



Department of Energy

Portsmouth/Paducah Project Office
1017 Majestic Drive, Suite 200
Lexington, Kentucky 40513
(859) 219-4000

February 11, 2025

Ms. Myrna Redfield, Program Manager
Four Rivers Nuclear Partnership, LLC
5511 Hobbs Road
Kevil, Kentucky 42053

PPPO-02-10031099-25

Dear Ms. Redfield:

DE-EM0004895: REVIEW OF DELIVERABLE NOS. 63, 64, AND 65, DRAFT 2024 ANNUAL HAZARDOUS WASTE REPORT, ASSESSMENT RETURN, AND CLAIM FOR EXCLUSION

Reference: Letter from M. Redfield to J. Stokes, “Four Rivers Nuclear Partnership, LLC—Deliverable Nos. 63, 64, and 65—DRAFT 2024 Annual Hazardous Waste Report, Assessment Return, and Claim for Exclusion for the Paducah Gaseous Diffusion Plant, Paducah, Kentucky, Permit No. KY8-890-008-982, Agency Interest No. 3059,” (FRNP-25-9053), dated January 30, 2025

The U.S. Department of Energy (DOE) reviewed the Four Rivers Nuclear Partnership, LLC, referenced submittal and has no comments. Please certify and submit the information to the Kentucky Energy and Environmental Cabinet via the Kentucky Online Gateway website. DOE also authorizes the release of the report to the proper County Judge/Executive. Once certified and submitted, please provide DOE confirmation of the submittals.

If you have any questions or require additional information, please contact Ryan Callihan at (740) 970-0255.

Sincerely,

**APRIL
LADD**

April Ladd
Contracting Officer
Portsmouth/Paducah Project Office

Digitally signed by
APRIL LADD
Date: 2025.02.11
16:06:07 -06'00'

cc:

abigail.parish@pppo.gov, PPPO
april.ladd@pppo.gov, PPPO
bruce.ford@pad.pppo.gov, FRNP
carrie.maxie@pad.pppo.gov, FRNP
david.ruckstuhl@pad.pppo.gov, FRNP
dennis.greene@pad.pppo.gov, FRNP
frnpcorrespondence@pad.pppo.gov
jennifer.stokes@pppo.gov, PPPO
joel.bradburne@pppo.gov, PPPO
mona.dockery@pad.pppo.gov, FRNP
myrna.redfield@pad.pppo.gov, FRNP
pad.rmc@pad.pppo.gov
reinhard.knerr@pppo.gov, PPPO
ryan.callihan@pppo.gov, PPPO
tammy.stapleton@pad.pppo.gov, FRNP

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	128,900	\$0.002 (if 2a)	\$ 257.800
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	99,965	\$0.012 (if 4a)	\$ 1,199.580
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	844		
7. SUBTOTAL			\$ 1,457.380
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)			\$ 1,457.380

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
 DEP-7070 ff (Rev. 2017)

Commonwealth of Kentucky
CLAIM FOR EXCLUSION FROM THE HAZARDOUS WASTE ASSESSMENT
 For January – December

Return to Hazardous Waste Branch, 300 Sower Blvd., 2nd Floor, Frankfort KY 40601 BEFORE **March 1** with the Hazardous Waste Assessment Return and Annual Report.

1. EPA ID Number: KY8-890-008-982	County: McCracken	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		

2. Identify the specific exclusion described under KRS 224.46-580 (7) and (8) for which approval is sought. Mark only one box.

- Waste Oil
- Special Waste
- Spent material from air pollution control emissions at coke manufacturing facilities
- Secondary handler receiving waste from Kentucky generators
- Waste subject to Section 402 of the Clean Water Act sent to a KPDES outfall
- Waste subject to Section 307B of the Clean Water Act sent to a POTW
- Recycled waste used in the steel manufacturing process
- Out-of-state waste received by a manufacturing company from an affiliated company
- Emission control dust and sludge from the primary production of steel that is recycled by high temperature metals recovery or managed by stabilization of metals


3. Provide a brief description of the process that generates the hazardous waste for which you are seeking exclusion from assessment or the Claim will be denied. **(Mandatory - Attach additional sheets if necessary.)** The waste oil reported on this claim for exclusion from the Hazardous Waste Assessment for January–December 2024 consists of oil drained from equipment being decommissioned or serviced. All of this oil will be treated thermally at Diversified Scientific Services, Inc. (DSSI) in Kingston, Tennessee.

4. Complete this chart for the hazardous waste you are seeking an exclusion.

EPA Waste Codes	Amount of Waste Generated During the Assessment Period <small>Report in pounds.</small>	Solid or Liquid	Was this waste ultimately sent off site for treatment storage or disposal? (Yes or No?)
D018 D039	844	Liquid	Yes

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.

