

eDEP Transaction Copy

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Username: **CLEANHARBORS**

Transaction ID: 116826

Document: AQ Source Registration Package

Size of File: 4960.71K

Status of Transaction: Submitted

Date and Time Created: 3/29/2023:2:34:09 PM

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Bureau of Waste Prevention - Air Quality

Source Registration Overview

Create or Amend a Source Registration Forms Package

2006	
Year of Record	

1190564

Facility AQ identifier



A. Create a Source Registration Package

 Select existing or new facility 	ty:
---	-----

Existing Facilities: To create a complete package for 2006 check box.

check if you added emission units or stacks since your last report.

■ New Facilities – check if you have never before submitted a Source Registration



2. Validate this form:



Date Received (DEP use only - mm/dd/yyyy)

B. Amend a Source Registration

- 1. If you need to correct or add to a previously submitted Source Registration for 2006 check the boxes in the list below to select the forms/units you wish to work on. Check here to add new units:
- 2. Validate this form:

Facility Name: CLEAN HARBORS OF BRAINTREE

Our records indicate that this facility has: 65 Emission Units (points) and Physical Stacks

AP-SR Source Registration Form (general facility and contact information) - REQUIRED

AP-TES Total Emissions Statement (facility-wide emissions; includes hazardous Air Pollutant (HAP) reporting).



amend a prior year's Source Registration?

		?	?	?	?
	Emission unit name (from prior submittals)	Facility's ID#	DEP#	AP form	Last update
/	BOILER #2-HURST #30 1.004 MMBTU/HR #2 OIL-0.3%S	2	2	AP-1	2005
/	BOILER #1-CLEAVER BROOKS-#4(NOT USED) #2 OIL 0.3%S	3	3	AP-1	2005
/	GENERATOR #2-CUMMINS #NT855G2 #2 DIESEL	50	50	AP-1	2005
/	GENERATOR #1-CATERPILLAR 558.5 KW #2 OIL-0.3%S	55	55	AP-1	2005
/	2 LENNOX FURNACES SR 20Q5-140/154 0.246 MMBTU/HR	64	64	AP-1	2005
/	THREE DISTILLATION UNITS- 780 GAL/HR NOT USED 05	4	4	AP-2	2005
/	2 DRUM CRUSHING LINES	5	5	AP-2	2005
/	REPACKAGING SOLVENTS	61	61	AP-2	2005
/	PAINT CAN POUR-OFF + CRUSHING	65	65	AP-2	2005
	MERCURY POUR-OFF	66	66	AP-2	2005
/	INCINERATOR #1-VENT-O-MATIC CAE 500 #2 OIL-0.2%S	1	1	AP-3	2005
~	AG TANK A1-9,800 GAL WASTE STREAM A-21	6	6	AP-4	2005
/	AG TANK A2-9,800 GAL WASTE STREAM A-22	7	7	AP-4	2005

Additional units (if any) listed on following pages



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	3				
	Emission unit name (from prior submittals)	Facility's ID#	DEP#	AP form	Last update
	AG TANK A3-9,800 GAL WASTE STREAM A-22	8	8	AP-4	2005
	AG TANK A4- 5,200 GAL WASTE STREAM A-40	9	9	AP-4	2005
	AG TANK A5- 5,200 GAL WASTE STREAM A-22	10	10	AP-4	2005
/	AG TANK A6- 9,000 GAL WASTE STREAM A-32	11	11	AP-4	2005
	AG TANK A7- 9,000 GAL WASTE STREAM A-40	12	12	AP-4	2005
	AG TANK A8- 5,000 GAL WASTE STREAM A-22	13	13	AP-4	2005
	AG TANK A9- 5,000 GAL WASTE STREAM B-40	14	14	AP-4	2005
	AG TANK A10- 9,800 GAL WASTE STREAM A-21	15	15	AP-4	2005
	AG TANK A11- 5,000 GAL WASTE STREAM A-21	16	16	AP-4	2005
	AG TANK A17A- 3,900 GAL STILL BOTTOMS-EMTY 2005	17	17	AP-4	2005
	AG TANK A17B- 500 GAL -EMPTY 2005-	18	18	AP-4	2005
	AG TANK A18- 5,000 GAL -NOT USED 2005-	19	19	AP-4	2005
	AG TANK A19- 5,000 GAL -NOT USED 2005-	20	20	AP-4	2005
	AG TANK A20- 5,000 GAL -NOT USED 2005-	21	21	AP-4	2005
	AG TANK A21- 5,000 GAL -NOT USED 2005-	22	22	AP-4	2005
	AG TANK A22- 2,400 GAL -NOT USED 2005- PCB	23	23	AP-4	2005
	AG TANK A23- 2,400 GAL -NOT USED 2005- PCB	24	24	AP-4	2005
	AG TANK A24- 2,400 GAL -NOT USED 2005- PCB	25	25	AP-4	2005
	AG TANK A25- 1,000 GAL -NOT USED 2005- PCB	26	26	AP-4	2005
	AG TANK F1- 2,000 GAL -NOT USED 2005-	27	27	AP-4	2005
	AG TANK F2- 2,000 GAL -NOT USED 2005-	28	28	AP-4	2005
	AG TANK SS- 2,000 GAL -NOT USED 2005-	29	29	AP-4	2005
	AG TANK F4- 2,000 GAL -NOT USED 2005- SOLVENT	30	30	AP-4	2005
	AG TANK F5- 2,000 GAL -NOT UESD 2005- SOLVENT	31	31	AP-4	2005
	AG TANK F6- 2,000 GAL -NOT UESD 2005- SOLVENT	32	32	AP-4	2005
	AG TANK F7- 1,500 GAL -NOT USED 2005- SOLVENT	33	33	AP-4	2005
	AG TANK F8- 1,500 GAL -NOT USED 2005- SOLVENT	34	34	AP-4	2005
	AG TANK P1- 3,000 GAL - NOT USED 2005- TCE	35	35	AP-4	2005
	AG TANK P2- 3,000 GAL -NOT USED 2005- TCETHANE	36	36	AP-4	2005
	AG TANK P3- 3,000 GAL -NOT USED 2005- MCL	37	37	AP-4	2005
	AG TANK P4- 3,000 GAL -NOT USED 2005-	38	38	AP-4	2005
	AG TANK P5- 3,000 GAL -NOT USED 2005- TCE	39	39	AP-4	2005
	40/47/0005				



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	Emission unit name	Facility's ID#	DEP#	AP form	Last update
✓	AG TANK P6- 3,000 GAL -NOT USED 2005- MCL	40	40	AP-4	2005
~	AG TANK P7- 3,000 GAL -NOT USED 2005- TCE	41	41	AP-4	2005
/	AG TANK P8- 3,000 GAL -NOT USED 2005- PERC	42	42	AP-4	2005
	AG TANK P9- 3,000 GAL -NOT USED 2005- MCL	43	43	AP-4	2005
	AG TANK P10- 3,000 GAL -NOT USED 2005- PERC	44	44	AP-4	2005
~	AG TANK P11- 3,000 GAL -NOT USED 2005- PERC	45	45	AP-4	2005
	AG TANK P12- 3,000 GAL -NOT USED 2005- PERC	46	46	AP-4	2005
	AG TANK P13- 3,000 GAL -NOT USED 2005- WATER	47	47	AP-4	2005
	AG TANK P14- 3,000 GAL -NOT USED 2005- FREON	48	48	AP-4	2005
/	AG TANK A13- 4,000 GAL #2 OIL-0.3%S	51	51	AP-4	2005
	AG TANK A14- 6,300 GAL #2 OIL-0.3%S	52	52	AP-4	2005
/	AG TANK B1- 6,350 GAL WASTEWATER	53	53	AP-4	2005
~	AG TANK B2- 6,250 GAL WASTEWATER	54	54	AP-4	2005
~	AG TANK B3- 6,250 GAL WASTEWATER	56	56	AP-4	2005
	AG TANK B4- 7,000 GAL WASTEWATER	57	57	AP-4	2005
	AG TANK B5- 6,250 GAL WASTEWATER	58	58	AP-4	2005
	AG TANK B6- 6,250 GAL WASTEWATER	59	59	AP-4	2005
~	AG TANK B7- 6,250 GAL WASTEWATER	60	60	AP-4	2005
~	AG TANK B8- 7,000 GAL WASTEWATER	62	62	AP-4	2005
~	AG TANK B9- 7,000 GAL WASTEWATER	63	63	AP-4	2005
	STACK #1- INCINERATOR #1-VENT-O-MATIC- DOWN 2005	1	1	AP-STAC	2005
~	STACK #2- BOILER #2- HURST #30- #2 OIL 0.3%S	2	2	AP-STAC	2005
	1 STACK BOILER #1-CLEAVER BROOKS- #2 OIL	3	3	AP-STAC	2005
/	THREE DISTILLATION UNITS- NOT USED 2005	4	4	AP-STAC	2005
	2 DRUM CRUSHING LINES-	5	5	AP-STAC	2005
	1 STACK GENERATOR (2)- CUMMINS & CATERPILLAR	7	7	AP-STAC	2005
	1 STACK-2 FURNACES LENNOX	9	9	AP-STAC	2005
~	CUT OFF ROOM - PAINT CAN POUR OFF+CRUSHING	10	10	AP-STAC	2005
	CUT OFF ROOM MERCURY POUR-OFF	11	11	AP-STAC	2005
	• 10/17/2005 Sc	ъ.		Norviow • Page	



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Important:

When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.





Α.	Facility Information			
1.	Facility - the site or works at which the regulated a	activity occurs	: 🛜	
	CLEAN HARBORS OF BRAINTREE	-		
	a. Facility Name			
	1 HILL AVE			
	b. Facility Street Address Line 1			
	c. Facility Street Address Line 2			
	BRAINTREE	MA	0218400	
	d. City/Town	e. State	f. Zip Code)
	7813807100 g. Facility Phone Number	78138071 h. Facility Fa		
	g. racility Friorie Number	n. racility ra	ix Number	
2.	Mailing address: ✓ same address as facility address			
	1 HILL AVE			
	a. Facility Mailing Address / PO Box Line 1			
	b. Facility Mailing Address / PO Box Line 2 BRAINTREE	MA	0218400	000
	c. City/Town	d. State	e. Zip Code	
3. 4.	Facility type – check one: ☐ Utility Private ☐ Tribal ☐ Federal ☐ ORIS Facility Code - for large electrical utilities only:	State L	ocal Govern	nment
5.	ID numbers: 34839 a. DEP Account number / FMF Facility #	1190564 b. Facility AC	Q identifier – SS	SEIS ID number
6.	Location (check box to enter either UTM OR Lat/L		b. Latitud	de/Longitude 70.58040
	c. UTMHorizontal - meters d. UTM Vertical - meters e. UTM Zone Valid Ranges:	f. Latitude 42	2.9° - 41.2°	g. Longitude – West 73.5° - 69.8° Enter positive values only.

location data?



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7.	North American I	ndustry Classification Sy	vstem (NAICS) 6 digits:	
	924110	,	, , ,	
	a.	b.	c.	d.
8.	Facility description needed):	on (what is being produc	ed and how it is being p	roduced at this facility – upda
	CLEAN HARBOI AT THIS FACILI		C. IS A HAZARDOUS W	ASTE TSDF. NO PRODUCT
9.	Facility's normal	hours of operation:		
	06:00 AM	06:30 PM	□ c Contir	nuous - 24 x 7 x 52
	a. Start time	b. End Time	C. Contin	14043 - 24 X 7 X 32
		the facility open?	S MM TT	W WT WF OS
	d. Which days is	the facility open:		W PI PF 13
10.	d. Which days is . Number of emplo	, , –	· ?	w per per 13
10.		, , –		W PEI PEF [3
		oyees: <u>25</u>	ty mailing address (will copy a	
	. Number of emplo	Dyees: 25 □ same address as facili	ty mailing address (will copy a	ddress into fields below)
	. Number of emplo . Facility Owner: Please contact y	oyees: 25 ☐ same address as facilion our DEP Regional Office	ty mailing address (will copy a	ddress into fields below)
	. Number of emplo . Facility Owner: Please contact younged	oyees: 25 □ same address as facilities our DEP Regional Office RS ENVIRONMENTAL	ty mailing address (will copy a	ddress into fields below)
	. Number of emplo . Facility Owner: Please contact y	oyees: 25 same address as facility our DEP Regional Office RS ENVIRONMENTAL tion Name	ty mailing address (will copy a	ddress into fields below)
	. Number of employ. . Facility Owner: Please contact your contact yo	same address as facility our DEP Regional Office RS ENVIRONMENTAL tion Name COMPLIANCE ine 1 (for owner or corporation) R DRIVE	ty mailing address (will copy at a if the ownership of this SERVICES INC	ddress into fields below)
	. Number of emploid. Facility Owner: Please contact your CLEAN HARBO a. Owner or Corporate DIR OF CORP CORP CORP CORP CORP CORP CORP CORP	same address as facility our DEP Regional Office RS ENVIRONMENTAL tion Name COMPLIANCE ine 1 (for owner or corporation) R DRIVE	ty mailing address (will copy at a if the ownership of this SERVICES INC	ddress into fields below)



i. Extension

j. Owner Fax Number

I. Owner TIN (Taxpayer Identification Number - 9 digits)

h. Owner Phone Number

k. Owner E-mail Address

Owner?



