			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
TXD055141378	H040	206	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D009 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 202	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste


<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	202	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency HAZARDOUS WASTE REPORT <u>2021</u> (reporting cycle) WASTE GENERATION AND MANAGEMENT (GM) FORM	
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1. Waste Characteristics

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 117	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	173	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25)	NA	Country Code (G62) NA
E. Form Code W406	F. Waste Minimization Code	X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
H. Quantity 163	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 Diversified Scientific Services, Inc. (DSSI)		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
TND982109142	H110	163
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D009 D010 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 163	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	163	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 161	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	161
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D009 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 159	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	159	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D006 D008 D018		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W310	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	156
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

NA

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G06	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W406	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	152	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM



1. Waste Characteristics

A. Waste Description	FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D006 D008 D018		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W310	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 148	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	148	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D009 D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 100	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	144	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G06	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W406	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	140
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G06	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W406	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 134	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	134	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D006 D008 D018 D022 D039		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W310	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 129	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	129	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 127	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	127
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W309	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 62	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	118
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G06	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W406	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	118	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D018		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W310	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 115	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	115
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G06	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W406	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 114	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	114	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001 D003 D005 D039		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W801	F. Waste Minimization Code A	G. Radioactive Mixed <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
H. Quantity 56	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input checked="" type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 Clean Harbors Deer Park, LLC			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
TXD055141378	H040	112	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G06	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W406	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 109	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	109
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G06	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W406	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 109	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	109	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001 D003		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W801	F. Waste Minimization Code A	G. Radioactive Mixed <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
H. Quantity 105	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input checked="" type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 Clean Harbors Deer Park, LLC			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
TXD055141378	H040	105	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 47	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	103
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G06	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W406	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 102	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	102
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D009 D010 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 93	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	93	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D006		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W309	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 87	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	87	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 20	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	86	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W310	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 86	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	86
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	84	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G06	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W406	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 78	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	78
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001 D003 D005		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W801	F. Waste Minimization Code A	G. Radioactive Mixed <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
H. Quantity 64	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input checked="" type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 Clean Harbors Deer Park, LLC			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
TXD055141378	H040	64	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 63	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	63
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25)	NA	Country Code (G62) NA
E. Form Code W406	F. Waste Minimization Code	X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
H. Quantity 57	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	57
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D009		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 38	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	38
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W801	F. Waste Minimization Code A	G. Radioactive Mixed <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
H. Quantity 32	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input checked="" type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 Clean Harbors LaPorte, LLC			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
TXD982290140	H141	32	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	32	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25)	NA	Country Code (G62) NA
E. Form Code W001	F. Waste Minimization Code	X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
H. Quantity 29	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 Diversified Scientific Services, Inc. (DSSI)			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
TND982109142	H110	29	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 20	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	20	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D009		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 0	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	16
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D009		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25)	NA	Country Code (G62) NA
E. Form Code W320	F. Waste Minimization Code	A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
H. Quantity 14	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	14
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM



1. Waste Characteristics

A. Waste Description	COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001 D003		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W801	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 13	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1 EnergySolutions Clive Facility			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
UTD982598898	H132	13	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 12	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	12
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D005 D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W310	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 11	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1 EnergySolutions Clive Facility		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
UTD982598898	H132	11
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W309	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 2679	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D003		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W309	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 30	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001 D003		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W801	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 401	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001 D003 D035 D039		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W801	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 120	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001 D003 D039		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W801	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 114	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001 D003 D035		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W801	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 101	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 1450	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 112	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W002	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 9	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25)	NA	Country Code (G62) NA
E. Form Code W406	F. Waste Minimization Code	X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
H. Quantity 56	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.	
Site 1		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 2		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
Site 3		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING		
B. EPA Hazardous Waste Code(s)	D006 D007 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G06	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W406	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 83	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G06	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W406	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 54	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D009		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 4022	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D009 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 3892	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008 D009 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 2389	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D005 D006 D007 D008 D009 D010 D011 F027		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 986	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D009		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 596	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D005 D006 D007 D008 D009 D010 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 270	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D001 D003 D006 D008 D009 D011		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 165	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D003 D006 D008 D009		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W320	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 56	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D006 D008 D018		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W310	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 168	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT		
B. EPA Hazardous Waste Code(s)	D006 D008 D018 D022 D039		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G16	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W310	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 141	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D005 D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W310	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 179	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D006 D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W310	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 56	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	METAL SCALE, FILINGS AND SCRAP (INCLUDING METAL DRUMS) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W307	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 2290	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
 HAZARDOUS WASTE REPORT 2021 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	METAL SCALE, FILINGS AND SCRAP (INCLUDING METAL DRUMS) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D008		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W307	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 1576	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2021 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	OTHER INORGANIC SOLIDS FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G19	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W319	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 13	UOM 1	Density NA	<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

2. On-site Generation and Management of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on-site? If yes, continue to On-site Process System 1.	
Process System 1	Management Method Code	Quantity
Process System 2	Management Method Code	Quantity

3. Off-site Shipment of Hazardous Waste

<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	A. Was any of this waste that was generated at this facility shipped off-site for treatment, disposal, or recycling? If yes, continue to Site 1.		
Site 1			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 2			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
Site 3			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	

4. Comments

ARSENIC AND LEAD CONTAMINATED PPE / GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

ENCLOSURE 6

**2021 ANNUAL HAZARDOUS WASTE REPORT, ASSESSMENT RETURN,
AND CLAIM FOR EXCLUSION FOR THE
PADUCAH GASEOUS DIFFUSION PLANT,
MCCRACKEN COUNTY, KENTUCKY,
PERMIT NUMBER KY8-890-008-982**

EPA FORM 8700-13 A/B (OI) – SUMMARY OF WASTE SHIPPED OFF SITE

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United States Environmental Protection Agency
HAZARDOUS WASTE REPORT
OFF-SITE IDENTIFICATION (OI) FORM



1. Site 1

A. EPA ID Number of Off-site Installation or Transporter			TXD055141378
B. Name of Off-site Installation or Transporter			Clean Harbors Deer Park, LLC
C. Handler Type (mark all that apply)			<input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> Receiving Facility
D. Address of Off-site Installation			
Street Address 2027 Independence Parkway South			
City, Town, or Village LaPorte			
State	Texas	Zip Code	77571 Country USA

2. Site 2

A. EPA ID Number of Off-site Installation or Transporter			TXD982290140
B. Name of Off-site Installation or Transporter			Clean Harbors LaPorte, LLC
C. Handler Type (mark all that apply)			<input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> Receiving Facility
D. Address of Off-site Installation			
Street Address 500 Independence Parkway South			
City, Town, or Village LaPorte			
State	Texas	Zip Code	77571 Country USA

3. Site 3

A. EPA ID Number of Off-site Installation or Transporter			TND982109142
B. Name of Off-site Installation or Transporter			Diversified Scientific Services, Inc. (DSSI)
C. Handler Type (mark all that apply)			<input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> Receiving Facility
D. Address of Off-site Installation			
Street Address 657 Gallaher Road			
City, Town, or Village Kingston			
State	Tennessee	Zip Code	37760 Country USA

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT
OFF-SITE IDENTIFICATION (OI) FORM



1. Site 1

A. EPA ID Number of Off-site Installation or Transporter			UTD982598898
B. Name of Off-site Installation or Transporter			EnergySolutions Clive Facility
C. Handler Type (mark all that apply)			<input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> Receiving Facility
D. Address of Off-site Installation			
Street Address			U.S. Interstate 80, Exit 49
City, Town, or Village			Clive
State	Zip Code	Country	UT 84029 USA

2. Site 2

A. EPA ID Number of Off-site Installation or Transporter			TND982157570
B. Name of Off-site Installation or Transporter			EnergySolutions, Inc.
C. Handler Type (mark all that apply)			<input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> Receiving Facility
D. Address of Off-site Installation			
Street Address			1560 Bear Creek Road
City, Town, or Village			Oak Ridge
State	Zip Code	Country	Tennessee 37830 USA

3. Site 3

A. EPA ID Number of Off-site Installation or Transporter			PAD987270725
B. Name of Off-site Installation or Transporter			Evoqua Water Technologies, LLC
C. Handler Type (mark all that apply)			<input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> Receiving Facility
D. Address of Off-site Installation			
Street Address			118 Park Road
City, Town, or Village			Darlington
State	Zip Code	Country	Pennsylvania 16115 USA