_____ Myrna E. Redfield, Four Rivers Nuclear Partnership, LLC, Program Manager _____
Original Signature **Name and Title** **Date**

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>2024</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 37.111653	Longitude 88.812803	<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	joel.bradburne@pppo.gov				
Phone	859-219-4001	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	D021	D022
D027	D032	D035	D039	D040	F001	F002
F039	U210	U220	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 checked="" 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 may include 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 would be identified in the report using source code G49, Other remediation; however, there was no reportable CERCLA wastes to include in this reporting year.

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)
Printed Name (First, Middle Initial Last) Myrna Espinosa Redfield	Title 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	

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2024 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM



1. Waste Characteristics

A. Waste Description	CAUSTIC AQUEOUS WASTE WITHOUT CYANIDES (PH >12.5) 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 W110	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 45286	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	45286
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 2024 (reporting cycle)
 WASTE GENERATION AND MANAGEMENT (GM) FORM



1. Waste Characteristics

A. Waste Description	OTHER ORGANIC LIQUID FROM DISCARDING OFF-SPECIFICATION, OUT-OF-DATE, AND/OR UNUSED CHEMICALS OR PRODUCTS		
B. EPA Hazardous Waste Code(s)	D001 D002		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G11	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W219	F. Waste Minimization Code X	G. Radioactive Mixed <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
H. Quantity 25392	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 El Dorado, LLC			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
ARD069748192	H040	25392	
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

NEUTRALIZING AMINE

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2024 (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 7999	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	16505	
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 2024 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	OIL-WATER EMULSION OR MIXTURE FROM PROCESS EQUIPMENT CHANGE-OUT OR DISCONTINUATION OF EQUIPMENT USE		
B. EPA Hazardous Waste Code(s)	D001 D005 D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G15	Management Method (G25)	NA	Country Code (G62) NA
E. Form Code W205	F. Waste Minimization Code	X	G. Radioactive Mixed <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
H. Quantity 2608	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 El Dorado, LLC		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
ARD069748192	H040	2608
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 2024 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	OIL-WATER EMULSION OR MIXTURE FROM PROCESS EQUIPMENT CHANGE-OUT OR DISCONTINUATION OF EQUIPMENT USE		
B. EPA Hazardous Waste Code(s)	D005 D010		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G15	Management Method (G25)	NA	Country Code (G62) NA
E. Form Code W205	F. Waste Minimization Code	X	G. Radioactive Mixed <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
H. Quantity 1784	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 El Dorado, LLC		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
ARD069748192	H040	1784
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 2024 (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 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	1248
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 2024 (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 A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 844	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	H050	900
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 2024 (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 A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 733	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	845	
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 2024 (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	552	
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 2024 (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 382	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	508
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 2024 (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 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	460	
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>2024</u> (reporting cycle) WASTE GENERATION AND MANAGEMENT (GM) FORM	
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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 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 A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 339	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	339	
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 2024 (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)	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 W219	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 337	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	H040	337	
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 LIQUIDS / GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2024 (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 272	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

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

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2024 (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)	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 A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 263	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	319
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 2024 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	PAINT, INK, LACQUER OR VARNISH FROM PAINTING AND COATING		
B. EPA Hazardous Waste Code(s)	D001 D005 D006 D007 D008 D011 D035		
C. State Hazardous Waste Code(s)	NA		
D. Source Code G06	Management Method (G25) NA	Country Code (G62) NA	
E. Form Code W209	F. Waste Minimization Code A	G. Radioactive Mixed <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
H. Quantity 197	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 El Dorado, LLC		
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped
ARD069748192	H040	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 2024 (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	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 2024 (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 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

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2024 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	OIL-WATER EMULSION OR MIXTURE 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 W205	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 302	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 <u>2024</u> (reporting cycle) WASTE GENERATION AND MANAGEMENT (GM) FORM	
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1. Waste Characteristics

A. Waste Description	OTHER AQUEOUS WASTE OR WASTEWATERS 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 W113	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 547	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 <u>2024</u> (reporting cycle) WASTE GENERATION AND MANAGEMENT (GM) FORM	
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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 40	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 <u>2024</u> (reporting cycle) WASTE GENERATION AND MANAGEMENT (GM) FORM	
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1. Waste Characteristics

A. Waste Description	OTHER ORGANIC LIQUID FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D001 D035		
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 6	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