2006 Year of Record 1190564 Facility AQ identifier

-			
Facility Information (cont.)			
		•	
DAVID		MEDINA	
1 HILL AVENUE		Contact Las	st Name
b. Mailing Address Line 1			
c. Mailing Address Line 2			00404000
			021840000
			f. Zip Code
			@cleanharbors.com
			3807193
	i. Extension		x Number
	✓ same	as facility cor	ntact name and address
DAVID	oame	MEDINA	domy ddarooo
a. Air emissions contact First Name		Air emission	ns contact Last Name
1 HILL AVENUE			
b. Mailing Address Line 1			
c. Mailing Address Line 2			
			021840000
			f. Zip Code @ cleanharbors.com
			=
			3807193
i. Phone Number	j. Extension		x Number
Preparer			
Identification information for preparer of	this submit	tal:	same as facility air emissions contact name and address
] same as facility contact name and address] same address as facility address
a. Preparer First Name		Preparer La	st Name
b. Mailing Address Line 1			
c. Mailing Address Line 2		D4.4	00404000
			021840000
•			f. Zip Code @ cleanharbors.com
7813807134			3807193
, , , , , , , , , , , , , , , , , , ,			
	DAVID a. Facility Contact First Name 1 HILL AVENUE b. Mailing Address Line 1 c. Mailing Address Line 2 BRAINTREE d. City/Town USA g. Country 7813807134 i. Phone Number Air emissions information contact: DAVID a. Air emissions contact First Name 1 HILL AVENUE b. Mailing Address Line 1 c. Mailing Address Line 2 BRAINTREE d. City/Town USA g. Country 7813807134 i. Phone Number Preparer Identification information for preparer of DAVID a. Preparer First Name 1 HILL AVENUE b. Mailing Address Line 1 c. Mailing Address Line 2 BRAINTREE d. City/Town USA g. Country 7813807134 i. Phone Number	Facility contact information: DAVID a. Facility Contact First Name 1 HILL AVENUE b. Mailing Address Line 2 BRAINTREE d. City/Town USA g. Country 7813807134 i. Phone Number J. Extension Air emissions information contact: DAVID a. Air emissions contact First Name 1 HILL AVENUE b. Mailing Address Line 2 BRAINTREE d. City/Town USA g. Country 7813807134 i. Phone Number J. Extension Freparer Identification information for preparer of this submitted in the sub	Facility contact information: Same address as facility and same address as facility mail DAVID



Bureau of Waste Prevention - Air Quality

BWP AQ AP-SR

Source Registration

2006

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C. Notes and Attachments

1. **Notes**: please include in the space below any additional information that will help DEP understand your submission.

2. Attachments:

Check here to submit attachments to this form (e.g., calculations). For eDEP on-line filers, this will create a new step on your Current Submittals Page where you will attach electronic files to your submittal. For attachments that **cannot** be sent electronically, please list all such attachments I notes above and deliver them to DEP with a paper copy of this form.

D. Certification



Who is a Responsible Official?

"I hereby certify that I have personally examined the foregoing and am familiar with the information contained in this document and all attachments and, that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including possible fines and imprisonment."

A responsible official for the facility must provide the electronic signature. The signature and date are inserted below by eDEP when the package is submitted.

Signed under the pains and penalties of perjury:

David S. Medina

Signature of Responsible Official 03/05/2007

Date

eDEP enters these fields automatically on submission.

Responsible official – complete all fields below:

DAVID

a. Print First Name

MEDINA

b. Print Last Name

FACILITY COMPLIANCE MANAGER

c. Title

7813807134

d. Phone Number

medinad@cleanharbors.com

e. E-mail Address





Bureau of Waste Prevention – Air Quality

BWP AQ AP-TES

Total Emissions Statement & Hazardous Air Pollutant List

2006 Year of record 1190564 Facility AQ identifier

A. Annual Total Emissions Statement

Importa	nt:
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When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.





1. Facility Identifiers:

CLEAN F	HARBOF	RS OF	BRA	ΙN	ITRI	EΕ
----------------	--------	-------	-----	----	------	----

a. Facility name

34839

b. DEP Account number

1190564

c. Facility AQ identifier - SSEIS ID number

- 2. **Total Emissions** This form calculates your facility's actual and potential emissions by adding the emissions you entered in forms for each emission unit. The results are displayed in the table below. You must validate forms for each emission unit before the results below can be complete. To enter HAP emissions, see Section D.
- 3. **Facility-wide Emission Limits** -- Please enter facility-wide annual or short-term emissions limits below, if any. To enter HAP restrictions, see Section D.

	Pollutant:	PM10	PM2.5	SO2	NO2	СО
	Actual for previous year	.0651	.0529	1.7884	1.596	.3175
	eDEP only:	Tons	Tons	Tons	Tons	Tons
	Actual for year of record:	0.0606	0.0338	0.8544	0.7029	0.1630
		Tons	Tons	Tons	Tons	Tons
	Potential emissions at max	15.3917	0.7925	21.7825	120.1420	29.6859
	capacity uncontrolled:	Tons	Tons	Tons	Tons	Tons
	Facility-wide max allowed				17.3	
?	emissions – annual:	Tons	Tons	Tons	Tons	Tons
o g	Facility-wide max allowed					
-vi	emissions – short term:	Pounds	Pounds	Pounds	Pounds	Pounds
Facility-wide	Short term period:					
aci						
	Basis: DEP approval				MBR-95-RES-047	
(number or regulation:					
Ì						
	Pollutant:	VOC	HOC	*Reserved*	NH3	
				1111111111		
	Actual for previous year	.0004	0	0	0	0
	Actual for previous year eDEP only:	.0004 Tons	0 Tons	0 Tons	0 Tons	
	Actual for previous year	.0004 Tons 0.0215	O Tons O	Tons 0	0 Tons 0.0362	Tons
	Actual for previous year eDEP only: Actual for year of record:	.0004 Tons 0.0215 Tons	O Tons O Tons	Tons O Tons	0 Tons 0.0362 Tons	0
	Actual for previous year eDEP only:	.0004 Tons 0.0215 Tons 38.8097	0 Tons 0 Tons 0	0 Tons 0 Tons	Tons 0.0362 Tons 0.2155	Tons Tons
	Actual for previous year eDEP only: Actual for year of record: Potential emissions at max capacity uncontrolled:	.0004 Tons 0.0215 Tons 38.8097 Tons	O Tons O Tons	Tons O Tons	0 Tons 0.0362 Tons	Tons
	Actual for previous year eDEP only: Actual for year of record: Potential emissions at max	.0004 Tons 0.0215 Tons 38.8097 Tons 36.2	0 Tons 0 Tons 0 Tons	0 Tons 0 Tons Tons 0 Tons	Tons 0.0362 Tons 0.2155 Tons	Tons Tons Tons
e inly	Actual for previous year eDEP only: Actual for year of record: Potential emissions at max capacity uncontrolled: Facility-wide max allowed emissions – annual:	.0004 Tons 0.0215 Tons 38.8097 Tons	0 Tons 0 Tons 0	0 Tons 0 Tons	Tons 0.0362 Tons 0.2155	Tons Tons
vide Is only	Actual for previous year eDEP only: Actual for year of record: Potential emissions at max capacity uncontrolled: Facility-wide max allowed	.0004 Tons 0.0215 Tons 38.8097 Tons 36.2 Tons	Tons Tons Tons Tons Tons	Tons Tons Tons Tons	Tons 0.0362 Tons 0.2155 Tons Tons	Tons Tons Tons Tons
ty-wide ions only	Actual for previous year eDEP only: Actual for year of record: Potential emissions at max capacity uncontrolled: Facility-wide max allowed emissions – annual: Facility-wide max allowed emissions – short term:	.0004 Tons 0.0215 Tons 38.8097 Tons 36.2	0 Tons 0 Tons 0 Tons	0 Tons 0 Tons Tons 0 Tons	Tons 0.0362 Tons 0.2155 Tons	Tons Tons Tons
cility-wide rictions only	Actual for previous year eDEP only: Actual for year of record: Potential emissions at max capacity uncontrolled: Facility-wide max allowed emissions – annual: Facility-wide max allowed	.0004 Tons 0.0215 Tons 38.8097 Tons 36.2 Tons	Tons Tons Tons Tons Tons	Tons Tons Tons Tons	Tons 0.0362 Tons 0.2155 Tons Tons	Tons Tons Tons Tons
Facility-wide estrictions only	Actual for previous year eDEP only: Actual for year of record: Potential emissions at max capacity uncontrolled: Facility-wide max allowed emissions – annual: Facility-wide max allowed emissions – short term: Short term period:	.0004 Tons 0.0215 Tons 38.8097 Tons 36.2 Tons Pounds	Tons Tons Tons Tons Tons	Tons Tons Tons Tons	Tons 0.0362 Tons 0.2155 Tons Tons	Tons Tons Tons Tons
Facility-wide estrictions only	Actual for previous year eDEP only: Actual for year of record: Potential emissions at max capacity uncontrolled: Facility-wide max allowed emissions – annual: Facility-wide max allowed emissions – short term:	.0004 Tons 0.0215 Tons 38.8097 Tons 36.2 Tons	Tons Tons Tons Tons Tons	Tons Tons Tons Tons	Tons 0.0362 Tons 0.2155 Tons Tons	Tons Tons Tons Tons



Bureau of Waste Prevention – Air Quality

BWP AQ AP-TES

2006
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Total Emissions Statement & Hazardous Air Pollutant List

A. Annual Total Emissions Statement (co	ont.`	١
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?

4. If you have facility-wide fuel, raw material, or product restrictions, complete the following for each:

	•	, , , , , , , , , , , , , , , , , , ,	, ,	Ŭ
a.				
	DEP approval # (most recent)	Amount of restriction	Restriction units	Per unit time
	Description of fuel, raw materia	al or product restricted		
b.		· 		
	DEP approval # (most recent)	Amount of restriction	Restriction units	Per unit time
	Description of fuel, raw materia	al or product restricted		
C.	-			
	DEP approval # (most recent)	Amount of restriction	Restriction units	Per unit time
	Description of fuel, raw materia	al or product restricted		
В.	Greenhouse Gas	s List		
1.	Please indicate which – by checking the appropr		enhouse gas chemicals are	used and/or emitted
	Use Emitted	Llea	Emitted	

GHG thresholds - what to report and what not to report here

by checking the appropriate box:							
	Use	Emitted Nitrous oxide N2O Sulfur Hexafluoride (SF6)	Use	Emitted Hydrofluorocarbons (HFC's) Perfluorocarbons (PFCs)			

C. Hazardous Air Pollutant (HAP) List

?
HAP thresholds
- what to report
and what not to
report here

1.	Does your facility use any of the Hazardous Air Pollutants regulated under Section 112 of the Cla	ean
	Air Act that are listed below and on the following pages:	

1			ı	l

 $vec{m ec{}}$ yes - indicate which chemicals are used and which are emitted by checking the appropriate boxes $vec{}$ no - skip to section D.

?	
What is a HAP	?

Use	Hazardous Air Pollutants Emitted	CAS#	Use	Hazardous Air Pollutants Emitted	CAS#
	 ✓ Acetaldehyde ✓ Acetamide ✓ Acetonitrile ✓ Acetophenone ✓ 2-Acetylaminofluorene ✓ Acrolein ✓ Acrylamide ✓ Acrylic acid ✓ Acrylonitrile 	75-07-0 60-35-5 75-05-8 98-86-2 53-96-3 107-02-8 79-06-1 79-10-7 107-13-1		□ 4-Aminobiphenyl □ Aniline □ o-Anisidine □ Asbestos □ Benzene □ Benzidine □ Benzotrichloride	107-05-1 92-67-1 62-53-3 90-04-0 1332-21-4 71-43-2 92-87-5 98-07-7 100-44-7



Bureau of Waste Prevention – Air Quality

BWP AQ AP-TES

Total Emissions Statement & Hazardous Air Pollutant List

2006 Year of record 1190564

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C. Hazardous Air Pollutant (HAP) List (cont.)

Use	Emi	tted	CAS#	Use	Emi	tted	CAS#
		Biphenyl	92-52-4			2,4-Dinitrotoluene	121-14-2
		Bis(2-ethylhexyl)phthalate	117-81-7			1,4-Dioxane (1,4-Diethyleneoxide)	123-91-1
		Bis(chloromethyl)ether	542-88-1			1,2-Diphenylhydrazine	123-91-1
		Bromoform	75-25-2			Epichlorohydrin (1-Chloro-2,3-epoxypropane	
		1,3-Butadiene	106-99-0		v V	1,2-Epoxybutane (1,2-Butylene oxide)	106-88-7
		Calcium cyanamide	156-62-7		v V	Ethyl acrylate	140-88-5
		Captan	133-06-2		V	Ethyl benzene	100-41-4
		Carbaryl	63-25-2		v V	Ethyl carbamate (Urethane)	51-79-6
	<u> </u>	Carbon disulfide	75-15-0			Ethyl chloride (Chloroethane)	75-00-3
		Carbon tetrachloride	56-23-5			Ethylene dibromide (1,2-Dibromoethane)	
	<u>~</u>	Carbonyl sulfide	463-58-1		V	Ethylene dichloride (1,2-Dichloroethane)	
		Catechol	120-80-9		V	Ethylene glycol	107-21-1
		Chloramben	133-90-4		V	Ethylene imine (Aziridine)	151-56-4
		Chlordane	57-74-9		V	Ethylene oxide	75-21-8
	V	Chlorine	7782-50-5			Ethylene thiourea	96-45-7
		Chloroacetic acid	79-11-8			Ethylidene dichloride (1,1-Dichloroethane)	
		2-Chloroacetophenone	532-27-4		V	Formaldehyde	50-00-0
		Chlorobenzene	108-90-7		V	Heptachlor	76-44-8
		Chlorobenzilate	510-15-6			Hexachlorobenzene	118-74-1
		Chloroform	67-66-3			Hexachloro-butadiene	87-68-3
		Chloromethyl methyl ether	107-30-2			Hexachlorocyclopentadiene	77-47-4
		Chloroprene	126-99-8		V	Hexachloroethane	67-72-1
		Cresols (mixed isomers)	1319-77-3			Hexamethylene-1,6-diisocyanate	822-06-0
	<u></u>	m-Cresol	108-39-4			Hexamethylphosphoramide	680-31-9
		o-Cresol	95-48-7		V	Hexane	110-54-3
		p-Cresol	106-44-5		v	Hydrazine	302-01-2
		Cumene	98-82-8		V	Hydrochloric acid	7647-01-0
	<u></u>	2,4-D, salts and esters	94-75-7		V	Hydrogen fluoride	7664-39-3
		DDE	72-55-9				7783-06-4
		Diazomethane	334-88-3		V	Hydroquinone	123-31-9
		Dibenzofuran	132-64-9			Isophorone	78-59-1
		1,2-Dibromo-3-chloropropane	96-12-8		V	Lindane	58-89-9
		Dibutylphthalate	84-74-2		V	Maleic anhydride	108-31-6
	<u></u>	1,4-Dichlorobenzene	106-46-7		v	•	67-56-1
		3,3-Dichlorobenzidene	91-94-1		V	Methoxychlor	72-43-5
		Dichloroethylether (Bis(2-chloroethyl)ether)			V	Methyl bromide (Bromomethane)	74-83-9
		1,3-Dichloropropene (1,3-Dichloropropylene)			V	Methyl chloride (Chloromethane)	74-87-3
		Dichlorvos	62-73-7			Methyl chloroform (1,1,1-Trichloroethane)	
	V	Diethanolamine	111-42-2		v		78-93-3
		N,N-Diethyl aniline (N,N-Dimethylaniline)				Methyl hydrazine	60-34-4
		Diethyl sulfate	64-67-5			Methyl iodide (lodomethane)	74-88-4
		3,3-Dimethoxybenzidine	119-90-4		V	Methyl isobutyl ketone (Hexone)	108-10-1
		Dimethyl aminoazobenzene	60-11-7			Methyl isocyanate	624-83-9
		3,3-Dimethyl benzidine	119-93-7		ゼ	Methyl methacrylate	80-62-6
		Dimethyl carbamoyl chloride	79-44-7		<u></u>	Methyl tert-butyl ether	1634-04-4
	<u></u>	Dimethyl formamide (N,N-)	68-12-2		v	4,4-Methylenebis(2-chloroaniline)	101-14-4
		1,1-Dimethyl hydrazine	57-14-7		v	Methylene chloride (Dichloromethane)	75-09-2
		Dimethyl phthalate	131-11-3			Methylene diphenyl diisocyanate(MDI)	101-68-8
		Dimethyl sulfate	77-78-1			4,4-Methylenedianiline	101-77-9
		4,6-Dinitro-o-cresol and salts	534-52-1		v		91-20-3
		2,4-Dinitrophenol	51-28-5			Nitrobenzene	98-95-3
_	_	•	-	_	_		-