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT
OFF-SITE IDENTIFICATION (OI) FORM



1. Site 1

A. EPA ID Number of Off-site Installation or Transporter			COR000005389
B. Name of Off-site Installation or Transporter			CAST Transportation
C. Handler Type (mark all that apply)			<input type="checkbox"/> Generator <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> Receiving Facility
D. Address of Off-site Installation			
Street Address NA			
City, Town, or Village			
State	Zip Code	Country	

2. Site 2

A. EPA ID Number of Off-site Installation or Transporter			MAD039322250
B. Name of Off-site Installation or Transporter			Clean Harbors Environmental Services, Inc.
C. Handler Type (mark all that apply)			<input type="checkbox"/> Generator <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> Receiving Facility
D. Address of Off-site Installation			
Street Address NA			
City, Town, or Village			
State	Zip Code	Country	

3. Site 3

A. EPA ID Number of Off-site Installation or Transporter			TNR000034686
B. Name of Off-site Installation or Transporter			Hittman Transport Services Inc.
C. Handler Type (mark all that apply)			<input type="checkbox"/> Generator <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> Receiving Facility
D. Address of Off-site Installation			
Street Address NA			
City, Town, or Village			
State	Zip Code	Country	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT
OFF-SITE IDENTIFICATION (OI) FORM



1. Site 1

A. EPA ID Number of Off-site Installation or Transporter			TNR000034678
B. Name of Off-site Installation or Transporter			Interstate Ventures, Inc.
C. Handler Type (mark all that apply)			<input type="checkbox"/> Generator <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> Receiving Facility
D. Address of Off-site Installation			
Street Address NA			
City, Town, or Village			
State	Zip Code	Country	

2. Site 2

A. EPA ID Number of Off-site Installation or Transporter			WAR000012005
B. Name of Off-site Installation or Transporter			RSB Logistic, Inc.
C. Handler Type (mark all that apply)			<input type="checkbox"/> Generator <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> Receiving Facility
D. Address of Off-site Installation			
Street Address NA			
City, Town, or Village			
State	Zip Code	Country	

3. Site 3

A. EPA ID Number of Off-site Installation or Transporter			TNR000011247
B. Name of Off-site Installation or Transporter			Specialty Transport, Inc.
C. Handler Type (mark all that apply)			<input type="checkbox"/> Generator <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> Receiving Facility
D. Address of Off-site Installation			
Street Address NA			
City, Town, or Village			
State	Zip Code	Country	

4. Comments

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT
OFF-SITE IDENTIFICATION (OI) FORM



1. Site 1

A. EPA ID Number of Off-site Installation or Transporter			MOD095038998
B. Name of Off-site Installation or Transporter			Tri-State Motor Transit Co
C. Handler Type (mark all that apply)			<input type="checkbox"/> Generator <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> Receiving Facility
D. Address of Off-site Installation			
Street Address NA			
City, Town, or Village			
State	Zip Code	Country	

2. Site 2

A. EPA ID Number of Off-site Installation or Transporter			NA
B. Name of Off-site Installation or Transporter			
C. Handler Type (mark all that apply)			<input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input type="checkbox"/> Receiving Facility
D. Address of Off-site Installation			
Street Address NA			
City, Town, or Village			
State	Zip Code	Country	

3. Site 3

A. EPA ID Number of Off-site Installation or Transporter			NA
B. Name of Off-site Installation or Transporter			
C. Handler Type (mark all that apply)			<input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input type="checkbox"/> Receiving Facility
D. Address of Off-site Installation			
Street Address NA			
City, Town, or Village			
State	Zip Code	Country	

4. Comments

NA

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ENCLOSURE 7

**2021 ANNUAL HAZARDOUS WASTE REPORT, ASSESSMENT RETURN,
AND CLAIM FOR EXCLUSION FOR THE
PADUCAH GASEOUS DIFFUSION PLANT,
MCCRACKEN COUNTY, KENTUCKY,
PERMIT NUMBER KY8-890-008-982**

KENTUCKY ADDENDUM FORM 1 – IDENTIFICATION AND CERTIFICATION

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Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 1: Identification and Certification

FOR OFFICIAL USE ONLY.
DO NOT WRITE IN THIS SPACE.

I. Site ID Numbers	A. EPA ID Number: <u>KY8-890-008-982</u>	B. AGENCY INTEREST (AI) Number: <u>3059</u>
---------------------------	--	---

II. Reporting Year	A. Reporting Year: January 1 through December 31, 2021
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III. Legal Landowner of the Real Property	Name of Landowner: U.S. Department of Energy		
	Date Became Owner: (mm/dd/yyyy) 10/18/1950	Landowner Type: <input type="checkbox"/> Private <input checked="" type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Municipal <input type="checkbox"/> County <input type="checkbox"/> Other	
	Phone Number: (270) 441-6820	Phone Number Extension: NA	
	Street Address or P. O. Box: 5501 Hobbs Road		
	City: Kevil	State: Kentucky	Country: USA

IV. Type of Regulated Waste Activity

A. Hazardous Waste Activities	B. Universal Waste Activities	C. Used Oil Activities																					
<p>1. Generator of Hazardous Waste</p> <p>a. Is this a one-time-only or episodic hazardous waste activity report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>b. Did you have a status change during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>2. Fuel Burner of Hazardous Waste for Energy Recovery <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If "Yes", mark all that apply)</i></p> <p><input type="checkbox"/> a. Industrial Boiler <input type="checkbox"/> b. Industrial Furnace</p>	<p>1. Large Quantity Universal Waste Handler (over 11,000 pounds on-site storage)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, mark all that apply</i></p> <table style="width: 100%; text-align: center;"> <tr> <td></td> <td>Generate</td> <td>Accumulate</td> </tr> <tr> <td>a. Batteries</td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>b. Pesticides</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>c. Mercury Containing Equipment</td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>d. Lamps <i>(includes fluorescent lamps)</i></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>e. Other: <i>(specify)</i> _____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>f. Other: <i>(specify)</i> _____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>		Generate	Accumulate	a. Batteries	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>	c. Mercury Containing Equipment	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	d. Lamps <i>(includes fluorescent lamps)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	e. Other: <i>(specify)</i> _____	<input type="checkbox"/>	<input type="checkbox"/>	f. Other: <i>(specify)</i> _____	<input type="checkbox"/>	<input type="checkbox"/>	<p>1. Off-Specification Used Oil Burner <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><i>If "Yes," mark all that apply</i></p> <p><input type="checkbox"/> a. Utility Boiler <input type="checkbox"/> b. Industrial Boiler <input type="checkbox"/> c. Industrial Furnace</p>
	Generate	Accumulate																					
a. Batteries	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>																					
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>																					
c. Mercury Containing Equipment	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>																					
d. Lamps <i>(includes fluorescent lamps)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>																					
e. Other: <i>(specify)</i> _____	<input type="checkbox"/>	<input type="checkbox"/>																					
f. Other: <i>(specify)</i> _____	<input type="checkbox"/>	<input type="checkbox"/>																					

V. Comments (Additional Information that will clarify any item in this report.)

This report includes those Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) wastes subject to reporting pursuant to EPA guidance dated December 14, 2011, "Resource Conservation and Recovery Act (RCRA) Biennial Report Requirements for Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) Response Actions." The CERCLA wastes are identified in the report using source code G49, Other remediation.