DENATURED ALCOHOL / GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY
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United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2024 (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 4991	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 2024 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	VERY DILUTE AQUEOUS WASTE MORE THAN 99% WATER FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	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 W101	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 318	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 2024 (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 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 A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 6603	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 2024 (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 A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 444	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 2024 (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)	D005 D006 D007 D008 D010 D018 D039 D040		
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 A	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 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 2024 (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 D010		
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 A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 332	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 2024 (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 A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 146	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 2024 (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 A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 50	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 2024 (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)	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 A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 50	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 <u>2024</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)	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	40060
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 2024 (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 13628	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	21184
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>2024</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)	D004 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 2247	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	15871
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 2024 (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 9924	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	12602	
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>2024</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	X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
H. Quantity 4347	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	8897
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 2024 (reporting cycle)
WASTE GENERATION AND MANAGEMENT (GM) FORM

**1. Waste Characteristics**

A. Waste Description	CONTAMINATED SOIL FROM OTHER ONE-TIME OR INTERMITTENT PROCESSES		
B. EPA Hazardous Waste Code(s)	D004 D005 D006 D007 D008 D009 D010 D011 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	X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
H. Quantity 8570	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	8570
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>2024</u> (reporting cycle) WASTE GENERATION AND MANAGEMENT (GM) FORM	
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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 <small>G16</small>	Management Method (G25)	<small>NA</small>	Country Code (G62) <small>NA</small>
E. Form Code <small>W309</small>	F. Waste Minimization Code	<small>A</small>	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
H. Quantity <small>261</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 5454
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 2024 (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 1352	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	4896
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 2024 (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 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 1728	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	4714	
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 2024 (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 2325	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	3117	
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 2024 (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 D007 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 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	2676
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 2024 (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 92	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	2166	
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 <u>2024</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)	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 1611	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	H141	1611
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 2024 (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 D005 D006 D007 D008 D009		
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 1267	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	1443	
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>2024</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
E. Form Code	W320	F. Waste Minimization Code	A
		G. Radioactive Mixed	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
H. Quantity	580	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	1130
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 2024 (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 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 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	784
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>2024</u> (reporting cycle) WASTE GENERATION AND MANAGEMENT (GM) FORM	
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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 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	340
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>2024</u> (reporting cycle) WASTE GENERATION AND MANAGEMENT (GM) FORM	
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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 D018 D022 D039 D040		
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 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	246
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 2024 (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 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 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	233	
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>2024</u> (reporting cycle) WASTE GENERATION AND MANAGEMENT (GM) FORM	
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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 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	184
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 2024 (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 D009		
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 156	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

GENERATED AS A RESULT OF MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2024 (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 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 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 MAINTENANCE ACTIVITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2024 (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 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 Reidsville, LLC			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
NCD000648451	H141	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

NA

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2024 (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 F001 F002 U210 U220		
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 58	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 Reidsville, LLC			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
NCD000648451	H141	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 <u>2024</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)	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	113	
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 2024 (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 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 Reidsville, LLC			
B. EPA ID of facility to which waste was shipped	C. Management Method Code	D. Total Quantity Shipped	
NCD000648451	H141	107	
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 2024 (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 33281	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 2024 (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)	D001 D003 D011		
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 67	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 2024 (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 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 2024 (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 225	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 <u>2024</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 X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 4321	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
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United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2024 (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 765	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 2024 (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 475	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 2024 (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 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 218	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 2024 (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 X	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

GENERATED AS A RESULT OF DEACTIVATION OF INACTIVE FACILITY

United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2024 (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 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 3	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 2024 (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	X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
H. Quantity 14622	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 2024 (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 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 X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 10316	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 2024 (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 4624	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 2024 (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 1547	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 <u>2024</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)	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 830	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 2024 (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 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 50	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 2024 (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		
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 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 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 <u>2024</u> (reporting cycle) WASTE GENERATION AND MANAGEMENT (GM) FORM	
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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 <small>G16</small>	Management Method (G25)	<small>NA</small>	Country Code (G62) <small>NA</small>
E. Form Code <small>W310</small>	F. Waste Minimization Code	<small>A</small>	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
H. Quantity <small>851</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 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 2024 (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)	D005 D010		
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 566	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 2024 (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 D010		
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 4	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 <u>2024</u> (reporting cycle) WASTE GENERATION AND MANAGEMENT (GM) FORM	
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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 D007 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 2184	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
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United States Environmental Protection Agency
HAZARDOUS WASTE REPORT 2024 (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 D018 D022 D039 D040		
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 1243	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 2024 (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 554	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 2024 (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 375	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 2024 (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 D005 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 W310	F. Waste Minimization Code X	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 308	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 2024 (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 172	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 <u>2024</u> (reporting cycle) WASTE GENERATION AND MANAGEMENT (GM) FORM	
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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 D007 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 66	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 2024 (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 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 W310	F. Waste Minimization Code A	G. Radioactive Mixed <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
H. Quantity 4	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 2024 (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	2547	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 2024 (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)	D007		
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 154	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
OFF-SITE IDENTIFICATION (OI) FORM