Bureau of Waste Prevention - Air Quality

BWP AQ AP-TES

Total Emissions Statement & Hazardous Air Pollutant List

2006 Year of record 1190564

Facility AQ identifier

C. Hazardous Air Pollutant (HAP) List (cont.)

Use	Emitted	CAS#	Use	Em	nitted	CAS#
	☐ 4-Nitrobiphenyl	92-93-3		V	Vinylidene chloride (1,1-Dichloroethylene)	75-35-4
	☐ 4-Nitrophenol	100-02-7		V	Xylene (mixed isomers)	1330-20-7
	☐ 2-Nitropropane	79-46-9		V	m-Xylene	108-38-3
	□ N-Nitrosodimethylamine	62-75-9		V	o-Xylene	95-47-6
	☐ N-Nitrosomorpholine	59-89-2		V	p-Xylene	106-42-3
	☐ N-Nitroso-N-methylurea	684-93-5		V	Antimony	7440-36-0
	☐ Parathion	56-38-2			•	
	☐ Pentachloronitrobenzene (Quintozene)	82-68-8	Arser	nic c	compounds:	
	☐ Pentachlorophenol	87-86-5		V	Arsenic	7440-38-2
	☑ Phenol	108-95-2		v.	Arsine	7784-42-1
	□ p-Phenylenediamine	106-50-3				
	☐ Phosgene	75-44-5	Othe	r Me	etals:	
	☐ Phosphine	7803-51-2		V	Beryllium	7440-41-7
	☐ Phosphorous	7723-14-0			Cadmium	7440-43-9
	☑ Phthalic anhydride	85-44-9			Chromium	7440-47-3
	□ PCBs	1336-36-3		<u>-</u>	Cobalt	7440-48-4
	☐ 1,3- Propane sultone	1120-71-4			Lead	7439-92-1
	☐ beta-Propiolactone	57-57-8			Manganese	7439-96-5
	☐ Propionaldehyde	123-38-6			Mercury	7439-97-6
	☐ Propoxur (Baygon)	114-26-1			Nickel	7440-02-0
	☐ Propylene dichloride (1,2 Dichloropropane				Selenium	7782-49-2
	☐ Propylene oxide	75-56-9				
	☐ 1,2-Propylenimine (2-Methyl aziridine)	75-55-8			Coke oven emissions	
	☑ Quinoline	91-22-5				
	☐ Quinone	106-51-4		V	Cyanide compounds (XCN where X=H of	or anv other
	☑ Styrene	100-42-5			group where a formal dissociation may	•
	☐ Styrene oxide	96-09-3				74-90-8
	2,3,7,8-Tetrachlorodibenzo-p-dioxin	1746-01-6	_		, 131	
	☐ 1,1,2,2-Tetrachloroethane	79-34-5		V	Glycol ethers (include mono- and di- est	ers of ethylene
	☑ Tetrachloroethylene (Perchloroethylene)	127-18-4			glycol, diethylene glycol, and triethylene	•
	☐ Titanium tetrachloride	7550-45-0			(OCH2CH2)n-OR' where $n = 1, 2, or 3$:	0,
	☑ Toluene	108-88-3			less; or R= phenyl or alkyl substituted pl	•
	☐ Toluene-2,4- diamine	95-80-7			alkyl C7 or less; or OR' consisting of car	
		584-84-9	_	_	ester, sulfate, phosphate, nitrate or sulfo	
	□ o-Toluidene	95-53-4		Ш	Fine mineral fibers (includes glass micro	. •
	□ 1,2,4-Trichlorobenzene	120-82-1			wool fibers, rock wool fibers and slag we characterized as "respirable" (fiber diam	•
	☑ 1,1,2-Trichloroethane	79-00-5			micrometers) and possessing an aspect	
	☑ Trichloroethylene	79-01-6			length divided by fiber diameter) > 3)	ratio (iiboi
	2,4,5-Trichlorophenol	95-95-4		V	Polycyclic Organic Matters (POM) (inclu	ides organic
	☑ Triethylamine	121-44-8			compounds with more than one benzen	•
	☐ Trifluralin	1582-09-8			which have a boiling point greater than	•
	2,2,4-Trimethylpentane	540-84-1			C)	
	☑ Vinyl acetate	108-05-4			` ;	ontaneously
	☐ Vinyl bromide	593-60-2			undergoes radioactive decay)	
$\overline{\Box}$	I Vinvl chloride	75-01-4				



operating permit?

to TURA?

Massachusetts Department of Environmental Protection

Bureau of Waste Prevention - Air Quality

BWP AQ AP-TES

Total Emissions Statement & Hazardous Air Pollutant List

2006	
Year of record	
1190564	
Facility AQ identifier	

D. Hazardous Air Pollutant Emissions

D	. Hazardous Air i Oliutarit Elinissions
1.	Does the facility have the potential to emit (PTE) 10 tons of any single listed Hazardous Air Pollutant (HAP)?
	✓ yes □ no
2.	Does the facility have the potential to emit (PTE) a total of 25 tons of any combination of listed Hazardous Air Pollutants (HAPs)?
	✓ yes □ no
3.	Does the facility have a restriction on total HAPS?
	✓ yes □ no
4.	Are you required to report HAP emissions here for any other reason? (e.g., a permit condition)
	☐ yes 🗹 no
5.	If you answered "yes" to any of the questions 1- 4 above you need to report your single largest HAP emissions and your total HAP emissions for the year. You also need to report emissions for any HAP for which you have an emissions restriction. eDEP will generate additional pages needed to enter that data. If you wish to submit additional HAP data, you may add them to the HAP pages that follow or in the attachments and notes sections below.
E	. Notes and Attachments
1.	Notes: Please include in the space below any additional information that will help DEP understand your submission.
2.	Attachments:
	Check here to submit attachments to this form (e.g., calculations). For eDEP on-line filers, this will create a new step on your Current Submittals Page where you will attach electronic files to your submittal. For attachments that cannot be sent electronically, please list all such attachments in the notes field above and deliver them to DEP with a paper copy of this form.



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BWP AQ AP-TES

Total Emissions Statement & Hazardous Air Pollutant List

2006 Year of record 1190564 Facility AQ identifier

F. Hazardous Air Pollutant Emissions



Emissions (in tons/yr): Enter the actual and potential emissions for your largest single HAP (i.e., the HAP your facility emitted the most of for this year of record). Enter emissions for any additional HAPs, and then validate the form. Do not enter Total HAP emissions here - eDEP will present another form for Total HAPs after you validate this form.

Max Allowable Emissions (in tons/yr): Enter only restrictions (limits) that apply to the entire facility. If there are no such restrictions, leave blank.

(?)		HAP	HAP	HAP
Where do you enter TOTAL	HAP name:	METHANOL		
HAP emissions?	CAS # for individual HAPs if applicable:	67561		
	Actual for previous year eDEP only:	Tons	Tons	Tons
	Actual for year of record:	0.2700 Tons	Tons	Tons
	Potential emissions at max capacity uncontrolled:	12.8000 Tons	Tons	Tons
	Maximum allowed	9.5000		
wide	emissions – annual: Maximum allowed	Tons 2.5000	Tons	Tons
er facility-wide limits only	emissions – short term:	Pounds MONTH	Pounds	Pounds
ter fac	Short term period:		_	
?	Basis for max allowed – DEP approval # or regulation:	MBR-95-RES-047	_	
		НАР	НАР	НАР
	HAP name:			
	CAS # for individual HAPs if applicable:			
	Actual for previous year eDEP only:	Tons	Tons	Tons
	Actual for year of record:	Tons	Tons	Tons
	Potential emissions at max capacity uncontrolled:	Tons	Tons	Tons
g e	Maximum allowed emissions – annual:	Tons	Tons	Tons
er facility-wide limits only	Maximum allowed emissions – short term:	Pounds	Pounds	Pounds
er faci	Short term period:		_	
?	Basis for max allowed – DEP approval # or regulation:			

Do you have emissions to report for individual HAPs in addition to those above? \square yes \checkmark no

eDEP online filers: if you check yes, the system will provide you with an additional blank emissions table after you validate this form.



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BWP AQ AP-TES

Total Emissions Statement & Hazardous Air Pollutant List

2006 Year of record 1190564 Facility AQ identifier

G. Total Hazardous Air Pollutant (HAP) Emissions

1. Total HAP Emissions – Enter your TOTAL HAP emissions for the facility below. Please enter any facility-wide restrictions on TOTAL HAPs below as well:

Facility-Wide Total HAP Emissions

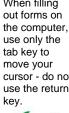
a. Actual for previous year eDEP only:		
	Tons	
b. Actual for year of record:	1.1000	
	Tons	
c. Potential at max capacity uncontrolled:	53.6000	
	Tons	
d. Max allowed emissions – annual:	18.6000	Facility-wide restriction only
	Tons	-
e. Max allowed emissions – short term:		Facility-wide restriction only
	Pounds	-
f. Short term period:		
g. Basis for max allowed emissions:	MBR-95-RES-047	DEP approval # or regulation
	 b. Actual for year of record: c. Potential at max capacity uncontrolled: d. Max allowed emissions – annual: e. Max allowed emissions – short term: f. Short term period: 	b. Actual for year of record: c. Potential at max capacity uncontrolled: d. Max allowed emissions – annual: e. Max allowed emissions – short term: f. Short term period: Tons 1.1000 Tons 18.6000 Tons Pounds



Emission Unit - Fuel Utilization Equipment

2006 Year of record 64 DEP EU# (old Point #) 1190564 Facility AQ identifier

lm W ou the us tal m cu us







Important: When filling out forms on	Α.	Equipment Description				
the computer, use only the	1.	Facility identifiers:				
tab key to move your		CLEAN HARBORS OF BRAINTREE				
cursor - do not		a. Facility name 34839	1190564			
use the return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number			
S tab	2.	Emission unit identifiers:				
		2 LENNOX FURNACES SR 20Q5-140/154 0.246 N	MMBTU/HR			
return		a. Facility's choice of emission unit name – edit as needed				
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # – old point #			
		b. I acinty 3 emission unit number / code – eart as needed	C. DET GITISSIONS WITH # — OIG POINT #			
		d. ORIS ID # - for large electrical utilities only	e. Combined Units – enter number of individual units			
	3.	DEP approvals – leave blank if not applicable:				
		a. Most recent approval number	b. DEP approval date (mm/dd/yyyy)			
	4.	Is this unit exempt under 310 CMR 7.02 Plan Appro	vals? 🗹 yes 🗌 no			
	5.	If exempt from Plan Approval, indicate reason why ((e.g., cite a specific DEP regulation):			
		BELOW THRESHOLDS IN 310 CMR 7.02 (2)(B) 7 AND 15				
How to		Reason for exemption				
delete a unit?	6.	Emission unit installation date and decommission date:				
(click ?-icon)		6/1/1995				
		a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable Complete only if the unit was shutdown permanently or			
?	7.	Emission unit replacement:	replaced since the last report.			
		a. Is this unit replacing another emission unit?				
		✓ no	nber and name for the unit being replaced below:			
		b. DEP's emission unit number and facility unit name				
	8.	Additional state reporting requirements:				
		a. Are there other routine air quality reporting requir	ements for this emissions unit?			
		yes - specify reporting frequency below	✓ no – skip to question 8c			
		b. Reporting frequency - check all that apply:				
		☐ 1. Monthly ☐ 2. Quarterly ☐ 3. Semi-annua (include Operating Permit and Plan Approval reports, but not exc	_			
		c. Is this unit subject to (check all that apply):				
		□ NESHAP □ NSPS □ MACT				



Bureau of Waste Prevention - Air Quality



9.

BECKETT

6/1/1995

g. Burner manufacturer

i. Burner installation date (mm/dd/yyyy)

on combined units?