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ENCLOSURE 8

**2021 ANNUAL HAZARDOUS WASTE REPORT, ASSESSMENT RETURN,
AND CLAIM FOR EXCLUSION FOR THE
PADUCAH GASEOUS DIFFUSION PLANT,
MCCRACKEN COUNTY, KENTUCKY,
PERMIT NUMBER KY8-890-008-982**

KENTUCKY ADDENDUM FORM 2 – WASTE GENERATION AND MANAGEMENT

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Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) VERY DILUTE AQUEOUS WASTE MORE THAN 99% WATER FROM LEACHATE COLLECTION (FROM LANDFILL OPERATIONS OR OTHER LAND UNITS)

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (F039, TRICHLOROETHYLENE), PU-239, TH-230, LIQUID/OXIDE, 17 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year <u>11520</u> pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>34440</u> pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2794, WASTE BATTERIES, WET, FILLED WITH ACID, ELECTRIC STORAGE, 8(7), (D002, D008), "LIMITED QUANTITY RADIOACTIVE MATERIAL"

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 9054 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)* No – **Skip to Waste Shipped Off-site**

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 9054 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, AM-241, PU-238, PU-239, K-40, TH-230, (D004, D006), LIQUID/OXIDE, 88.8 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
_____ 2913 _____ pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 2913 _____ pounds
	EPA ID Number of receiving facility: <u>UTD982598898</u>		
Site 2	Name of receiving facility: _____	Off-Site Management Method Code	Total Quantity Shipped in 2021
	EPA ID Number of receiving facility: _____	H _____	_____ pounds

Comments: ANTIFREEZE / GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (D004, D006), AM-241, PU-238, PU-239, K-40, TC-99, TH-230, LIQUID/OXIDE, 85 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
2621 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>2766</u> pounds
Site 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: ANTIFREEZE / GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT

(1) (General) _____

RQ, UN1993, WASTE, FLAMMABLE LIQUIDS, N.O.S. (DIESEL FUEL, GASOLINE), 3, (D001, D018), PG III

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 2748 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 2748 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

RQ, NA3082, HAZARDOUS WASTE, LIQUID, N.O.S. (BARIUM, SELENIUM), 9, PG III, (D010)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 1514 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)* No – **Skip to Waste Shipped Off-site**

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 2708 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

RQ, NA3082, HAZARDOUS WASTE, LIQUID, N.O.S. (BENZENE, CHLOROFORM), 9, PG III, (D006, D008)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 2612 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)* No – *Skip to Waste Shipped Off-site*

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>2612</u> pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT

(1) (General) _____

RQ, NA3082, HAZARDOUS WASTE, LIQUID, N.O.S. (BENZENE, TETRACHLOROETHYLENE), 9, (D018, D039), PG III

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 1575 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 2103 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

RQ, NA3082, HAZARDOUS WASTE, LIQUID, N.O.S. (SELENIUM), 9, PG III, (D010)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 449 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)* No – *Skip to Waste Shipped Off-site*

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 1743 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

RQ, NA3082, HAZARDOUS WASTE, LIQUID, N.O.S. (CADMIUM, BENZENE), 9, PG III, (D006, D008)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 903 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)* No – *Skip to Waste Shipped Off-site*

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>903</u> pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

RQ, NA3082, HAZARDOUS WASTE, LIQUID, N.O.S. (LEAD, SELENIUM), 9, PG III, (D006, D008)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 819 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)* No – *Skip to Waste Shipped Off-site*

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>819</u> pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: <u>KY8- 890- 008- 982</u>	B. AGENCY INTEREST (AI) Number: <u>3059</u>
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Waste Description (See instructions.) Check one: **Liquid** **Solid**

WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

RQ, NA3082, HAZARDOUS WASTE, LIQUID, N.O.S. (LEAD, BENZENE), 9, PG III, (D008, D018)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 576 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)* No – *Skip to Waste Shipped Off-site*

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 576 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

SPENT CONCENTRATED ACID (5% OR MORE) FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT

(1) (General) _____

RQ, UN1760, WASTE, CORROSIVE LIQUIDS, N.O.S. (CONTAINS BATTERY ACID), 8, PG III, (D002, D008)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 0 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)* No – **Skip to Waste Shipped Off-site**

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 538 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR
(1) (General) UNUSED CHEMICALS OR PRODUCTS

(2) (Item 9b of manifest) RQ, UN1760, WASTE, CORROSIVE LIQUIDS, N.O.S. (CONTAINS SODIUM HYDROXIDE), 8, PG III, (D002)

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
0 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>462</u> pounds
Site 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT

(1) (General) _____

RQ, NA3082, HAZARDOUS WASTE, LIQUID, N.O.S. (CADMIUM, LEAD), 9, PG III, (D006, D008)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 384 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 440 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT

(1) (General) _____

RQ, NA3082, HAZARDOUS WASTE, LIQUID, N.O.S. (LEAD, BENZENE) 9, (D006, D008), PG III

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 434 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 434 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (D004, D006), CO-60, TC-99, TH-230, U-234, LIQUID/OXIDE, 10 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 385 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)* No – **Skip to Waste Shipped Off-site**

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 385 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: ANTIFREEZE / GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR
(1) (General) UNUSED CHEMICALS OR PRODUCTS

RQ, UN1993, WASTE, FLAMMABLE LIQUIDS, N.O.S. (MINERAL SPIRITS, DENATURED ALCOHOL), 3, PG II, (D001)
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 338 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 338 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR
(1) (General) UNUSED CHEMICALS OR PRODUCTS

RQ, UN1993, WASTE, FLAMMABLE LIQUIDS, N.O.S. (ACETONE), 3, PG II, (D001)
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
207 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>207</u> pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (D004, D006), AM-241, PU-238, PU-239, K-40, TC-99, TH-230, LIQUID/OXIDE, 5 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 200 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>200</u> pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: ANTIFREEZE / GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR
(1) (General) UNUSED CHEMICALS OR PRODUCTS

RQ, UN1993, WASTE, FLAMMABLE LIQUIDS, N.O.S. (ACETONE, HEXANE), 3, PG II, (D001)
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
197 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>197</u> pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

RQ, NA3082, HAZARDOUS WASTE, LIQUID, N.O.S. (BENZENE), 9, PG III, (D018)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 180 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)* No – **Skip to Waste Shipped Off-site**

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 180 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR
(1) (General) UNUSED CHEMICALS OR PRODUCTS

RQ, UN1993, WASTE, FLAMMABLE LIQUIDS, N.O.S. (ACETONE, METHYL ETHYL KETONE), 3, PG II, (D001, D011)
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 0 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 170 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
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FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR
(1) (General) UNUSED CHEMICALS OR PRODUCTS

UN3066, WASTE, PAINT RELATED MATERIAL, 8, PG II
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 60 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)* No – **Skip to Waste Shipped Off-site**

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 135 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (D004, D006), AM-241, PU-238, PU-239, K-40, TH-230, LIQUID/OXIDE, 2 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 116 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 116 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: ANTIFREEZE / GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

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FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR
(1) (General) UNUSED CHEMICALS OR PRODUCTS

UN1760, WASTE, CORROSIVE LIQUIDS, N.O.S. (CALCIUM HYDROXIDE, MAGNESIUM HYDROXIDE), 8, PG III
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
103 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>103</u> pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

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FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR
(1) (General) UNUSED CHEMICALS OR PRODUCTS

UN1823, WASTE, SODIUM HYDROXIDE, SOLID MIXTURE, 8, PG II
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
_____ 0 _____ pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 103 _____ pounds
	EPA ID Number of receiving facility: <u>UTD982598898</u>		
S i t e 2	Name of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	EPA ID Number of receiving facility: _____		

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS

(2) (Item 9b of manifest) UN1263, WASTE, PAINT RELATED MATERIAL INCLUDING PAINT THINNING, DRYING, REMOVING, OR REDUCING COMPOUND, 3, PG III

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
0 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility:	Off-Site Management Method Code	Total Quantity Shipped in 2021
	EnergySolutions Clive Facility EPA ID Number of receiving facility: UTD982598898	H <u>132</u>	<u>96</u> pounds
S i t e 2	Name of receiving facility:	Off-Site Management Method Code	Total Quantity Shipped in 2021
	_____ EPA ID Number of receiving facility: _____	H _____	_____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
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(502) 564-6716

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FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS

(1) (General) _____

UN1993, WASTE, FLAMMABLE LIQUIDS, N.O.S. (ACETONE, TOLUENE), 3, PG II

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 0 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)* No – **Skip to Waste Shipped Off-site**

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 92 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

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FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR
(1) (General) UNUSED CHEMICALS OR PRODUCTS

UN1993, WASTE, FLAMMABLE LIQUIDS, N.O.S. (ACETONE, HEXANE), 3, PG II
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
89 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>89</u> pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
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Hazardous Waste Branch
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FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR
(1) (General) UNUSED CHEMICALS OR PRODUCTS

UN1993, WASTE, FLAMMABLE LIQUIDS, N.O.S. (METHYL ETHYL KETONE), 3, PG II
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 60 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 60 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