1. Site 1

A. EPA ID Number of Off-site Installation or Transporter			ARD069748192
B. Name of Off-site Installation or Transporter			Clean Harbors El Dorado, 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 309 American Circle			
City, Town, or Village El Dorado			
State	Arkansas	Zip Code	71730
Country		United States	

2. Site 2

A. EPA ID Number of Off-site Installation or Transporter			NCD000648451
B. Name of Off-site Installation or Transporter			Clean Harbors Reidsville, 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 208 Watlington Industrial Drive			
City, Town, or Village Reidsville			
State	North Carolina	Zip Code	27320
Country		United States	

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	37763
Country		United States	

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			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	Tennessee	Zip Code	37830
Country		United States	

2. Site 2

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 Grantsville			
State	Utah	Zip Code	84029
Country		United States	

3. Site 3

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 42 Longwater Drive			
City, Town, or Village Norwell			
State	Massachusetts	Zip Code	02061
Country		United States	

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			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		1560B Bear Creek Road	
City, Town, or Village Oak Ridge			
State	Tennessee	Zip Code	37830
Country		United States	

2. Site 2

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		2530 Mitchell Street	
City, Town, or Village Knoxville			
State	Tennessee	Zip Code	37917
Country		United States	

3. Site 3

A. EPA ID Number of Off-site Installation or Transporter			NA
B. Name of Off-site Installation or Transporter			NA
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 NA			
State	NA	Zip Code	NA
Country		NA	

4. 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 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>ARD069748192</u> Facility Name <u>Clean Harbors El Dorado, LLC</u>	3	29,981	
EPA ID Number <u>NCD000648451</u> Facility Name <u>Clean Harbors Reidsville, LLC</u>	1	336	
EPA ID Number <u>TND982109142</u> Facility Name <u>Diversified Scientific Services, Inc. (DSSI)</u>	1	1,237	
EPA ID Number <u>TND982157570</u> Facility Name <u>EnergvSolutions, Inc.</u>	1	1,611	
EPA ID Number <u>UTD982598898</u> Facility Name <u>EnergvSolutions Clive Facility</u>	34	201,353	
Total	40	234,518	
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>MAD039322250</u> Transporter Name <u>Clean Harbors Environmental Services, Inc.</u>	4	30,317	DM TP
EPA ID Number <u>TNR000034686</u> Transporter Name <u>Hittman Transport Services, Inc.</u>	21	118,015	BA CM DF DM TP
EPA ID Number <u>TNR000011247</u> Specialty Transport, Inc.	15	86,186	CM DF DM
Total	40	234,518	BA CM DF DM TP

From: [Redfield, Myrna](#)
To: [Greene, Dennis](#)
Cc: [Bowman, Paula](#)
Subject: FW: [EXTERNAL SENDER] Kentucky Tier II Fees Payment Receipt
Date: Thursday, February 20, 2025 8:27:39 AM

Dennis,

Submitted the Tier II and paid the fee.

Paula – I used the FNRP card, so ccing you so that you have the receipt.

Thanks,

Myrna

From: KentuckySupport <support@kentucky.gov>
Sent: Thursday, February 20, 2025 8:26 AM
To: Redfield, Myrna <Myrna.Redfield@pad.pppo.gov>
Subject: [EXTERNAL SENDER] Kentucky Tier II Fees Payment Receipt



Kentucky Tier II Fees Payment Receipt

Receipt

- Save a copy of the receipt for your records
- Facilities no longer need to submit to the KERC, Local Emergency Planning Committee (LEPC), and Fire Departments. Instead, a single submittal through TIER II MANAGER® satisfies all three submissions.

Confirmation Information

Transaction Number	121927990
Payment Made	02/20/2025 09:25 AM (-05:00 UTC)
Payment Method	Visa Credit Ending With 0896

Account Holder Details

Name	Myrna E Redfield
Address	5511 Hobbs Road Kevil, KY 42053

Cart Item(s)

Description	Amount	Quantity	Extended Total
Fees to be paid as part of Submission of Annual Report.	\$25.00	1	\$25.00
		Sub Total	\$25.00
	Portal Administration Fee		\$0.75
	Total Amount		\$25.75

For more information on SARA Title III Planning Guidance, please contact:

Tier II Program Manager

KY_Tier2_Manager@ky-em.org

Kentucky Emergency Management (KYEM)

Boone Center National Guard

110 Minuteman Parkway

Frankfort, KY 40601

Office: 502.607.5712



This email was sent to myrna.redfield@pad.pppo.gov on behalf of [Kentucky.gov](https://kentucky.gov)

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