	,		64
BWP AQ AP-1			DEP EU# (old Point #)
·	E anni in ann ann t		1190564
mission Unit – Fuel Utilization	Equipment		Facility AQ identifier
. Equipment Description	(cont.)		
Equipment:			
а. Туре			
☐ boiler 🗹 furnace ☐ engine	e 🗌 other:		
	<u> </u>	Describe "other" equipment	t type
LENNOX		SR20Q5-140	
b. Manufacturer		c. Model number	
1		1	
d. Max input rating MMBtu/hr (enter "0" if r	not applicable)	e. Number of burners (ente	r "0" if not applicable)
f. Type of burner – check one:	☐ rotary	✓ mech. atomizer	steam atomizer
	air atomize	r 🗌 traveling grate	☐ hand fired

10. Hours o	f operation fo	or the emiss	sion unit: a.	check if continu	uously operated – 24 x 7 x 52			
24			7		12			
b. Numbe	b. Number of hours per day c. Number of days per week d. Number of weeks per year							
e. Perce	ent of total an	nual opera	tion that occurs	in each calendar o	quarter:			
100	0	0	0	Sum of Q1+Q2-	+Q3+Q4 must = 100%,			
Q1	Q2	Q3	Q4	or 0% if the unit	t was not operated for any quarter			
11. Ozone s	season opera	ation sched	ule – May 1 thro	ough September 30):			
0			0		0			
a. Ozone	season hours pe	er day	b. Ozone seas	on days per week	c. Weeks operated in ozone season			

other:

12. Emission release point – select one:



Engines click here for instructions:

"other" burner type

h. Burner model number

AFG



2006

Year of record

Non-Stack Release Points:	
☐ fugitive ☐ horizontal vent ☐ engine exh. ☐ downward facir ☐ vertical stack/vent less than 10ft	

Physical Stacks: ✓ vertical stack vertical with rain cap/sleeve

If Non-Stack release point, skip to question 14.

13. Link this unit to a physical stack (if applicable) – pick from the list below:

9 1 STACK-2 FURNACES LENNOX

Facility's stack identifier from STACK form – to change stack name use STACK form

If the stack for this unit is not listed, save and exit this form now and complete a new Stack form before completing to this form.



Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

A. Equipment Description (cont.)

Year of record
64
DEP EU# (old Point #)
1190564
Facility AQ identifier

14. Is there a pollution control device	Check here if you need to report more than 3 air pollution control devices on	
yes – answer a through i	✓ no – skip to question 15	this unit. eDEP will add another page of control devices after this form.
Air pollution control device 1	Air pollution control device 2	Air pollution control device 3
a. Type	Туре	Туре
b. Manufacturer	Manufacturer	Manufacturer
c. Model number	Model number	Model number
d. Facility's ID for this device	Facility's ID for this device	Facility's ID for this device
e. Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)
f. DEP approval # (most recent)	DEP approval # (most recent)	DEP approval # (most recent)
g. DEP approval date (mm/dd/yyyy)	DEP approval date (mm/dd/yyyy)	DEP approval date (mm/dd/yyyy)
h. Decommission date (mm/dd/yyyy)	Decommission date (mm/dd/yyyy)	Decommission date (mm/dd/yyyy)
	□ yes – answer a through i Air pollution control device 1 a. Type b. Manufacturer c. Model number d. Facility's ID for this device e. Installation date (mm/dd/yyyy) f. DEP approval # (most recent) g. DEP approval date (mm/dd/yyyy)	Air pollution control device 1 a. Type b. Manufacturer c. Model number d. Facility's ID for this device e. Installation date (mm/dd/yyyy) f. DEP approval # (most recent) g. DEP approval date (mm/dd/yyyy) Air pollution control device 2 Type Manufacturer Model number Facility's ID for this device Installation date (mm/dd/yyyy) DEP approval # (most recent) DEP approval date (mm/dd/yyyy)

i. Percent overall efficiency - enter for all pollutants that the device was designed to control: PM 10 % Overall eff. % Overall eff. % Overall eff. PM 2.5 % Overall eff. % Overall eff. % Overall eff. SO₂ % Overall eff. % Overall eff. % Overall eff. CO % Overall eff. % Overall eff. % Overall eff. VOC % Overall eff. % Overall eff. % Overall eff. NO₂ % Overall eff. % Overall eff. % Overall eff. NH3 % Overall eff. % Overall eff. % Overall eff. HOC % Overall eff. % Overall eff. % Overall eff. HYC % Overall eff. % Overall eff. % Overall eff. Hg % Overall eff. % Overall eff. % Overall eff. Pb % Overall eff. % Overall eff. % Overall eff. Other % Overall eff. % Overall eff. % Overall eff. Specify "Other" Specify "Other" Specify "Other"



Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

A. Equipment Description (cont.)

2006
Year of record
64
DEP EU# (old Point #)
1190564
Facility AQ identifier

15.	Is there monitoring equipment	on this	unit d	or its	related	control	devices?

How to delete a monitor?	☐ yes – answer a t	hrough I 🗹 no – skip to s	ection B	
		Monitor 1	Monitor 2	Monitor 3
	a. Monitor type:	check only one: CEM Opacity other - describe:	check only one: CEM Opacity other - describe:	check only one: CEM Opacity other - describe:
Do not leave blank – if unknown write 'unknown' or estimate	b. Manufacturer:	Describe "other"	Describe "other"	Describe "other"
	c. Model number:			
	d. Monitor ID #: e. Installation date:	Facility's Designation	Facility's Designation	Facility's Designation
· ·	f. DEP approval #:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
Leave f, g, h blank if not	g. DEP approval date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
applicable.	h. Decommission date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
	i. Recorder ?	yes no	yes no	yes no
	j. Audible alarm ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
	k. Data system ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
	I. Monitored pollutants (check all that apply):	PM 10 PM 2.5 SO2 CO VOC NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity other – describe:	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe:	 □ PM 10 □ PM 2.5 □ SO2 □ CO □ VOC □ NO2 □ NH3 □ Mercury □ Oxygen □ CO2 □ H2S □ HCL □ Opacity □ other – describe:

Describe "other"

Describe "other"

Describe "other"



BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

2006 Year of record 64 DEP EU# (old Point #) 1190564 Facility AQ identifier

B. Fuels and Emissions

		E al Nava / Observatoristics	FURNACES #1(2)-LENNOX SR 20Q5 #2	0
	1.	Fuel Name / Characteristics:	Fuel name	
		Number of fuels for this unit (previous records): 1	1 DED E vi i ii	
?		_	DEP Fuel #	
How does eDEF nandle multiple uels?	0	Add a NEW fuel: Check the box if you need to add a fuel that you did not report on previously (eDEP will add a blank Sect. B form to your package).	Delete this fuel: check box if you stopped using this fuel in this unit permanently. You must still report for this year of record even if amount is "0" – the fuel will be removed from the unit in the next report cycle.	r
		When to NOT check this box ?		
		a. Source Classification Code (SCC)	10500105	
		(see instructions):	SC Code (call DEP if SC code will not validate) INDUS.SPACE HEAT-DISTILLATE OIL	
			SCC Code Description – filled by eDEP	
		b. Type of fuel – check one:	✓ no.2 □ no.4 □ no.6	
			☐ diesel ☐ coal ☐ natural gas	
		Note: The option to have eDEP calculate your emissions is not available if your fuel type is "other".	☐ jet fuel ☐ other - describe:	
			Describe "other" fuel	
		c. Sulfur content for oils and coal $(0 - 2.2)$:	.138	
		d Ask soutset for sile and soul (0, 40):	Percent by weight 0	
Note for e:		d. Ash content for oils and coal (0 -10):	Percent by weight	
Enter the			1 Gloom by Holgin	
Maximum Fuel Rate at				
which the		e. Maximum hourly fuel rate for all firing burners:	.0044 1000 GALLONS	
unit can burn fuel (its			Amount Units per hour	
absolute			Enter "0" if unit decommissioned prior to this Year of Reco	rd.
uncontrolled design				
capacity). Do		f. Do you have fuel or usage restrictions?	yes on - skip to question 2	
not enter the normal		g. DEP approval number for restrictions:		
operation			Most recent for this fuel	
rate nor any restricted				
(allowable)		h. Americal constrainting (constraint on because)		
rate.		h. Annual use restriction (amount or hours): For this fuel	Quantity Units	
		i. Short term use restriction (amount or hours):	Quantity	
		For this fuel	Quantity Units	
			Per: month week day hour	
			CAUTION: check your amount vs.units	
	_	Annual was no	8.765 1000 GALLONS	
	2.	Annual usage:	a. Amount – year of record b. Units	
		Enter "0" if not used in the year of record	1 1000 GALLONS	
			c. Total annual usage for prior year of record - eDEP only	t .



Bureau of Waste Prevention - Air Quality

Emission Unit - Fuel Utilization Equipment

B. Fuels and Emissions (cont.)

3. Total emissions for this fuel only in tons per year:

2006 Year of record 64 DEP EU# (old Point #) 1190564 Facility AQ identifier



Pollutant:	□ PM10	☐ PM2.5	☐ SO2	□ NO2
Actual for previous year	.0004		.0215	
eDEP only	Tons	Tons	Tons	Tons
	0.01	0.0036	0.1867	0.09
Actual for year of record:	Tons	Tons	Tons	Tons
Potential emissions at max	0.02	0.0080	0.41	0.19
capacity uncontrolled:	Tons	Tons	Tons	Tons
Emission factor:	2.46	0.6150	143.600000	0
in pounds per unit:	HOUR	HOUR	HOUR	HOUR
Maximum allowed emissions –				
annual:	Tons	Tons	Tons	Tons
Maximum allowed emissions -		<u> </u>		
short term:	Pounds	Pounds	Pounds	Pounds
Short term period (or MMBtu):			_	
Basis – DEP approval number or regulation:			_	

Calculations: The form will automatically calculate the actual and potential emissions UNLESS you check a box to manually

enter emissions for each specific pollutant. Click the "?" icon for information to help you decide how to use this feature:

other: TOTAL SUSPENDED PARTICULATES Pollutant: □ co □ VOC ☐ NH3 specify .0004 0 Actual for previous year Tons Tons Tons Tons eDEP only: 0.02 0.0015 0.0035 0.0100 Actual for year of record: Tons Tons Tons Tons 0.04 0.0032 0.0063 0.0200 Potential emissions at max Tons Tons capacity uncontrolled: Tons Tons 0.000000 0.700000 0.80 Emission factor: **HOUR HOUR HOUR HOUR** in pounds per unit: Maximum allowed emissions annual: Tons Tons Tons Tons For this fuel only Maximum allowed emissions -Pounds Pounds short term: **Pounds Pounds** Short term period (or MMBtu): Basis - DEP approval number or regulation:



Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

В.	Fuels	and	Emissions	(cont.)
				()

2006
Year of record
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DEP EU# (old Point #)
1190564
Facility AQ identifier

4.	Ozone season emissions – May 1 through Se	ptember 30:
	0	0
	a. Typical day VOC emissions – pounds per day	b. Typical day NOx emissions –pounds per day
	check to enter your own values	check to enter your own values

C. Notes and Attachments

1. **Notes**: please include in the space below any additional information that will help DEP understand your submission.

2. Attachments:

Check here to submit attachments to this form (e.g., calculations) - add a note in the field above
indicating what is attached. For eDEP on-line filers, this will create a new step on your Current
Submittal Page where you can attach electronic files to your submittal. Please list attachments
that cannot be sent electronically in the notes field above and deliver them to DEP with a paper
copy of this form.



Bureau of Waste Prevention - Air Quality

Emission Unit - Fuel Utilization Equipment

2006 Year of record 55 DEP EU# (old Point #) 1190564

Facility AQ identifier

Important: When filling out forms on the computer, use only the tab key to move your cursor - do not use the return







How to delete a unit? (click ?-icon)

A. Equipment Description

1.	Facility identifiers:	
	CLEAN HARBORS OF BRAINTREE	
	a. Facility name 34839	1190564
	b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
2.	Emission unit identifiers:	
	GENERATOR #1-CATERPILLAR 558.5 KW #2 OIL	0.3%S
	a. Facility's choice of emission unit name – edit as needed	
	b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # – old point #
	b. Facility's emission unit number / code – edit as needed	C. DEF emissions unit # – old point #
	d. ORIS ID # - for large electrical utilities only	e. Combined Units – enter number of individual units
3.	DEP approvals – leave blank if not applicable:	
	MBR-89-COM-31	5/4/1989
	a. Most recent approval number	b. DEP approval date (mm/dd/yyyy)
4.	Is this unit exempt under 310 CMR 7.02 Plan Appro	vals ? 🗌 yes 🗹 no
5.	If exempt from Plan Approval, indicate reason why (e a _cite a specific DEP regulation):
<i>,</i> .	ii oxomprii om riam xipprovai, indicato rodocii wiiy (o.g., one a opcome BEI Togulation).
	Reason for exemption	
3.	Emission unit installation date and decommission da	ate:
	5/4/1989	
	a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
7.	Emission unit replacement:	Complete only if the unit was shutdown permanently or replaced since the last report.
	a. Is this unit replacing another emission unit?	
	✓ no yes – enter DEP's emission unit num	nber and name for the unit being replaced below:
	yes — enter DET 3 emission unit hum	iber and mame for the unit being replaced below.
	b. DEP's emission unit number and facility unit name	
	·	
3.	Additional state reporting requirements:	
	a. Are there other routine air quality reporting require	ements for this emissions unit?
	yes - specify reporting frequency below	✓ no – skip to question 8c
	b. Reporting frequency - check all that apply:	
	☐ 1. Monthly ☐ 2. Quarterly ☐ 3. Semi-annua	I ☐ 4. Annual ☐ 5. RES
	(include Operating Permit and Plan Approval reports, but not exce	eedance reporting)
	c. Is this unit subject to (check all that apply):	
	☐ NESHAP ☐ NSPS ☐ MACT	



7 1 STACK GENERATOR (2)- CUMMINS & CATERPILLAR Facility's stack identifier from STACK form – to change stack name use STACK form

Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

A. Equipment Description (cont.)



How to report on combined units?