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FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT

(1) (General) _____

RQ, UN2794, WASTE BATTERIES, WET, FILLED WITH ACID, ELECTRIC STORAGE, 8, (D008)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 34 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 34 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
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Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

SPENT CONCENTRATED ACID (5% OR MORE) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

RQ, UN1760, WASTE, CORROSIVE LIQUIDS, N.O.S. (CONTAINS BATTERY ACID), 8, PG III, (D008)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 34 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)* No – **Skip to Waste Shipped Off-site**

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 34 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

SPENT CONCENTRATED ACID (5% OR MORE) FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT

(1) (General) _____

UN1760, WASTE, CORROSIVE LIQUIDS, N.O.S. (CONTAINS BATTERY ACID), 8, PG III, (D002, D008)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 0 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 30 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, AM-241, PU-238, PU-239, K-40, TH-230, (D004, D006), LIQUID/OXIDE, 0.02 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 28 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 28 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: ANTIFREEZE / GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS
(1) (General) _____

UN1075, WASTE PETROLEUM GASES, LIQUEFIED, 2.1
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Quantity Generated in Report Year _____ 0 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ Clean Harbors Deer Park, LLC EPA ID Number of receiving facility: _____ TXD055141378	Off-Site Management Method Code H <u>040</u>	Total Quantity Shipped in 2021 _____ 21 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR
(1) (General) UNUSED CHEMICALS OR PRODUCTS

RQ, UN1993, WASTE, FLAMMABLE LIQUIDS, N.O.S. (GASOLINE, KEROSENE), 3, PG III, (D018)
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 0 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 20 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR
(1) (General) UNUSED CHEMICALS OR PRODUCTS

UN1993, WASTE, FLAMMABLE LIQUIDS, N.O.S. (METHYL ETHYL KETONE), 3, PG III
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 14 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 14 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR

(1) (General) UNUSED CHEMICALS OR PRODUCTS

UN1760, WASTE, CORROSIVE LIQUIDS, N.O.S. (SULFURIC ACID), 8, PG III

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?

Yes

No

Quantity Generated in Report Year

13

pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	<p>Name of receiving facility: <u>EnergySolutions Clive Facility</u></p> <p>EPA ID Number of receiving facility: <u>UTD982598898</u></p>	<p>Off-Site Management Method Code H <u>132</u></p>	<p>Total Quantity Shipped in 2021 <u>13</u> pounds</p>
S i t e 2	<p>Name of receiving facility: _____</p> <p>EPA ID Number of receiving facility: _____</p>	<p>Off-Site Management Method Code H _____</p>	<p>Total Quantity Shipped in 2021 _____ pounds</p>

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS

(2) (Item 9b of manifest) UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7(8), U-234, U-235, U-238, LIQUID/OXIDE, 0.0598 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?

- Yes
 No

Quantity Generated in Report Year

13

pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment, recycling, disposal, or by discharge to a sewer or publicly owned treatment works (POTW)? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	<p>Name of receiving facility: <u>EnergySolutions, Inc.</u> EPA ID Number of receiving facility: <u>TND982157570</u></p>	<p>Off-Site Management Method Code H <u>110</u></p>	<p>Total Quantity Shipped in 2021 <u>13</u> pounds</p>
S i t e 2	<p>Name of receiving facility: _____ EPA ID Number of receiving facility: _____</p>	<p>Off-Site Management Method Code H _____</p>	<p>Total Quantity Shipped in 2021 _____ pounds</p>

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS

(1) (General) UN1760, WASTE, CORROSIVE LIQUIDS, N.O.S. (HYDROCHLORIC ACID SOLUTION), 8, PG III

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?

Yes
 No

Quantity Generated in Report Year

0 pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>13</u> pounds
Site 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR
(1) (General) UNUSED CHEMICALS OR PRODUCTS

UN3264, WASTE, CORROSIVE LIQUID, ACIDIC, INORGANIC, N.O.S. (HYDROCHLORIC ACID), 8, PG II
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
_____ 0 _____ pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 12 _____ pounds
Site 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR
(1) (General) UNUSED CHEMICALS OR PRODUCTS

UN1992, WASTE, FLAMMABLE LIQUIDS, TOXIC, N.O.S. (TURPENTINE, OIL, COBALT OXIDE), 3, (6.1), PG III
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 0 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 11 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ACIDIC AQUEOUS WASTES LESS THAN 5% ACID (DILUTED BUT PH <2) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 29 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 3784 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 3365 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)*

No – *Skip to Waste Shipped Off-site*

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.*

No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS

(1) (General) NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?

- Yes
 No

Quantity Generated in Report Year

784 pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 2274 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: ANTIFREEZE / GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 574 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: PCB SIGHT GLASS LUBE OIL / GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 56 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: ANTIFREEZE / GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 27 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: SOLUTIONS FOR DI CONDUCTIVITY ANALYSIS / GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

SPENT CONCENTRATED ACID (5% OR MORE) FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 938 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)*

No – **Skip to Waste Shipped Off-site**

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.*

No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) VERY DILUTE AQUEOUS WASTE MORE THAN 99% WATER FROM LEACHATE COLLECTION (FROM LANDFILL OPERATIONS OR OTHER LAND UNITS)

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 16680 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

VERY DILUTE AQUEOUS WASTE MORE THAN 99% WATER FROM LEACHATE COLLECTION (FROM LANDFILL OPERATIONS OR OTHER LAND UNITS)
(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?
 Yes

No

Quantity Generated in Report Year

7506

pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 911 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 732 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 450 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 56 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 18 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)*

No – *Skip to Waste Shipped Off-site*

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.*

No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

WASTE OIL MANAGED AS HAZARDOUS WASTE FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 9 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (ARSENIC, CHROMIUM), 9, PG III, (D004, D007)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 33200 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)* No – **Skip to Waste Shipped Off-site**

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 33200 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(2) (Item 9b of manifest) RQ, UN3321, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-II), 7, (D007, PCB), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 2390 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 0 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.
 Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?
 Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 28420 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**
METAL SCALE, FILINGS AND SCRAP (INCLUDING METAL DRUMS) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES
(1) (General) _____
(2) (Item 9b of manifest) RQ, UN1759, WASTE, CORROSIVE SOLIDS, N.O.S. (CONTAINS SULFURIC ACID RESIDUAL), 8, PG III, (D007, D008)

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 20340 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.
 Yes – *Complete On-site Process System block(s)* No – **Skip to Waste Shipped Off-site**

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?
 Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 20340 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(2) (Item 9b of manifest) RQ, UN3321, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-II), 7, (D007, PCB), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 1398 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 0 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 19740 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D008), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 52 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 0 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 18490 _____ pounds
	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: <u>KY8- 890- 008- 982</u>	B. AGENCY INTEREST (AI) Number: <u>3059</u>
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Waste Description (See instructions.) Check one: Liquid Solid

FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OTHER REMEDIATION

(1) (General) _____

(2) (Item 9b of manifest) RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (SPENT ACTIVATED CARBON, CONTAINS TRICHLOROETHENE), 9, PG III

Is this waste both hazardous and radioactive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Quantity Generated in Report Year _____ 17347 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>Evoqua Water Technologies, LLC</u> EPA ID Number of receiving facility: <u>PAD987270725</u>	Off-Site Management Method Code H <u>039</u>	Total Quantity Shipped in 2021 _____ 17347 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: CERCLA WASTE - REFERENCE EPA FORM 8700-13 A/B COMMENTS BLOCK 18

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
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(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS

(2) (Item 9b of manifest) RQ, UN1954, WASTE, COMPRESSED GAS, FLAMMABLE, N.O.S. (OXYGEN, ARGON), 2.1 (7), (D001), "LIMITED QUANTITY RADIOACTIVE MATERIAL"

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
16495 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	<p>Name of receiving facility: <u>Diversified Scientific Services, Inc. (DSSI)</u></p> <p>EPA ID Number of receiving facility: <u>TND982109142</u></p>	<p>Off-Site Management Method Code H <u>129</u></p>	<p>Total Quantity Shipped in 2021 <u>16495</u> pounds</p>
	<p>Name of receiving facility: _____</p> <p>EPA ID Number of receiving facility: _____</p>	<p>Off-Site Management Method Code H _____</p>	<p>Total Quantity Shipped in 2021 _____ pounds</p>

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
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Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(2) (Item 9b of manifest) RQ, UN3321, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-II), 7, (D007, PCB), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 588 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 0 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>13040</u> pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

CONTAMINATED SOIL FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (F001, PCB), NP-237, PU-238, PU-239, TC-99, TH-230, SOLID/OXIDE, 133 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
9336 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>9336</u> pounds
	EPA ID Number of receiving facility: <u>UTD982598898</u>		
S i t e 2	Name of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	EPA ID Number of receiving facility: _____		

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
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Hazardous Waste Branch
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(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D008), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 12.07 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 8884 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 8884 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
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Hazardous Waste Annual Report Addendum
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FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D008, D011), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 52.4 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
8316 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>8316</u> pounds
Site 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (ASBESTOS, D008), TH-230, SOLID/OXIDE, 308 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 5979 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 5979 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: <u>KY8- 890- 008- 982</u>	B. AGENCY INTEREST (AI) Number: <u>3059</u>
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Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D009, D011), NP-237, TC-99, U-234, SOLID/OXIDE, 249 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 5884 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 5884 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (D009, D011), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 7 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 0 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 4460 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES
(1) (General) _____

RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (LEAD, BENZENE), 9, PG III, (D004, D018)
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 4003 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.
 Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?
 Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 4003 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: Liquid Solid

FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (ARSENIC, LEAD), 9, PG III, (D004, D006)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 3836 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 3836 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
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Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

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(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D009, D011), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 36 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?

Yes

No

Quantity Generated in Report Year

2798

pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	<p>Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u></p>	<p>Off-Site Management Method Code H <u>132</u></p>	<p>Total Quantity Shipped in 2021 <u>3600</u> pounds</p>
S i t e 2	<p>Name of receiving facility: _____ EPA ID Number of receiving facility: _____</p>	<p>Off-Site Management Method Code H _____</p>	<p>Total Quantity Shipped in 2021 _____ pounds</p>

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

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Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D009, D011), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 11.49 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
2209 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>3440</u> pounds
	EPA ID Number of receiving facility: <u>UTD982598898</u>		
S i t e 2	Name of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	EPA ID Number of receiving facility: _____		

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT
(1) (General) PROCESSES

RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (D008, ASBESTOS), NP-237,
(2) (Item 9b of manifest) TC-99, TH-230, U-234, SOLID/OXIDE, 52.6 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 3037 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 3037 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT
(1) (General) PROCESSES

RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (ASBESTOS, D008), TH-230,
(2) (Item 9b of manifest) SOLID/OXIDE, 138 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 2740 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 2740 _____ pounds
	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D009, D011), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 6 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
_____ 2739 _____ pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>2739</u> pounds
	EPA ID Number of receiving facility: <u>UTD982598898</u>		
Site 2	Name of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	EPA ID Number of receiving facility: _____		

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (D008), AM-241, TC-99, TH-230, U-234, SOLID/OXIDE, 3 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
_____ 0 _____ pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	<p>Name of receiving facility: <u>EnergySolutions Clive Facility</u></p> <p>EPA ID Number of receiving facility: <u>UTD982598898</u></p>	<p>Off-Site Management Method Code H <u>132</u></p>	<p>Total Quantity Shipped in 2021 <u>2624</u> pounds</p>
	<p>Name of receiving facility: _____</p> <p>EPA ID Number of receiving facility: _____</p>	<p>Off-Site Management Method Code H _____</p>	<p>Total Quantity Shipped in 2021 _____ pounds</p>

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D008, ASBESTOS), NP-237, TC-99. TH-230, U-234, SOLID/OXIDE, 34 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 2560 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 2560 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D008, D009), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 6.4 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 2374 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 2374 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D009, D011), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 6 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 2235 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 2235 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OIL CHANGES AND FILTER OR

(1) (General) BATTERY REPLACEMENT

RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (BENZENE, LEAD), 9, PG III, (D006, D008)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 0 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 1884 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
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Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

METAL SCALE, FILINGS AND SCRAP (INCLUDING METAL DRUMS) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D008), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 0.52 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
_____ 0 _____ pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 1862 _____ pounds
	EPA ID Number of receiving facility: <u>UTD982598898</u>		
S i t e 2	Name of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	EPA ID Number of receiving facility: _____		

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

METAL SCALE, FILINGS AND SCRAP (INCLUDING METAL DRUMS) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (LEAD), 9, PG III, (D008)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?

Yes

No

Quantity Generated in Report Year

_____ 1742 _____ pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	<p>Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u></p>	<p>Off-Site Management Method Code H <u>132</u></p>	<p>Total Quantity Shipped in 2021 <u>1742</u> pounds</p>
S i t e 2	<p>Name of receiving facility: _____ EPA ID Number of receiving facility: _____</p>	<p>Off-Site Management Method Code H _____</p>	<p>Total Quantity Shipped in 2021 _____ pounds</p>

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES
(1) (General) _____

RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (D004, ASBESTOS), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 0.3 MBQ, FISSILE EXCEPTED
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 458 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 1700 _____ pounds
Site 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: Liquid Solid
OTHER INORGANIC SOLIDS FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES
(1) (General) _____
RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (ARSENIC, LEAD), 9, (D004, D008), PG III
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 415 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.
 Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?
 Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>1592</u> pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: ARSENIC AND LEAD CONTAMINATED PPE / GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

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(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES
(1) (General) _____

RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (BARIUM, SELENIUM), 9, PG III, (D010)
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 486 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 1438 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
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Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-II), 7, (D009, D011), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 963 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 1430 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 1430 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (D008), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 1 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
_____ 0 _____ pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>1224</u> pounds
Site 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
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FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES
(1) (General) _____

RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D004, ASBESTOS), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 7 MBQ, FISSILE EXCEPTED
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
_____ 1171 _____ pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 1171 _____ pounds
	EPA ID Number of receiving facility: <u>UTD982598898</u>		
S i t e 2	Name of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	EPA ID Number of receiving facility: _____		

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES
(1) (General) _____

RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (ASBESTOS, D011), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 12 MBQ, FISSILE EXCEPTED
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 1122 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

 Yes – *Complete On-site Process System block(s)* No – **Skip to Waste Shipped Off-site**

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

 Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 1122 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
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Hazardous Waste Branch
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FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (D009), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 2 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?

Yes

No

Quantity Generated in Report Year

0

pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	<p>Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u></p>	<p>Off-Site Management Method Code H <u>132</u></p>	<p>Total Quantity Shipped in 2021 <u>1118</u> pounds</p>
Site 2	<p>Name of receiving facility: _____ EPA ID Number of receiving facility: _____</p>	<p>Off-Site Management Method Code H _____</p>	<p>Total Quantity Shipped in 2021 _____ pounds</p>

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
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Hazardous Waste Annual Report Addendum
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A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-II), 7, (PCB, D011), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 160 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 1027 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 1027 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D009), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 5 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
527 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>973</u> pounds
	EPA ID Number of receiving facility: <u>UTD982598898</u>		
S i t e 2	Name of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	EPA ID Number of receiving facility: _____		

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
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300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
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A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: Liquid Solid
ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES
(1) (General) _____
RQ, UN2915, WASTE, RADIOACTIVE MATERIAL, TYPE A PACKAGE, 7, (D009, D011), AM-241, TC-99, U-234, U-235, U-236, U-238, SOLID/OXIDE, 132 MBQ, YELLOW-II, TI=2.5, FISSILE EXCEPTED
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 960 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.
 Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?
 Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>Diversified Scientific Services, Inc. (DSSI)</u> EPA ID Number of receiving facility: <u>TND982109142</u>	Off-Site Management Method Code H <u>110</u>	Total Quantity Shipped in 2021 _____ 960 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES
(1) (General) _____

RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (SELENIUM), 9, PG III, (D010)
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 191 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 905 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES
(1) (General) _____

RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, NP-237, TC-99,
(2) (Item 9b of manifest) TH-230, U-234, (D009, D011), SOLID/OXIDE, 3 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 851 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.
 Yes – *Complete On-site Process System block(s)* No – **Skip to Waste Shipped Off-site**

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?
 Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 851 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(2) (Item 9b of manifest) RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (ARSENIC, LEAD), 9, (ASBESTOS, D004), PG III