9.	Equipment:			
	a. Type			
	☐ boiler ☐ furnace 🗹 engine	other:		
			Describe "other" equipment	type
	CATERPILLAR		3412DIT	
	b. Manufacturer		c. Model number	
	5.348 d. Max input rating MMBtu/hr (enter "0" if no	ot applicable)	e. Number of burners (enter	"O" if not applicable)
	u. Max input rating Minibita/iii (enter 0 ii ii	?	e. Number of burners (enter	o ii not applicable)
	f. Type of burner – check one:	☐ rotary	✓ mech. atomizer	steam atomizer
		air atomizer	☐ traveling grate	hand fired
		other:		
	CATERPILLR		"other" burner type N/A	
	g. Burner manufacturer 6/1/1989		h. Burner model number	
	i. Burner installation date (mm/dd/yyyy)			
	, , , , , , , , , , , , , , , , , , ,			
10.	Hours of operation for the emission	n unit: a.	heck if continuously ope	erated – 24 x 7 x 52
10.	1	1	12	
10.	1 b. Number of hours per day	1 c. Number of days pe	er week 12 d. Nu	erated – 24 x 7 x 52
10.	1	1 c. Number of days pe	er week 12 d. Nu	
10.	b. Number of hours per day e. Percent of total annual operation 31 23 23	c. Number of days pen that occurs in ea	er week 12 d. Nu ach calendar quarter: Sum of Q1+Q2+Q3+Q4 mu	mber of weeks per year st = 100%,
10.	b. Number of hours per day e. Percent of total annual operation	1 c. Number of days pen that occurs in ea	er week 12 d. Nu ach calendar quarter:	mber of weeks per year st = 100%,
	b. Number of hours per day e. Percent of total annual operation 31 23 23 23 23 23 23	1 c. Number of days per that occurs in ea 23 Q4	er week d. Nu ach calendar quarter: Sum of Q1+Q2+Q3+Q4 mu or 0% if the unit was not open	mber of weeks per year st = 100%,
		1 c. Number of days pen that occurs in ear 23 Q4 - May 1 through	er week d. Nu ach calendar quarter: Sum of Q1+Q2+Q3+Q4 mu or 0% if the unit was not open	mber of weeks per year st = 100%,
	$\frac{1}{\text{b. Number of hours per day}}$ e. Percent of total annual operation $\frac{31}{Q1} \qquad \frac{23}{Q2} \qquad \frac{23}{Q3}$ Ozone season operation schedule 1	1 c. Number of days per that occurs in ea 23 Q4 May 1 through	ach calendar quarter: Sum of Q1+Q2+Q3+Q4 mu or 0% if the unit was not open. September 30:	mber of weeks per year st = 100%, erated for any quarter
		1 c. Number of days pen that occurs in ear 23 Q4 - May 1 through	ach calendar quarter: Sum of Q1+Q2+Q3+Q4 mu or 0% if the unit was not open. September 30:	mber of weeks per year st = 100%,
	$\frac{1}{\text{b. Number of hours per day}}$ e. Percent of total annual operation $\frac{31}{Q1} \qquad \frac{23}{Q2} \qquad \frac{23}{Q3}$ Ozone season operation schedule 1	1 c. Number of days per that occurs in ea 23 Q4 May 1 through	ach calendar quarter: Sum of Q1+Q2+Q3+Q4 mu or 0% if the unit was not open. September 30:	mber of weeks per year st = 100%, erated for any quarter
11.	$\frac{1}{\text{b. Number of hours per day}}$ e. Percent of total annual operation $\frac{31}{Q1} \qquad \frac{23}{Q2} \qquad \frac{23}{Q3}$ Ozone season operation schedule 1	1 c. Number of days per n that occurs in ea 23 Q4 — May 1 through 1 b. Ozone season day	ach calendar quarter: Sum of Q1+Q2+Q3+Q4 mu or 0% if the unit was not open. September 30:	mber of weeks per year st = 100%, erated for any quarter eks operated in ozone season
11.	b. Number of hours per day e. Percent of total annual operation 31	1 c. Number of days per on that occurs in each of the control of t	er week ach calendar quarter: Sum of Q1+Q2+Q3+Q4 mu or 0% if the unit was not operated by the content of the	mber of weeks per year st = 100%, erated for any quarter eks operated in ozone season
11.	b. Number of hours per day e. Percent of total annual operation 31	1 c. Number of days per on that occurs in early and the second of the se	er week ach calendar quarter: Sum of Q1+Q2+Q3+Q4 mu or 0% if the unit was not open. September 30: ys per week 5 c. Week	mber of weeks per year st = 100%, erated for any quarter eks operated in ozone season
11.	1 b. Number of hours per day e. Percent of total annual operation 31	1 c. Number of days per of that occurs in each of that occurs in each of that occurs in each of the control of	er week d. Nu each calendar quarter: Sum of Q1+Q2+Q3+Q4 mu or 0% if the unit was not ope September 30: ys per week gines click here for instruction Physical Stacks:	mber of weeks per year st = 100%, erated for any quarter eks operated in ozone season s: ?
11.	b. Number of hours per day e. Percent of total annual operation 31	1 c. Number of days per of that occurs in each of that occurs in each of that occurs in each of the control of	ach calendar quarter: Sum of Q1+Q2+Q3+Q4 mu or 0% if the unit was not open September 30: ys per week Signer week The control of the unit was not open september 30: ys per week The control of the unit was not open september 30: The control of the unit was not open september 30: The control of the unit was not open september 30: The control of the unit was not open september 30: The control of the unit was not open september 30: Sum of Q1+Q2+Q3+Q4 mu or 0% if the unit was not open september 30: The control of the unit was	mber of weeks per year st = 100%, erated for any quarter eks operated in ozone season s: ?
11.	1 b. Number of hours per day e. Percent of total annual operation 31	1 c. Number of days per n that occurs in ear 23 Q4 — May 1 through b. Ozone season day e: Property of the cing vent of the content of the co	ach calendar quarter: Sum of Q1+Q2+Q3+Q4 mu or 0% if the unit was not open September 30: ys per week Signer week The control of the unit was not open september 30: ys per week The control of the unit was not open september 30: The control of the unit was not open september 30: The control of the unit was not open september 30: The control of the unit was not open september 30: The control of the unit was not open september 30: Sum of Q1+Q2+Q3+Q4 mu or 0% if the unit was not open september 30: The control of the unit was	mber of weeks per year st = 100%, erated for any quarter eks operated in ozone season s: ?

If the stack for this unit is not listed, save and exit this form now and complete a new Stack form before completing to this form.

2006

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Year of record

1190564

DEP EU# (old Point #)

Facility AQ identifier



Massachusetts Department of Environmental Protection

Bureau of Waste Prevention - Air Quality

Emission Unit - Fuel Utilization Equipment

A. Equipment Description (cont.)

2006 Year of record 55 DEP EU# (old Point #) 1190564 Facility AQ identifier

2	14.	Is there a pollution control device	Check here if you need to report more than 3 air pollution control devices on	
How to delete a control ?		yes – answer a through i	✓ no – skip to question 15	this unit. eDEP will add another page of control devices after this form.
		Air pollution control device 1	Air pollution control device 2	Air pollution control device 3
	-	a. Type	Time	Time
		и. туро	Туре	Туре
Do not leave blank – if unknown		b. Manufacturer	Manufacturer	Manufacturer
write 'unknown' or		c. Model number	Model number	Model number
estimate	9	d. Facility's ID for this device	Facility's ID for this device	Facility's ID for this device
	U	e. Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)
Leave f, g, h		f. DEP approval # (most recent)	DEP approval # (most recent)	DEP approval # (most recent)
blank if not applicable.		g. DEP approval date (mm/dd/yyyy)	DEP approval date (mm/dd/yyyy)	DEP approval date (mm/dd/yyyy)
		h Decommission date (mm/dd/www)	Decommission date (mm/dd/www)	Decommission date (mm/dd/www)

 i. Percent overall efficiency - enter for all pollutants that the device was designed to control: PM 10 % Overall eff. % Overall eff. % Overall eff. PM 2.5 % Overall eff. % Overall eff. % Overall eff. SO₂ % Overall eff. % Overall eff. % Overall eff. CO % Overall eff. % Overall eff. % Overall eff. VOC % Overall eff. % Overall eff. % Overall eff. NO₂ % Overall eff. % Overall eff. % Overall eff. NH3 % Overall eff. % Overall eff. % Overall eff. HOC % Overall eff. % Overall eff. % Overall eff. HYC % Overall eff. % Overall eff. % Overall eff. Hg % Overall eff. % Overall eff. % Overall eff. Pb % Overall eff. % Overall eff. % Overall eff. Other % Overall eff. % Overall eff. % Overall eff.

Specify "Other"

Specify "Other"

Specify "Other"



Bureau of Waste Prevention - Air Quality

Emission Unit - Fuel Utilization Equipment

A. Equipment Description (cont.)

Year of record 55 DEP EU# (old Point #) 1190564 Facility AQ identifier

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15. Is	s there monitoring	equipment o	n this unit	or its	related	control	devices?
--------	--------------------	-------------	-------------	--------	---------	---------	----------

a monitor?	∐ yes – answer a	through I o – skip to	section B	
		Monitor 1	Monitor 2	Monitor 3
	a. Monitor type:	check only one: CEM Opacity other - describe:	check only one: CEM Opacity other - describe:	check only one: CEM Opacity other - describe:
Do not leave blank – if unknown write 'unknown' or estimate	b. Manufacturer: c. Model number:	Describe "other"	Describe "other"	Describe "other"
	d. Monitor ID #: e. Installation date: f. DEP approval #:	Facility's Designation (mm/dd/yyyy)	Facility's Designation (mm/dd/yyyy)	Facility's Designation (mm/dd/yyyy)
Leave f, g, h blank if not applicable.	g. DEP approval date: h. Decommission date: i. Recorder ? j. Audible alarm ? k. Data system ? l. Monitored pollutants (check all that apply):	(mm/dd/yyyy) yes no yes no yes no PM 10 PM 2.5 SO2 CO VOC	(mm/dd/yyyy) (mm/dd/yyyy) yes no yes no pe no PM 10 PM 2.5 SO2 CO VOC	(mm/dd/yyyy) (mm/dd/yyyy) yes no yes no pe no PM 10 PM 2.5 SO2 CO VOC
		NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity other – describe:	NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity other – describe:	NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity other – describe:



BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2006 Year of record 55 DEP EU# (old Point #) 1190564 Facility AQ identifier

B. Fuels and Emissions

		E al Name / Observatoristics	GENERATOR #1-CATERPILLAR 558.5 KW #
	1.	Fuel Name / Characteristics:	Fuel name
		Number of fuels for this unit (previous records): 1	DEP Fuel #
low does eDEF andle multiple uels?	o	Add a NEW fuel: Check the box if you need to add a fuel that you did not report on previously (eDEP will add a blank Sect. B form to your package).	Delete this fuel: check box if you stopped using this fuel in this unit permanently. You must still report for this year of record even if amount is "0" – the fuel will be removed from the unit in the next report cycle.
		When to NOT check this box ?	
		a. Source Classification Code (SCC) (see instructions):	SC Code (call DEP if SC code will not validate) IC ENGINE- RECIP - #2 DIESEL OIL
			SCC Code Description – filled by eDEP
		b. Type of fuel – check one:	☐ no.2 ☐ no.4 ☐ no.6
			☑ diesel 🗌 coal 🔲 natural gas
		Note: The option to have eDEP calculate your emissions is not available if your fuel type is "other".	☐ jet fuel ☐ other - describe:
		c. Sulfur content for oils and coal (0 – 2.2):	Describe "other" fuel .0401
		d. Ash content for oils and coal (0 -10):	Percent by weight 0.000
Note for e: Enter the Maximum Fuel Rate at which the unit can burn fuel (its absolute		e. Maximum hourly fuel rate for all firing burners:	Percent by weight .038 Amount Inits per hour Enter "0" if unit decommissioned prior to this Year of Record.
uncontrolled design capacity). Do		f. Do you have fuel or usage restrictions?	yes no - skip to question 2
not enter the normal operation rate nor any		g. DEP approval number for restrictions:	MBR-89-COM-31 Most recent for this fuel
restricted (allowable) rate.		h. Annual use restriction (amount or hours): For this fuel	300 HOUR Units
		 i. Short term use restriction (amount or hours): For this fuel 	24HOURQuantityUnits
			Per: ☐ month ☐ week day ☐ hour CAUTION: check your amount vs.units
	2.	Annual usage:	0.4941000 GALLONSa. Amount – year of recordb. Units
		Enter "0" if not used in the year of record	1 1000 GALLONS c. Total annual usage for prior year of record – eDEP only



Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

B. Fuels and Emissions (cont.)

3. Total emissions for this fuel only in tons per year:

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Facility AQ identifier



☐ NO2 Pollutant: ☐ PM10 ☐ PM2.5 ☐ SO2 .0213 .0213 .0199 .302 Actual for previous year Tons Tons Tons Tons eDEP only: 0.01 0.01 0.0029 0.1492 ctual for year of record: Tons Tons Tons Tons 7.0737 0.01 1.98 101.40 otential emissions at max Tons Tons capacity uncontrolled: Tons Tons 42.5 39.700000 42.5 604 Emission factor: **GALLONS GALLONS GALLONS GALLONS** in pounds per unit: Maximum allowed emissions – annual: Tons Tons Tons Tons For this fuel only Maximum allowed emissions short term: Pounds **Pounds** Pounds Pounds Short term period (or MMBtu): MBR-89-COM-31 MBR-89-COM-31 MBR-89-COM-31 MBR-89-COM-31 Basis - DEP approval number or regulation:

Calculations: The form will automatically calculate the actual and potential emissions UNLESS you check a box to manually

enter emissions for each specific pollutant. Click the "?" icon for information to help you decide how to use this feature:

other:

				TOTAL SUSPE	NDED PARTICULATES
	Pollutant:	□ co	□ voc	☐ NH3	specify
	Actual for previous year	.065			0
	eDEP only:	Tons	Tons	Tons	Tons
		0.03	0.01	0.01	0.0100
	Actual for year of record:	Tons	Tons	Tons	Tons
	Potential emissions at max	21.6372	7.75	0.01	7.0700
	capacity uncontrolled:	Tons	Tons	Tons	Tons
	Emission factor:	130	3.300000	3.300000	42.5
	in pounds per unit:	GALLONS	GALLONS	GALLONS	GALLONS
	Maximum allowed emissions –				
<u>~</u>	annual:	Tons	Tons	Tons	Tons
For this fuel only	Maximum allowed emissions – short term:	Pounds	Pounds	Pounds	Pounds
this	Short term period (or MMBtu):				
For	Basis – DEP approval number or regulation:	MBR-89-COM-31	MBR-89-COM-31	MBR-89-COM-31	MBR-89-COM-31



Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

_			_	
В.	Fuels a	and Emis	sions	(cont.)