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
0 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>696</u> pounds
Site 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
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A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**
COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS
(1) (General) _____
UN1072, WASTE OXYGEN, COMPRESSED, 2.2 (5.1)
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Quantity Generated in Report Year _____ 600 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.
 Yes – *Complete On-site Process System block(s)* No – **Skip to Waste Shipped Off-site**

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?
 Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: _____ Clean Harbors LaPorte, LLC EPA ID Number of receiving facility: _____ TXD982290140	Off-Site Management Method Code H <u>129</u>	Total Quantity Shipped in 2021 _____ 600 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
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A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D009), NP-237, TC-99, U-234, SOLID/OXIDE, 2 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
577 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>577</u> pounds
Site 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
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A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, NP-237, TC-99, TH-230, U-234, (PCB, D008), SOLID/OXIDE, 5 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 531 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 531 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
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FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(2) (Item 9b of manifest) RQ, UN3321, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-II), 7, (D006, D007), AM-241, NP-237, TH-230, SOLID/OXIDE, 27 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
511 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>511</u> pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: <u>KY8- 890- 008- 982</u>	B. AGENCY INTEREST (AI) Number: <u>3059</u>
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Waste Description (See instructions.) Check one: Liquid Solid

FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OIL CHANGES AND FILTER OR
(1) (General) BATTERY REPLACEMENT

RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (LEAD, BENZENE), 9, (D006, D008), PG III

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 439 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 495 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (D009, D011), NP-237, TC-99, U-234, SOLID/OXIDE, 87 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?

Yes

No

Quantity Generated in Report Year

483 pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	<p>Name of receiving facility: <u>EnergySolutions Clive Facility</u></p> <p>EPA ID Number of receiving facility: <u>UTD982598898</u></p>	<p>Off-Site Management Method Code H <u>132</u></p>	<p>Total Quantity Shipped in 2021 <u>483</u> pounds</p>
S i t e 2	<p>Name of receiving facility: _____</p> <p>EPA ID Number of receiving facility: _____</p>	<p>Off-Site Management Method Code H _____</p>	<p>Total Quantity Shipped in 2021 _____ pounds</p>

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
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A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OIL CHANGES AND FILTER OR
(1) (General) BATTERY REPLACEMENT

RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (LEAD, BENZENE), 9, (D006, D008), PG III

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year

334 pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	<p>Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u></p>	<p>Off-Site Management Method Code H <u>132</u></p>	<p>Total Quantity Shipped in 2021 <u>480</u> pounds</p>
S i t e 2	<p>Name of receiving facility: _____ EPA ID Number of receiving facility: _____</p>	<p>Off-Site Management Method Code H _____</p>	<p>Total Quantity Shipped in 2021 _____ pounds</p>

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
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A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D009), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 4 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 0 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 448 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
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A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OIL CHANGES AND FILTER OR
(1) (General) BATTERY REPLACEMENT

RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (CHLOROFORM, TETRACHLOROETHYLENE), 9, PG III, (D022)
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
413 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>413</u> pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
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A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D008), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 0.36 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 355 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 411 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING
(1) (General) _____

RQ, UN3321, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-II), 7, AM-241, NP-237, PU-239, TH-230, U-234, (PCB, D008), SOLID/OXIDE, 128 MBQ, FISSILE EXCEPTED
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 410 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.
 Yes – *Complete On-site Process System block(s)* No – **Skip to Waste Shipped Off-site**

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?
 Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 410 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
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Hazardous Waste Annual Report Addendum
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A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D009, D011), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 0.92 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 407 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 407 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
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FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: Liquid Solid

BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D008), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 1 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 398 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)* No – **Skip to Waste Shipped Off-site**

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 398 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
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A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-II), 7, (PCB, D008), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 133 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 342 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 342 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
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A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D009, D011), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 1 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
330 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>330</u> pounds
	EPA ID Number of receiving facility: <u>UTD982598898</u>		
S i t e 2	Name of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	EPA ID Number of receiving facility: _____		

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
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A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OIL CHANGES AND FILTER OR
(1) (General) BATTERY REPLACEMENT

RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (CONTAINS LEAD), 9, PG III, (D008)
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
_____ 198 _____ pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>328</u> pounds
Site 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
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A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(2) (Item 9b of manifest) RQ, UN3321, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-II), 7, (D004, D006), AM-241, NP-237, TH-230, SOLID/OXIDE, 19 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 305 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 305 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
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(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (D008, PCB), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 1 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 0 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 290 _____ pounds
	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN3321, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-II), 7, (D006, PCB), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 53 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?

Yes
 No

Quantity Generated in Report Year

_____ 185 _____ pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	<p>Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u></p>	<p>Off-Site Management Method Code H <u>132</u></p>	<p>Total Quantity Shipped in 2021 <u>241</u> pounds</p>
S i t e 2	<p>Name of receiving facility: _____ EPA ID Number of receiving facility: _____</p>	<p>Off-Site Management Method Code H _____</p>	<p>Total Quantity Shipped in 2021 _____ pounds</p>

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(2) (Item 9b of manifest) RQ, UN3321, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-II), 7, (D004, D006), AM-241, NP-237, TC-99, PU-239, TH-230, SOLID/OXIDE, 14 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
0 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>236</u> pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(2) (Item 9b of manifest) RQ, UN3321, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-II), 7, (D004, D008), AM-241, NP-237, TH-228, TH-230, SOLID/OXIDE, 14 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
0 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>230</u> pounds
Site 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS
(1) (General) _____

UN1950, WASTE AEROSOLS, FLAMMABLE, (EACH NOT EXCEEDING 1 L CAPACITY), 2.1
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
_____ 0 _____ pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>Clean Harbors Deer Park, LLC</u> EPA ID Number of receiving facility: <u>TXD055141378</u>	Off-Site Management Method Code H <u>040</u>	Total Quantity Shipped in 2021 <u>206</u> pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-II), 7, (D009, D011), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 26.7 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 202 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 202 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(2) (Item 9b of manifest) RQ, UN3321, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-II), 7, (D006, D007), AM-241, NP-237, TH-230, SOLID/OXIDE, 9 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
117 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility:	Off-Site Management Method Code	Total Quantity Shipped in 2021
	<u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	H <u>132</u>	<u>173</u> pounds
S i t e 2	Name of receiving facility:	Off-Site Management Method Code	Total Quantity Shipped in 2021
	_____ EPA ID Number of receiving facility: _____	H _____	_____ pounds

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
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(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: Liquid Solid

DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (CONTAINS LEAD), 9, (D008), PG III

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 163 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ Diversified Scientific Services, Inc. (DSSI) EPA ID Number of receiving facility: _____ TND982109142	Off-Site Management Method Code H <u>110</u>	Total Quantity Shipped in 2021 _____ 163 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
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Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN3321, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-II), 7, (D009, D0011), NP-237, TC-99, U-234, SOLID/OXIDE, 24 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
163 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>163</u> pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: Liquid Solid

CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-II), 7, (D004), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 18 MBQ, FISSILE EXCEPTED

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 161 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 161 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
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FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-II), 7, (D009, D011), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 26.7 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
159 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>159</u> pounds
	EPA ID Number of receiving facility: <u>UTD982598898</u>		
Site 2	Name of receiving facility: _____	Off-Site Management Method Code	Total Quantity Shipped in 2021
	EPA ID Number of receiving facility: _____	H _____	_____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
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FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OIL CHANGES AND FILTER OR
(1) (General) BATTERY REPLACEMENT

RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (CONTAINS LEAD), 9, PG III, (D008)
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
_____ 0 _____ pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>156</u> pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
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Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (D006, D008), AM-241, TC-99, TH-230, U-234, SOLID/OXIDE, 55 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
_____ 0 _____ pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site	Name of receiving facility:	Off-Site Management Method Code	Total Quantity Shipped in 2021
1	<u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	H <u>132</u>	<u>152</u> pounds
2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OIL CHANGES AND FILTER OR
(1) (General) BATTERY REPLACEMENT

RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (LEAD, BENZENE), 9, PG III, (D008, D018)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?
 Yes

No

Quantity Generated in Report Year

148

pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>148</u> pounds
Site 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
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FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES
(1) (General) _____

RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D006, D009),
(2) (Item 9b of manifest) NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 0.56 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 100 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.
 Yes – *Complete On-site Process System block(s)* No – **Skip to Waste Shipped Off-site**

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?
 Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 144 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (D006, PCB), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 53 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 0 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 140 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (PCB, D006), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 1.8 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 134 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 134 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OIL CHANGES AND FILTER OR
(1) (General) BATTERY REPLACEMENT

RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (LEAD, BENZENE), 9, PG III, (D008, D018)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?

Yes

No

Quantity Generated in Report Year

129

pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>129</u> pounds
Site 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES
(1) (General) _____

RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (D006, D007), NP-237, TC-99,
(2) (Item 9b of manifest) U-234, U-235, U-236, U-238, SOLID/OXIDE, 53 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 127 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.
 Yes – *Complete On-site Process System block(s)* No – **Skip to Waste Shipped Off-site**

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?
 Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 127 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
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Hazardous Waste Annual Report Addendum
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A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D008), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 0.23 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 62 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 118 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN3321, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-II), 7, (PCB, D006), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 52.6 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?

Yes

No

Quantity Generated in Report Year

0

pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	<p>Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u></p>	<p>Off-Site Management Method Code H <u>132</u></p>	<p>Total Quantity Shipped in 2021 <u>118</u> pounds</p>
S i t e 2	<p>Name of receiving facility: _____ EPA ID Number of receiving facility: _____</p>	<p>Off-Site Management Method Code H _____</p>	<p>Total Quantity Shipped in 2021 _____ pounds</p>

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: Liquid Solid

FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (BENZENE), 9, PG III, (D018)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 115 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 115 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN3321, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-II), 7, (D006, D007), AM-241, NP-237, TH-230, SOLID/OXIDE, 9 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 114 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 114 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
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FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS
(1) (General) _____

UN1950, WASTE AEROSOLS, FLAMMABLE, (EACH NOT EXCEEDING 1 L CAPACITY), 2.1
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Quantity Generated in Report Year _____ 56 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)* No – *Skip to Waste Shipped Off-site*

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: _____ Clean Harbors Deer Park, LLC EPA ID Number of receiving facility: _____ TXD055141378	Off-Site Management Method Code H <u>040</u>	Total Quantity Shipped in 2021 _____ 112 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN3321, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-II), 7, (PCB, D006), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 45 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 109 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 109 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
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FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN3321, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-II), 7, (PCB, D006), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 53.2 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?

Yes

No

Quantity Generated in Report Year

109

pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	<p>Name of receiving facility: <u>EnergySolutions Clive Facility</u></p> <p>EPA ID Number of receiving facility: <u>UTD982598898</u></p>	<p>Off-Site Management Method Code H <u>132</u></p>	<p>Total Quantity Shipped in 2021 <u>109</u> pounds</p>
S i t e 2	<p>Name of receiving facility: _____</p> <p>EPA ID Number of receiving facility: _____</p>	<p>Off-Site Management Method Code H _____</p>	<p>Total Quantity Shipped in 2021 _____ pounds</p>

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
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Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: Liquid Solid

COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS
(1) (General) _____

UN1950, WASTE AEROSOLS, FLAMMABLE, (EACH NOT EXCEEDING 1 L CAPACITY), 2.1
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Quantity Generated in Report Year _____ 105 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ Clean Harbors Deer Park, LLC EPA ID Number of receiving facility: _____ TXD055141378	Off-Site Management Method Code H <u>040</u>	Total Quantity Shipped in 2021 _____ 105 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
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FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-II), 7, (D006, D007), AM-241, NP-237, PU-238, PU-239, TC-99, TH-230, U-234, SOLID/OXIDE, 2 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
47 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>103</u> pounds
Site 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

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A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN3321, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-II), 7, (D006, PCB), AM-241, NP-237, PU-238, PU-239, TC-99, TH-230, U-234, SOLID/OXIDE, 255 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 102 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 102 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-II), 7, (D009, D011), NP-237, TC-99, U-234, SOLID/OXIDE, 37 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 93 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 93 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (D006), NP-237, TC-99, U-234, SOLID/OXIDE, 21 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
87 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>87</u> pounds
Site 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: Liquid Solid

CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (D006, D007), NP-237, TH-230, U-234, SOLID/OXIDE, 4 MBQ, FISSILE EXCEPTED

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 20 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 86 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
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Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: Liquid Solid

FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (CADMIUM, SELENIUM), 9, PG III, (D006, D008)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 86 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 86 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (D008), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 1 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
0 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)*

No – *Skip to Waste Shipped Off-site*

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.*

No – *Form 2 is complete.*

Site 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>84</u> pounds
	EPA ID Number of receiving facility: <u>UTD982598898</u>		
Site 2	Name of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	EPA ID Number of receiving facility: _____		

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-II), 7, (PCB, D006), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 52.6 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 78 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 78 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS
(1) (General) _____

UN1950, WASTE AEROSOLS, FLAMMABLE, (EACH NOT EXCEEDING 1 L CAPACITY), 2.1
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Quantity Generated in Report Year _____ 64 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.
 Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?
 Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ Clean Harbors Deer Park, LLC EPA ID Number of receiving facility: _____ TXD055141378	Off-Site Management Method Code H <u>040</u>	Total Quantity Shipped in 2021 _____ 64 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-II), 7, (PCB), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 5.7 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
63 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>63</u> pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: Liquid Solid

DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (LEAD), 9, PG III, (D008)

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 57 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 57 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**
ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES
(1) (General) _____
RQ, NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (MERCURY), 9, PG III, (D009)
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 38 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.
 Yes – *Complete On-site Process System block(s)* No – **Skip to Waste Shipped Off-site**

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?
 Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 38 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS
(1) (General) _____

UN1060, WASTE METHYL ACETYLENE AND PROPADIENE MIXTURES, STABILIZED, 2.1
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Quantity Generated in Report Year _____ 32 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ Clean Harbors LaPorte, LLC EPA ID Number of receiving facility: _____ TXD982290140	Off-Site Management Method Code H <u>141</u>	Total Quantity Shipped in 2021 _____ 32 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(2) (Item 9b of manifest) RQ, UN3321, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-II), 7, (D004, D008), TH-230, U-234, SOLID/OXIDE, 6 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
0 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>32</u> pounds
Site 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
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Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

LAB PACKS WITH NO ACUTE HAZARDOUS WASTE FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR
(1) (General) UNUSED CHEMICALS OR PRODUCTS

UN3321, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-II), 7, U-233, SOLID/OXIDE, 1068 MBQ,
(2) (Item 9b of manifest) FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 29 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>Diversified Scientific Services, Inc. (DSSI)</u> EPA ID Number of receiving facility: <u>TND982109142</u>	Off-Site Management Method Code H <u>110</u>	Total Quantity Shipped in 2021 _____ 29 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (D006, D008), TH-230, U-234, SOLID/OXIDE, 1.3 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 20 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.
 Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?
 Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 20 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

(2) (Item 9b of manifest) RQ, UN2912, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-I), 7, (D009), PU-238, PU-239, TH-230, U-234, SOLID/OXIDE, 0.5 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 0 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 <u>16</u> pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES
(1) (General) _____

RQ, UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I), 7, (D009), NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 0.439 MBQ, FISSILE EXCEPTED
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 14 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

 Yes – *Complete On-site Process System block(s)* No – *Skip to Waste Shipped Off-site*

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

 Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 14 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS
(1) (General) _____

UN1950, AEROSOLS, FLAMMABLE, (EACH NOT EXCEEDING 1 L CAPACITY), 2.1
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 13 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 13 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982 **B. AGENCY INTEREST (AI) Number:** 3059

Waste Description (See instructions.) Check one: **Liquid** **Solid**
ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES
(1) (General) _____
UN2913, WASTE, RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-II), 7, NP-237, TC-99, TH-230, U-234, SOLID/OXIDE, 0.09 MBQ, FISSILE EXCEPTED
(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 12 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.
 Yes – *Complete On-site Process System block(s)* No – **Skip to Waste Shipped Off-site**

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?
 Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: _____ EnergySolutions Clive Facility EPA ID Number of receiving facility: _____ UTD982598898	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 12 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

(1) (General) FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(2) (Item 9b of manifest) UN3321, WASTE, RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY (LSA-II), 7, U-234, U-235, U-238, 2 MBQ, FISSILE EXCEPTED

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 11 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.
 Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?
 Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: <u>EnergySolutions Clive Facility</u> EPA ID Number of receiving facility: <u>UTD982598898</u>	Off-Site Management Method Code H <u>132</u>	Total Quantity Shipped in 2021 _____ 11 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 2679 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

BATTERIES, BATTERY PARTS, CORES, CASINGS FROM OIL CHANGES AND FILTER OR BATTERY REPLACEMENT

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?