2006
Year of record
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1190564
Facility AQ identifier

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4.	Ozone season	emissions – N	/lay 1 through	September 30:
----	--------------	---------------	----------------	---------------

0.060.75a. Typical day VOC emissions – pounds per dayb. Typ

b. Typical day NOx emissions –pounds per day

check to enter your own values

NOTE: The form will estimate the ozone season emissions for you. However, you may enter your own values by checking the boxes above.

C. Notes and Attachments

check to enter your own values

1. **Notes**: please include in the space below any additional information that will help DEP understand your submission.

2.	Attachments	٠.

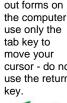
Check here to submit attachments to this form (e.g., calculations) - add a note in the field above
indicating what is attached. For eDEP on-line filers, this will create a new step on your Current
Submittal Page where you can attach electronic files to your submittal. Please list attachments
that cannot be sent electronically in the notes field above and deliver them to DEP with a paper
copy of this form.



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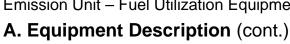
	En	nission Unit – Fuel Utilization Equipment	Facility AQ identifier
Important: When filling out forms on	A.	Equipment Description	
the computer, use only the	1.	Facility identifiers:	
tab key to move your		CLEAN HARBORS OF BRAINTREE	
cursor - do not use the return		a. Facility name 34839	1190564
key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
tab	2.	Emission unit identifiers:	
		GENERATOR #2-CUMMINS #NT855G2 #2 DIES	SEL
return		a. Facility's choice of emission unit name – edit as needed 50	50
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # – old point #
		d. ORIS ID # – for large electrical utilities only	e. Combined Units – enter number of individual units
	3.	DEP approvals – leave blank if not applicable:	
		MBR-89-COM-31	5/4/1989
		a. Most recent approval number	b. DEP approval date (mm/dd/yyyy)
	4.	Is this unit exempt under 310 CMR 7.02 Plan Appre	ovals ? ☐ yes 🗹 no
	5.	If exempt from Plan Approval, indicate reason why	(e.g., cite a specific DEP regulation):
		December a comption	
How to delete		Reason for exemption	L. C.
a unit? (click ?-icon)	6.	Emission unit installation date and decommission of 11/1/1991	date:
(6)		a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
2	7.	Emission unit replacement:	Complete only if the unit was shutdown permanently or replaced since the last report.
•		a. Is this unit replacing another emission unit?	ropiacoa cinco ato tactropora
		✓ no yes – enter DEP's emission unit nu	mber and name for the unit being replaced below:
		b. DEP's emission unit number and facility unit name	
	8.	Additional state reporting requirements:	
		a. Are there other routine air quality reporting requi	rements for this emissions unit?
		yes - specify reporting frequency below	✓ no – skip to question 8c
		b. Reporting frequency - check all that apply:	
			al □4 Annual □5 RES
		b. Reporting frequency - check all that apply: 1. Monthly 2. Quarterly 3. Semi-annual (include Operating Permit and Plan Approval reports, but not ex	_
		1. Monthly 2. Quarterly 3. Semi-annua	



Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment



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<u> </u>	9.	Equipment	:						
How to report on combined		а. Туре							
units?		☐ boiler	☐ furnace	✓ engine	other:				
			_	E chighio	0.1.01.	Describe "other" eq	uipment ty	/pe	
		CUMMING				125-DGEA			
		b. Manufactu10	irer			c. Model number			
?			rating MMBtu/hr	(enter "0" if no	t applicable)	e. Number of burne	rs (enter "	0" if not applicable)	_
What to do									
unknown or		f. Type of t	ourner – ched	ck one:	∐ rotary	mech. atomiz		steam atomizer	
not available ?					air atomize	r traveling gra	te	hand fired	
					other:	-			
						"other" burner type			
		g. Burner mar	nufacturer			h. Burner model nun	nber		_
		i. Burner insta	allation date (mi	m/dd/yyyy)					
	10	Hours of o	neration for t	he emission	unit: a □ o	heck if continuou	slv oner	ated – 24 x 7 x 52	
	10.	1	poration to	no ciniosion	1	meek ii continuou	12	aloa 24x7x02	
3			hours per day		c. Number of days p	or wook		ber of weeks per year	
						CI WCCK			
		e Percent	of total annu	al operation					
					that occurs in e	ach calendar qua	rter:	- 100%	
		e. Percent	of total annu	al operation 23 Q3			rter: +Q4 must		
	11	31 Q1	23 Q2	23 Q3	that occurs in e	ach calendar qua Sum of Q1+Q2+Q3 or 0% if the unit was	rter: +Q4 must		
	11.	31 Q1 Ozone sea	23 Q2	23 Q3	that occurs in e	ach calendar qua Sum of Q1+Q2+Q3 or 0% if the unit was	rter: +Q4 must s not oper		
	11.	31 Q1 Ozone sea 1	23 Q2 Ison operatio	23 Q3 on schedule	that occurs in e 23 Q4 May 1 through	Sum of Q1+Q2+Q3 or 0% if the unit was September 30:	rter: +Q4 must s not oper	ated for any quarter	
	11.	31 Q1 Ozone sea 1	23 Q2	23 Q3 on schedule	that occurs in e	Sum of Q1+Q2+Q3 or 0% if the unit was September 30:	rter: +Q4 must s not oper		
	11.	31 Q1 Ozone sea 1	23 Q2 Ison operatio	23 Q3 on schedule	that occurs in e 23 Q4 May 1 through	Sum of Q1+Q2+Q3 or 0% if the unit was September 30:	rter: +Q4 must s not oper	ated for any quarter	
		31 Q1 Ozone sea 1 a. Ozone sea	23 Q2 Ison operatio	23 Q3 on schedule	that occurs in e 23 Q4 May 1 through 1 b. Ozone season da	Sum of Q1+Q2+Q3 or 0% if the unit was September 30:	rter: +Q4 must s not oper 5 c. Week	ated for any quarter s operated in ozone season	
		31 Q1 Ozone sea 1 a. Ozone sea Emission re	23 Q2 Ison operation Ison hours per delease point	23 Q3 on schedule lay - select one	that occurs in e 23 Q4 — May 1 through b. Ozone season da En	Sum of Q1+Q2+Q3 or 0% if the unit was September 30: ys per week	rter: +Q4 must s not oper 5 c. Week	ated for any quarter s operated in ozone season	
		31 Q1 Ozone sea 1 a. Ozone sea Emission re	23 Q2 ason operations on hours per delease point	23 Q3 In schedule lay - select one	that occurs in e 23 Q4 — May 1 through b. Ozone season da En	Sum of Q1+Q2+Q3 or 0% if the unit was September 30: ays per week Physical Stacks:	rter: +Q4 must s not oper 5 c. Week	ated for any quarter s operated in ozone season	
		31 Q1 Ozone sea 1 a. Ozone sea Emission re Non-Stac	23 Q2 ason operations on hours per delease point ck Release Property Release Property Release Property Release Property Release Releas	23 Q3 In schedule lay - select one Points: prizontal ver	that occurs in e 23 Q4 — May 1 through b. Ozone season da e: ? En	Sum of Q1+Q2+Q3 or 0% if the unit was September 30: Tys per week September Sum of Q1+Q2+Q3 or 0% if the unit was september 30: Tys per week Sum of Q1+Q2+Q3 or 0% if the unit was september 30: Sum of Q1+Q2+Q3 or 0% if the unit was september	rter: +Q4 must s not oper. 5 c. Week	ated for any quarter s operated in ozone season	
		31 Q1 Ozone sea 1 a. Ozone sea Emission re Non-Stace fugitive engine	23 Q2 Ison operation Ison hours per decease point Ck Release Point Ick Release Release Point Ick Release Rel	23 Q3 on schedule lay - select one Points: prizontal ver	that occurs in e 23 Q4 — May 1 through b. Ozone season da e: ? En at ting vent	Sum of Q1+Q2+Q3 or 0% if the unit was September 30: ays per week Physical Stacks:	rter: +Q4 must s not oper. 5 c. Week	ated for any quarter s operated in ozone season	
		31 Q1 Ozone sea 1 a. Ozone sea Emission re Non-Stac Integrite	23 Q2 ason operations on hours per delease point ck Release Pre hoe exh. dal stack/vent	23 Q3 on schedule lay - select one Points: prizontal ver pownward fact less than 10	that occurs in e 23 Q4 — May 1 through b. Ozone season da e: ? En int sing vent Oft	Sum of Q1+Q2+Q3 or 0% if the unit was September 30: Tys per week September Sum of Q1+Q2+Q3 or 0% if the unit was september 30: Tys per week Sum of Q1+Q2+Q3 or 0% if the unit was september 30: Sum of Q1+Q2+Q3 or 0% if the unit was september	rter: +Q4 must s not oper. 5 c. Week	ated for any quarter s operated in ozone season	
	12.	31 Q1 Ozone sea 1 a. Ozone sea Emission re Non-Stac fugitiv engine vertica	23 Q2 Ison operation son hours per delease point ck Release Fire hote exh. deal stack/vent ck release point,	23 Q3 on schedule lay - select one points: prizontal ver pownward fact less than 10 skip to questic	that occurs in e 23 Q4 — May 1 through b. Ozone season da e: ? En ting vent Oft	Sum of Q1+Q2+Q3 or 0% if the unit was September 30: Tys per week September Sum of Q1+Q2+Q3 or 0% if the unit was september 30: Tys per week Sum of Q1+Q2+Q3 or 0% if the unit was september 30: Sum of Q1+Q2+Q3 or 0% if the unit was september	ter: +Q4 must s not open 5 c. Week structions:	ated for any quarter s operated in ozone season	

Facility's stack identifier from STACK form – to change stack name use STACK form

If the stack for this unit is not listed, save and exit this form now and complete a new Stack form before completing to this form.



Massachusetts Department of Environmental Protection

Bureau of Waste Prevention - Air Quality

Emission Unit - Fuel Utilization Equipment

A. Equipment Description (cont.)

2006 Year of record 50 DEP EU# (old Point #) 1190564

Facility AQ identifier

2	14.	Is there a pollution control device	ce on this emissions unit?	Check here if you need to report more than 3 air pollution control devices on
How to delete a control ?		yes – answer a through i	✓ no – skip to question 15	this unit. eDEP will add another page of control devices after this form.
		Air pollution control device 1	Air pollution control device 2	Air pollution control device 3
	-	а. Туре	Туре	Туре
Do not leave blank –		b. Manufacturer	Manufacturer	Manufacturer
if unknown write 'unknown' or		c. Model number	Model number	Model number
estimate		d. Facility's ID for this device	Facility's ID for this device	Facility's ID for this device
	(e. Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)
Leave f, g, h		f. DEP approval # (most recent)	DEP approval # (most recent)	DEP approval # (most recent)
blank if not applicable.		g. DEP approval date (mm/dd/yyyy)	DEP approval date (mm/dd/yyyy)	DEP approval date (mm/dd/yyyy)
		h. Decommission date (mm/dd/yyyy)	Decommission date (mm/dd/yyyy)	Decommission date (mm/dd/yyyy)

i. Percent overall efficiency - enter for all pollutants that the device was designed to control: PM 10 % Overall eff. % Overall eff. % Overall eff. PM 2.5 % Overall eff. % Overall eff. % Overall eff. SO₂ % Overall eff. % Overall eff. % Overall eff. CO % Overall eff. % Overall eff. % Overall eff. VOC % Overall eff. % Overall eff. % Overall eff. NO₂ % Overall eff. % Overall eff. % Overall eff. NH3 % Overall eff. % Overall eff. % Overall eff. HOC % Overall eff. % Overall eff. % Overall eff. HYC % Overall eff. % Overall eff. % Overall eff. Hg % Overall eff. % Overall eff. % Overall eff. Pb % Overall eff. % Overall eff. % Overall eff. Other % Overall eff. % Overall eff. % Overall eff. Specify "Other" Specify "Other" Specify "Other"



Bureau of Waste Prevention - Air Quality

Emission Unit - Fuel Utilization Equipment

A. Equipment Description (cont.)

15. Is there monitoring equipment on this unit or its related control devices?

2006
Year of record
50
DEP EU# (old Point #)
1190564
Facility AQ identifier

How to delete a monitor?	∐ yes – answer a	through I v no – skip to	section B	
		Monitor 1	Monitor 2	Monitor 3
	a. Monitor type:	check only one: CEM Opacity other - describe:	check only one: ☐ CEM ☐ Opacity ☐ other - describe:	check only one: CEM Opacity other - describe:
Do not leave blank – if unknown write 'unknown' or estimate	b. Manufacturer: c. Model number:	Describe "other"	Describe "other"	Describe "other"
	d. Monitor ID #:			
	e. Installation date: f. DEP approval #:	Facility's Designation (mm/dd/yyyy)	Facility's Designation (mm/dd/yyyy)	Facility's Designation (mm/dd/yyyy)
Leave f, g, h blank if not applicable.	g. DEP approval date: h. Decommission date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
	i. Recorder ?	(mm/dd/yyyy) ☐ yes ☐ no	(mm/dd/yyyy) ☐ yes ☐ no	(mm/dd/yyyy) ☐ yes ☐ no
	j. Audible alarm?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
(k. Data system ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
	I. Monitored pollutants (check all that apply):	PM 10 PM 2.5 SO2 CO VOC NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity other – describe:	PM 10 PM 2.5 SO2 CO VOC NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity other – describe:	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe:

Describe "other"

Describe "other"

Describe "other"



BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

2006 Year of record 50 DEP EU# (old Point #) 1190564 Facility AQ identifier

B. Fuels and Emissions

		5	GENERATOR #2-CUMMINS #NT855G2 #2		
Plow does eDEP nandle multiple ruels?	1.	Fuel Name / Characteristics:	Fuel name		
		Number of fuels for this unit (previous records): 1	1		
			DEP Fuel #		
		Add a NEW fuel: Check the box if you need to add a fuel that you did not report on previously (eDEP will add a blank Sect. B form to your package).	Delete this fuel: check box if you stopped using this fuel in this unit permanently. You must still report for this year of record even if amount is "0" – the fuel will be removed from the unit in the next report cycle.		
		When to NOT check this box ?	be removed from the drift in the flext report cycle.		
		a. Source Classification Code (SCC)	20200102		
		(see instructions):	SC Code (call DEP if SC code will not validate) IC ENGINE- RECIP - #2 DIESEL OIL		
		b Torrett de destar	SCC Code Description – filled by eDEP		
		b. Type of fuel – check one:	☐ no.2 ☐ no.4 ☐ no.6		
			✓ diesel ☐ coal ☐ natural gas		
		Note: The option to have eDEP calculate your emissions is not available if your fuel type is "other".	☐ jet fuel ☐ other - describe:		
			Describe "other" fuel		
		c. Sulfur content for oils and coal $(0 - 2.2)$:	.138		
			Percent by weight		
		d. Ash content for oils and coal (0 -10):	.00		
Note for e: Enter the			Percent by weight		
Maximum Fuel Rate at		e. Maximum hourly fuel rate for all firing burners:			
which the			0.038 1000 GALLONS		
unit can burn fuel (its			Amount Units per hour		
absolute			Enter "0" if unit decommissioned prior to this Year of Record.		
uncontrolled design					
capacity). Do not enter the		f. Do you have fuel or usage restrictions?	yes volume of yes yes volume of yes		
normal		g. DEP approval number for restrictions:			
operation rate nor any			Most recent for this fuel		
restricted					
(allowable) rate.		h. Annual use restriction (amount or hours):			
		For this fuel	Quantity Units		
		i. Short term use restriction (amount or hours):			
		For this fuel	Quantity Units		
			Per: month week day hour		
			CAUTION: check your amount vs.units		
	2	Annual usage:	0.494 1000 GALLONS		
	2.	Annual usage:	a. Amount – year of record b. Units		
		Enter "0" if not used in the year of record	1 1000 GALLONS c. Total annual usage for prior year of record – eDEP only		
			o. Total allitual adage for prior year of lecold - EDEF Offig		



Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

B. Fuels and Emissions (cont.)

3. Total emissions for this fuel only in tons per year:

2006
Year of record
50
DEP EU# (old Point #)
1190564

Facility AQ identifier



	Pollutant:	☐ PM10	☐ PM2.5	□ SO2	□ NO2
	Actual for previous year	.0213	.0213	.0199	.302
	eDEP only	Tons	Tons	Tons	Tons
		0.01	0.01	0.0029	0.1492
	Actual for year of record:	Tons	Tons	Tons	Tons
	Potential emissions at max	7.07	0.01	0.2670	3.80
	capacity uncontrolled:	Tons	Tons	Tons	Tons
	Emission factor:	42.5	42.5	39.7	604
	in pounds per unit:	1000 GALLONS	1000 GALLONS	1000 GALLONS	1000 GALLONS
	Maximum allowed emissions –				
⋛	annual:	Tons	Tons	Tons	Tons
this fuel only	Maximum allowed emissions – short term:	Pounds	Pounds	Pounds	Pounds
this	Short term period (or MMBtu):				
ᅙ	Pasis – DEP approval number or regulation:	MBR-89-COM-31	MBR-89-COM-31	MBR-89-COM-31	MBR-89-COM-3

Calculations: The form will automatically calculate the actual and potential emissions UNLESS you check a box to manually

enter emissions for each specific pollutant. Click the "?" icon for information to help you decide how to use this feature:

					other:
	Pollutant:	□ со	□ voc	□ NH3	specify
	Actual for previous year eDEP only:	.065 Tons	Tons	Tons	Tons
	Í	0.03	0.01	0.01	10110
	Actual for year of record:	Tons	Tons	Tons	Tons
	Potential emissions at max	0.8370	0.0565	0.01	
	capacity uncontrolled:	Tons	Tons	Tons	Tons
	Emission factor:	130	1.300000	1.300000	
	in pounds per unit:	GALLONS	GALLONS	GALLONS	
	Maximum allowed emissions –				
<u>~</u>	annual:	Tons	Tons	Tons	Tons
For this fuel only	Maximum allowed emissions – short term:	Pounds	Pounds	Pounds	Pounds
this	Short term period (or MMBtu):				
Po	Basis – DEP approval number or regulation:	MBR-89-COM-31	MBR-89-COM-31	MBR-89-COM-31	



Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

B.	Fuels and	Emissions	(cont.)

2006
Year of record
50
DEP EU# (old Point #)
1190564
Facility AQ identifier

	2)
V	

4.	Ozone season	emissions -	May 1	through	September	30:
----	--------------	-------------	-------	---------	-----------	-----

0.06	0.75
a. Typical day VOC emissions – pounds per day	b. Typical day NOx emissions –pounds per day
check to enter your own values	check to enter your own values

NOTE: The form will estimate the ozone season emissions for you. However, you may enter your own values by checking the boxes above.

C. Notes and Attachments

1. **Notes**: please include in the space below any additional information that will help DEP understand your submission.

Att	achn	nents:
-----------------------	------	--------

Check here to submit attachments to this form (e.g., calculations) – add a note in the field above
indicating what is attached. For eDEP on-line filers, this will create a new step on your Current
Submittal Page where you can attach electronic files to your submittal. Please list attachments
that cannot be sent electronically in the notes field above and deliver them to DEP with a paper
copy of this form.



Bureau of Waste Prevention - Air Quality

2006 Year of record DEP EU# (old Point #) 1190564

Important: When filling out forms on the computer, use only the cursor - do not use the return







signion Unit - Fuel Hillingtion Faulture and	113000-
iission Unit – Fuei Utilization Equipment	Facility AQ identifier
Equipment Description	
Facility identifiers:	
CLEAN HARBORS OF BRAINTREE	
a. Facility name	
	1190564
b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
Emission unit identifiers:	
BOILER #1-CLEAVER BROOKS- #2 OIL 0.3%S	
a. Facility's choice of emission unit name – edit as needed	
3	3
b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # – old point #
d. ORIS ID # - for large electrical utilities only	e. Combined Units – enter number of individual units
DEP approvals – leave blank if not applicable:	
MBR-86-COM-027	9/11/1986
a. Most recent approval number	b. DEP approval date (mm/dd/yyyy)
Is this unit exempt under 310 CMR 7.02 Plan Appro	ovals? ☐ yes 🗹 no
If exempt from Plan Approval, indicate reason why	(e.g., cite a specific DEP regulation):
Reason for exemption	
Emission unit installation date and decommission of	late:
9/1/1986	
a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
Emission unit replacement:	Complete only if the unit was shutdown permanently or replaced since the last report.
	a. Facility name 34839 b. DEP Account number Emission unit identifiers: BOILER #1-CLEAVER BROOKS- #2 OIL 0.3%S a. Facility's choice of emission unit name – edit as needed 3 b. Facility's emission unit number / code – edit as needed d. ORIS ID # – for large electrical utilities only DEP approvals – leave blank if not applicable: MBR-86-COM-027 a. Most recent approval number Is this unit exempt under 310 CMR 7.02 Plan Approval fexempt from Plan Approval, indicate reason why Reason for exemption Emission unit installation date and decommission of 9/1/1986 a. Installation date – estimate if unknown (mm/dd/yyyy)

delete a unit? (click ?-icon

How to

a. Is this unit replacing another emission unit?

no yes – enter DEP's emission unit number and name for the unit being replaced below:

b. DEP's emission unit number and facility unit name

8. Additional state reporting requirements:

a. Are there other routine air quality reporting requirements for this emissions unit?

yes - specify reporting frequency below

✓ no – skip to question 8c

b. Reporting frequency - check all that apply:

☐ 1. Monthly ☐ 2. Quarterly ☐ 3. Semi-annual ☐ 4. Annual ☐ 5. RES

(include Operating Permit and Plan Approval reports, but not exceedance reporting)

c. Is this unit subject to (check all that apply):

☐ NESHAP ■ NSPS

■ MACT

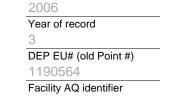


Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

A. Equipment Description (cont.)



?
How to report
on combined
units?

		Equipmer	111.				
w to report		a. Type					
s?		✓ boiler	☐ furnace	engine	other:		
		▶ Doller	idiliace		☐ other.	Describe "other" equipmen	t type
		CLEAVE	R BROOKS			CB800-150	
		b. Manufac	cturer			c. Model number	
		2.0				1	
at to do		d. Max inpu	it rating MMBtu/hr	(enter "0" if no	ot applicable)	e. Number of burners (ente	er "0" if not applicable)
a own or		f. Type of	f burner – ched	ck one:	rotary	✓ mech. atomizer	steam atomizer
vailable?					air atomizer	☐ traveling grate	☐ hand fired
					other:		
						"other" burner type	
		CL BROO				CB800-150-150	
		g. Burner m 9/10/1986	nanufacturer			h. Burner model number	
			o stallation date (mi	~ /dd/, n n n /)			
			(,,,,,,			
6	10.		·		4	heck if continuously op 6	erated – 24 x 7 x 52
<u> </u>	10.		operation for t		4		erated – 24 x 7 x 52
?	10.	b. Number of	of hours per day		1 c. Number of days po		
	10.	b. Number of	of hours per day	al operatior	c. Number of days pon that occurs in ea	$\frac{6}{\text{d. No}}$	umber of weeks per year
3	10.	b. Number of	of hours per day		c. Number of days pon that occurs in ea	er week 6 d. No	umber of weeks per year
		b. Number of e. Percent 100 Q1	of hours per day nt of total annu O Q2	al operation 0 Q3	c. Number of days port that occurs in each occurs i	er week ach calendar quarter: Sum of Q1+Q2+Q3+Q4 m or 0% if the unit was not op	umber of weeks per year
3		b. Number of e. Percent 100 Q1 Ozone se	of hours per day nt of total annu 0 Q2 eason operatio	al operation O Q3 n schedule	c. Number of days pont that occurs in each occurs i	er week ach calendar quarter: Sum of Q1+Q2+Q3+Q4 m or 0% if the unit was not op September 30:	umber of weeks per year ust = 100%, perated for any quarter
		b. Number of e. Percent 100 Q1 Ozone se	of hours per day nt of total annu 0 Q2 eason operatio	al operation O Q3 n schedule	c. Number of days port that occurs in each occurs i	er week ach calendar quarter: Sum of Q1+Q2+Q3+Q4 m or 0% if the unit was not op September 30:	umber of weeks per year
3		b. Number of e. Percent 100 Q1 Ozone se	of hours per day nt of total annu O Q2	al operation O Q3 n schedule	c. Number of days pont that occurs in each occurs i	er week ach calendar quarter: Sum of Q1+Q2+Q3+Q4 m or 0% if the unit was not op September 30:	umber of weeks per year ust = 100%, perated for any quarter
	11.	e. Percentus 100 Q1 Ozone se 0 a. Ozone se	of hours per day nt of total annu 0 Q2 eason operatio	al operation 0 Q3 n schedule	1 c. Number of days point that occurs in each of the control of th	er week ach calendar quarter: Sum of Q1+Q2+Q3+Q4 m or 0% if the unit was not op September 30:	umber of weeks per year ust = 100%, perated for any quarter eeks operated in ozone season
	11.	b. Number of e. Percent 100 Q1 Ozone se 0 a. Ozone se Emission	of hours per day nt of total annu O Q2 eason operatio eason hours per d	al operation O Q3 n schedule ay - select one	1 c. Number of days por that occurs in each of that occurs in each of the control	er week ach calendar quarter: Sum of Q1+Q2+Q3+Q4 m or 0% if the unit was not op September 30: ys per week oc. We	umber of weeks per year ust = 100%, perated for any quarter eeks operated in ozone season
	11.	e. Percentus of the second of	of hours per day nt of total annu O Q2 eason operatio eason hours per d release point ack Release P	al operation 0 Q3 n schedule ay - select one	1 c. Number of days point that occurs in each of the control of th	er week er week ach calendar quarter: Sum of Q1+Q2+Q3+Q4 m or 0% if the unit was not op September 30: ys per week c. We Physical Stacks:	umber of weeks per year ust = 100%, perated for any quarter eeks operated in ozone season
	11.	e. Percentus of the second of	of hours per day nt of total annu O Q2 eason operatio eason hours per d release point ack Release P tive	al operation O Q3 n schedule ay - select one	c. Number of days por that occurs in each of that occurs in each of the control o	er week ach calendar quarter: Sum of Q1+Q2+Q3+Q4 m or 0% if the unit was not op September 30: ys per week oc. We	umber of weeks per year ust = 100%, perated for any quarter eeks operated in ozone season ns: ?

vertical stack/vent less than 10ft If Non-Stack release point, skip to question 14.

13. Link this unit to a physical stack (if applicable) – pick from the list below:

3 1 STACK BOILER #1-CLEAVER BROOKS- #2 OIL

Facility's stack identifier from STACK form – to change stack name use STACK form

If the stack for this unit is not listed, save and exit this form now and complete a new Stack form before completing to this form.



Bureau of Waste Prevention - Air Quality

Emission Unit - Fuel Utilization Equipment

A. Equipment Description (cont.)

2006 Year of record DEP EU# (old Point #) 1190564 Facility AQ identifier

?	14. Is there a pollution control device	ce on this emissions unit?	Check here if you need to report more than 3 air pollution control devices on
How to delete a control ?	yes – answer a through i	✓ no – skip to question 15	this unit. eDEP will add another page of control devices after this form.
	Air pollution control device 1	Air pollution control device 2	Air pollution control device 3
	а. Туре	Туре	Туре
Do not leave blank –	b. Manufacturer	Manufacturer	Manufacturer
if unknown write 'unknown' or	c. Model number	Model number	Model number
estimate	d. Facility's ID for this device	Facility's ID for this device	Facility's ID for this device
	e. Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)
Leave f , g , h blank if not	f. DEP approval # (most recent)	DEP approval # (most recent)	DEP approval # (most recent)
applicable.	g. DEP approval date (mm/dd/yyyy)	DEP approval date (mm/dd/yyyy)	DEP approval date (mm/dd/yyyy)
	h. Decommission date (mm/dd/yyyy)	Decommission date (mm/dd/yyyy)	Decommission date (mm/dd/yyyy)

i. Percent overall efficiency - enter for all pollutants that the device was designed to control: PM 10 % Overall eff. % Overall eff. % Overall eff. PM 2.5 % Overall eff. % Overall eff. % Overall eff. SO₂ % Overall eff. % Overall eff. % Overall eff. CO % Overall eff. % Overall eff. % Overall eff. VOC % Overall eff. % Overall eff. % Overall eff. NO₂ % Overall eff. % Overall eff. % Overall eff. NH3 % Overall eff. % Overall eff. % Overall eff. HOC % Overall eff. % Overall eff. % Overall eff. HYC % Overall eff. % Overall eff. % Overall eff. Hg % Overall eff. % Overall eff. % Overall eff. Pb % Overall eff. % Overall eff. % Overall eff. Other % Overall eff. % Overall eff. % Overall eff. Specify "Other" Specify "Other" Specify "Other"



a monitor?