Yes

No

Quantity Generated in Report Year

30

pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS
(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
_____ 401 _____ pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS
(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?

Yes

No

Quantity Generated in Report Year

120

pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS
(1) (General) NA

(2) (Item 9b of manifest) NA

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year

114

pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment___, recycling___, disposal___, or by discharge to a sewer or publicly owned treatment works (POTW)___? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

COMPRESSED GASES FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS
(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 101 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT
(1) (General) PROCESSES

NA

(2) (Item 9b of manifest)

Is this waste both hazardous and radioactive?

Yes

No

Quantity Generated in Report Year

1450

pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment, recycling, disposal, or by discharge to a sewer or publicly owned treatment works (POTW)? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
112 pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
Site 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

CONTAMINATED DEBRIS: PAPER, CLOTHING, RAGS, WOOD, GLASS, ETC. FROM OTHER ONE-TIME OR INTERMITTENT
(1) (General) PROCESSES

NA

(2) (Item 9b of manifest)

Is this waste both hazardous and radioactive?

Yes

No

Quantity Generated in Report Year

9

pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment, recycling, disposal, or by discharge to a sewer or publicly owned treatment works (POTW)? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
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Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 56 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
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Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 83 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

DRIED PAINT (PAINT CHIPS, FILTERS, AIR FILTERS, OTHER) FROM PAINTING AND COATING

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 54 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 4022 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 3892 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

Site 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
Site 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: <u>KY8- 890- 008- 982</u>	B. AGENCY INTEREST (AI) Number: <u>3059</u>
--	--

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____
NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 2389 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
_____ 986 _____ pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 596 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 270 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: <u>KY8- 890- 008- 982</u>	B. AGENCY INTEREST (AI) Number: <u>3059</u>
--	--

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 165 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – *Complete On-site Process System block(s)* No – *Skip to Waste Shipped Off-site*

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – *Continue completing this form and Form 4.* No – *Form 2 is complete.*

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

ELECTRICAL DEVICES (LAMPS, THERMOSTATS, CRTS, ETC.) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 56 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OIL CHANGES AND FILTER OR
(1) (General) BATTERY REPLACEMENT

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?

Yes

No

Quantity Generated in Report Year

168

pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OIL CHANGES AND FILTER OR
(1) (General) BATTERY REPLACEMENT

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?

Yes

No

Quantity Generated in Report Year

141

pounds

Enter the value used to convert this waste to pounds

(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: NA

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: <u>KY8- 890- 008- 982</u>	B. AGENCY INTEREST (AI) Number: <u>3059</u>
--	--

Waste Description (See instructions.) Check one: Liquid Solid

FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____
NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 179 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	--	--

ON-SITE MANAGEMENT
Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s) No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE
Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4. No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

FILTERS, SOLID ABSORBENTS, ION EXCHANGE RESINS AND SPENT CARBON FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES
(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 56 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

METAL SCALE, FILINGS AND SCRAP (INCLUDING METAL DRUMS) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 2290 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
---	---	--

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
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Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

METAL SCALE, FILINGS AND SCRAP (INCLUDING METAL DRUMS) FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive?
 Yes
 No

Quantity Generated in Report Year
_____ 1576 _____ pounds

Enter the value used to convert this waste to pounds
(Leave blank if waste amount is already listed in pounds)

ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds
	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H _____	Total Quantity Shipped in 2021 _____ pounds

Comments: GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
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Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 2: Waste Generation and Management (EPA GM Form)

A. EPA ID Number: KY8- 890- 008- 982

B. AGENCY INTEREST (AI) Number: 3059

Waste Description (See instructions.) Check one: Liquid Solid

OTHER INORGANIC SOLIDS FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES

(1) (General) _____

NA

(2) (Item 9b of manifest) _____

Is this waste both hazardous and radioactive? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Quantity Generated in Report Year _____ 13 _____ pounds	Enter the value used to convert this waste to pounds (Leave blank if waste amount is already listed in pounds) _____
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ON-SITE MANAGEMENT

Was any of this waste managed on-site by treatment____, recycling____, disposal____, or by discharge to a sewer or publicly owned treatment works (POTW)____? Check One.

Yes – Complete On-site Process System block(s)

No – Skip to Waste Shipped Off-site

WASTE SHIPPED OFF-SITE

Was any of this waste shipped off site in 2021 for treatment, disposal, or recycling?

Yes – Continue completing this form and Form 4.

No – Form 2 is complete.

S i t e 1	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds
S i t e 2	Name of receiving facility: _____ EPA ID Number of receiving facility: _____	Off-Site Management Method Code H ____	Total Quantity Shipped in 2021 _____ pounds

Comments: ARSENIC AND LEAD CONTAMINATED PPE / GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

ENCLOSURE 9

**2021 ANNUAL HAZARDOUS WASTE REPORT, ASSESSMENT RETURN,
AND CLAIM FOR EXCLUSION FOR THE
PADUCAH GASEOUS DIFFUSION PLANT,
MCCRACKEN COUNTY, KENTUCKY,
PERMIT NUMBER KY8-890-008-982**

KENTUCKY ADDENDUM FORM 4 – SUMMARY OF WASTE SHIPPED OFF SITE

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Kentucky Department for Environmental Protection
Division of Waste Management
Hazardous Waste Branch
300 Sower Blvd, Frankfort, KY 40601
(502) 564-6716

Hazardous Waste Annual Report Addendum
(EPA Form 8700-13 A/B)
FORM 4: Summary of Waste Shipped Off Site (EPA OI Form)

A. EPA ID Number: KY8-890-008-982

B. AGENCY INTEREST (AI) Number: 3059

List All Receiving Facilities List each facility only once.	Total Number of Manifested Shipments	Total Pounds Shipped for Reporting Year	
EPA ID Number <u>TXD055141378</u> Facility Name <u>Clean Harbors Deer Park, LLC</u>	2	508	
EPA ID Number <u>TXD0982290140</u> Facility Name <u>Clean Harbors LaPorte, LLC</u>	1	632	
EPA ID Number <u>TND982109142</u> Facility Name <u>Diversified Scientific Services, Inc. (DSSI)</u>	5	17,647	
EPA ID Number <u>UTD982598898</u> Facility Name <u>EnergvSolutions Clive Facility</u>	63	308,483	
EPA ID Number <u>TND982157570</u> Facility Name <u>EnergvSolutions, Inc.</u>	1	13	
EPA ID Number <u>PAD987270725</u> Facility Name <u>Evoqua Water Technologies, LLC</u>	1	17,347	
Total	73	345,630	
List All Primary Transporters List each primary transporter only once. Do not list secondary transporters.	Total Number of Manifested Shipments	Total Pounds Shipped for Reporting Year	Container Types
EPA ID Number <u>COR000005389</u> Transporter Name <u>CAST Transportation</u>	11	46,835	BA CM DM TP
EPA ID Number <u>MAD039322250</u> Transporter Name <u>Clean Harbors Environmental Services, Inc.</u>	2	934	CY DM
EPA ID Number <u>TNR000034686</u> Transporter Name <u>Hittman Transport Services, Inc.</u>	1	34,440	TP
EPA ID Number <u>TNR000034678</u> Transporter Name <u>Interstate Ventures, Inc.</u>	10	74,543	CM DF DM
EPA ID Number <u>WAR000012005</u> Transporter Name <u>RSB Logistic Inc.</u>	6	8,724	CM DF DM
EPA ID Number <u>TNR000011247</u> Transporter Name <u>Specialty Transport, Inc.</u>	23	107,715	CM CW CY DF DM
EPA ID Number <u>MOD095038998</u> Transporter Name <u>Tri-State Motor Transit Co</u>	20	72,439	CM DF DM
Total	73	345,630	BA CM CW CY DF DM TP

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