Massachusetts Department of Environmental Protection

Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

A. Equipment Description (cont.)

2006

?	15. Is there monitoring equipme	nt on this unit or its related control	ol devices?
How to delete	yes – answer a through I	✓ no – skip to section B	

		Monitor 1	Monitor 2	Monitor 3
	a. Monitor type:	check only one: CEM Opacity other - describe:	check only one: CEM Opacity other - describe:	check only one: CEM Opacity other - describe:
Do not leave blank – if unknown write 'unknown' or estimate	b. Manufacturer: c. Model number:	Describe "other"	Describe "other"	Describe "other"
	d. Monitor ID #: e. Installation date: f. DEP approval #:	Facility's Designation (mm/dd/yyyy)	Facility's Designation (mm/dd/yyyy)	Facility's Designation (mm/dd/yyyy)
Leave f, g, h blank if not applicable.	g. DEP approval date: h. Decommission date: i. Recorder ?	(mm/dd/yyyy) (mm/dd/yyyy) yes no	(mm/dd/yyyy) (mm/dd/yyyy) yes no	(mm/dd/yyyy) (mm/dd/yyyy) yes no
G	j. Audible alarm ?	☐ yes ☐ no ☐ yes ☐ no	☐ yes ☐ no ☐ yes ☐ no	☐ yes ☐ no ☐ yes ☐ no
	I. Monitored pollutants (check all that apply):	PM 10 PM 2.5 SO2 CO VOC NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity other – describe:	PM 10 PM 2.5 SO2 CO VOC NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity other – describe:	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe:
		Describe "other"	Describe "other"	Describe "other"



Massachusetts Department of Environmental ProtectionBureau of Waste Prevention – Air Quality

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2006 Year of record DEP EU# (old Point #) 1190564 Facility AQ identifier

B. Fuels and Emissions

	1.	Fuel Name / Characteristics:	BOILER #1-CLEAVER BROOKS #2 OI
	١.		Fuel name
		Number of fuels for this unit (previous records): 2	DEP Fuel #
How does eDEF nandle multiple uels?		Add a NEW fuel: Check the box if you need to add a fuel that you did not report on previously (eDEP will add a blank Sect. B form to your package).	Delete this fuel: check box if you stopped using this fuel in this unit permanently. You must still report for this year of record even if amount is "0" – the fuel will be removed from the unit in the next report cycle.
		When to NOT check this box ?	
		a. Source Classification Code (SCC) (see instructions):	SC Code (call DEP if SC code will not validate) DIST.OIL- GRADE #1 OR #2 OIL
			SCC Code Description – filled by eDEP
		b. Type of fuel – check one:	☑ no.2 □ no.4 □ no.6
			☐ diesel ☐ coal ☐ natural gas
		Note: The option to have eDEP calculate your emissions is not available if your fuel type is "other".	☐ jet fuel ☐ other - describe:
		c. Sulfur content for oils and coal (0 – 2.2):	Describe "other" fuel .138
		d Ash content for alle and east (0, 10).	Percent by weight 0
Note for e: Enter the Maximum		d. Ash content for oils and coal (0 -10):	Percent by weight
Fuel Rate at which the unit can burn		e. Maximum hourly fuel rate for all firing burners:	.043 1000 GALLONS
fuel (its absolute uncontrolled			Amount Units per hour Enter "0" if unit decommissioned prior to this Year of Record
design capacity). Do not enter the		f. Do you have fuel or usage restrictions?	yes on o - skip to question 2
normal operation rate nor any		g. DEP approval number for restrictions:	Most recent for this fuel
restricted (allowable) rate.		h. Annual use restriction (amount or hours): For this fuel	Quantity HOUR Units
		i. Short term use restriction (amount or hours):	HOUR
		For this fuel	Quantity Units
			Per: ☐ month ☐ week 🗹 day ☐ hour
			CAUTION: check your amount vs.units
	2.	Annual usage:	1.21 a. Amount – year of record b. Units
		Enter "0" if not used in the year of record	27 1000 GALLONS
		•	c. Total annual usage for prior year of record – eDEP only



Bureau of Waste Prevention - Air Quality

Emission Unit - Fuel Utilization Equipment

B. Fuels and Emissions (cont.)

or regulation:

3. Total emissions for this fuel only in tons per year:

2006 Year of record DEP EU# (old Point #) 1190564 Facility AQ identifier



	Pollutant:	☐ PM10	☐ PM2.5	□ SO2	□ NO2
	Actual for previous year eDEP only:	.0041 Tons	.001 Tons	.5751 Tons	.324 Tons
		0.0006	0.0002	0.0119	0.0145
	Actual for year of record:	Tons	Tons	Tons	Tons
	Potential emissions at max	0.1883	0.0471	3.6907	4.5202
	capacity uncontrolled:	Tons	Tons	Tons	Tons
	Emission factor:	1	0.25	142	24
	in pounds per unit:	1000 GALLONS	1000 GALLONS	1000 GALLONS	1000 GALLONS
_	Maximum allowed emissions – annual:	Tons	Tons	Tons	Tons
For this fuel only	Maximum allowed emissions – short term:	Pounds	Pounds	Pounds	Pounds
this	Short term period (or MMBtu):				
[Basis – DEP approval number or regulation:	MBR-86-COM-027	MBR-86-COM-027	MBR-86-COM-027	MBR-86-COM-02

Calculations: The form will automatically calculate the actual and potential emissions UNLESS you check a box to manually

enter emissions for each specific pollutant. Click the "?" icon for information to help you decide how to use this feature:

other: TOTAL SUSPENDED PARTICULATES Pollutant: □ co □ VOC ☐ NH3 specify .0675 0 Actual for previous year Tons Tons Tons Tons eDEP only: 0.0030 0.0005 0.0012 Actual for year of record: Tons Tons Tons Tons 0.9417 0.1507 0.1250 Potential emissions at max Tons Tons capacity uncontrolled: Tons Tons 1.300000 5 0.80 Emission factor: 1000 GALLONS 1000 GALLONS 1000 GALLONS 1000 GALLONS in pounds per unit: Maximum allowed emissions annual: Tons Tons Tons Tons For this fuel only Maximum allowed emissions -Pounds short term: **Pounds Pounds** Pounds Short term period (or MMBtu): MBR-86-COM-027 MBR-86-COM-027 MBR-86-COM-027 MBR-86-COM-027 Basis - DEP approval number



Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

Year of record 3

DEP EU# (old Point #) 1190564

Facility AQ identifier



C. Notes and Attachments

1. **Notes**: please include in the space below any additional information that will help DEP understand your submission.

2. Attachments:

Check here to submit attachments to this form (e.g., calculations) – add a note in the field above
indicating what is attached. For eDEP on-line filers, this will create a new step on your Current
Submittal Page where you can attach electronic files to your submittal. Please list attachments
that cannot be sent electronically in the notes field above and deliver them to DEP with a paper
copy of this form.



Massachusetts Department of Environmental ProtectionBureau of Waste Prevention – Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

Year of record DEP EU# (old Point #) 1190564 Facility AQ identifier

2006

B. Fuels and Fmissions

	D	i i dels and Emissions				
	1.	Fuel Name / Characteristics:		BOILER #1-CLEAVER BROOKS -NOT USED- #4 OIL-0.5%S Fuel name		
	••	r der riame, enalacionesies.		ame		
			DEP F	Jupi #		
(?)						
How does eDEP handle multiple fuels?		Add a NEW fuel: Check the box if you need to add a fuel that you did not report on previously (eDEP will add a blank Sect. B form to your package).	fu th	uel in this nis year o	s unit p <i>ermar</i> of record eve	k box if you stopped using this nently. You must still report for if amount is "0" – the fuel will init in the next report cycle.
		a. Source Classification Code (SCC)	1020			
		(see instructions):			DEP if SC co	ode will not validate) 4
			SCC C	Code Des	scription – fill	ed by eDEP
		b. Type of fuel – check one:	□ no	0.2	☑ no.4	☐ no.6
			☐ die	esel	☐ coal	natural gas
		Note: The option to have eDEP calculate your emissions is not available if your fuel type is "other".	☐ jet	t fuel	other -	describe:
			Descri	be "othe	er" fuel	
		c. Sulfur content for oils and coal $(0 - 2.2)$:	.5			
		,	Percer	nt by wei	ght	
		d. Ash content for oils and coal (0 -10):	0			
Note for e: Enter the Maximum Fuel Rate at			Percer	nt by wei	ght	
which the		e. Maximum hourly fuel rate for all firing burners:	.043			1000 GALLONS
unit can burn			Amour	nt		Units per hour
fuel (its absolute uncontrolled design			Enter "(O" if unit (_	ned prior to this Year of Record.
capacity). Do		f. Do you have fuel or usage restrictions?	ye	s 🛂	no - skip	to question 2
not enter the normal		g. DEP approval number for restrictions:	MBR-	-86-CC	M-027	
operation rate nor any restricted (allowable)			Most re	ecent for	this fuel	
rate.		h. Annual use restriction (amount or hours):				
		For this fuel	Quanti	ity		Units
		i. Short term use restriction (amount or hours):				
		For this fuel	Quanti	ity		Units
			Per:	mon	th 🗌 weel	day hour
	2	Annual usage:	0			1000 GALLONS
	۷.	•	_	ount – ye	ear of record	b. Units
		Enter "0" if not used in the year of record	8 - T	dan '	1000 GA	
			c. Lota	aı annual	usage for pr	ior year of record – eDEP only



Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

B. Fuels and Emissions (cont.)

3. Total emissions for this fuel **only** in tons per year:

2006
Year of record
3
DEP EU# (old Point #)
1190564

Facility AQ identifier

Read First

Calculations: The form will automatically calculate the actual and potential emissions UNLESS you check a box to manually enter emissions for each specific pollutant.

	Pollutant:	☐ PM10	☐ PM2.5	☐ SO2	□ NO2
	Actual for previous year	.012	.0078	.3	.188
	eDEP only:	Tons	Tons	Tons	Tons
	Actual for year of record:	0	0	0	0
		Tons 1.13	Tons 0.7345	Tons 14.1255	Tons 8.8520
	Potential emissions at max capacity uncontrolled:	Tons	0.7343 Tons	Tons	7ons
	capacity uncontrolled.	6	3.90	150	47
	Emission factor:				
	in pounds per unit:	1000 GALLONS	1000 GALLONS	1000 GALLONS	1000 GALLONS
	Maximum allowed emissions –				
ج	annual:	Tons	Tons	Tons	Tons
For this fuel only	Maximum allowed emissions – short term:	Pounds	Pounds	Pounds	Pounds
r this	Short term period (or MMBtu):				
요	Pasis – DEP approval number or regulation:	MBR-86-COM-027	MBR-86-COM-027	MBR-86-COM-027	MBR-86-COM-027
					other:
	Pollutant:	□ со	□ voc	OTHER NH3	specify
	Actual for previous year	.02			
	eDEP only:	Tons	Tons	Tons	Tons
	Actual for year of record:	0		0	0.0000
		Tons 0.9417	Tons	Tons 0.1507	Tons 0.0000
	Potential emissions at max capacity uncontrolled:	Tons	Tons	Tons	Tons
	Emission factor:	5	0	0.80	1.300000
	in pounds per unit:	1000 GALLONS	1000 GALLONS	1000 GALLONS	1000 GALLONS
	Maximum allowed emissions –				
ج	annual:	Tons	Tons	Tons	Tons
For this fuel only	Maximum allowed emissions – short term:	Pounds	Pounds	Pounds	Pounds
this	Short term period (or MMBtu):				
For	Basis – DEP approval number or regulation:	MBR-86-COM-027	MBR-86-COM-027	MBR-86-COM-027	



Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

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D. Total Emissions for Emissions Unit (cont.)

1. Total Emissions for this emissions unit in tons per year:

Calculations: This form calculates this unit's total actual and maximum potential emissions (if you have correctly provided all of the emissions for each fuel in Section B). Return to Sect. B if you need to correct those numbers.

	Pollutant:	PM10	PM2.5	SO2	NO2	СО
	A street from more designation	.0161	.0088	.8751	.512	.0875
	Actual for previous year:	Tons	Tons	Tons	Tons	Tons
		0.0006	0.0002	0.0119	0.0145	0.0030
	Actual for year of record:	Tons	Tons	Tons	Tons	Tons
	Potential emissions at	1.13	0.7345	14.1255	8.8520	0.9417
	maximum capacity:	Tons	Tons	Tons	Tons	Tons
	Max allowed emissions –					
none).	annual:	Tons	Tons	Tons	Tons	Tons
ຸ ឨ	Max allowed emissions -					
ξ	short term:	Pounds	Pounds	Pounds	Pounds	Pounds
blar	Short term period:					
(leave	Basis – DEP approval number or regulation:	MBR-86-COM-	MBR-86-COM	MBR-86-COM-		

VOC NH3 Pollutant: Actual for previous year: Tons Tons 0.0005 **Actual** for year of record: Tons Tons 0.1507 Potential emissions at Tons Tons maximum capacity: Max allowed emissions -(leave blank if none) annual: Tons Tons Max allowed emissions unit only Pounds short term: Pounds Short term period: Basis - DEP approval number or regulation:

2. Ozone season emissions – May 1 through September 30:

0	0
a. Typical day VOC emissions – pounds per day	b. Typical day NOx emissions – pounds per day
check to enter your own values	check to enter your own values

NOTE: The form has estimated the emissions for you. However, you may enter your own values by checking the boxes above.

Limits for the entire



Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

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Important: When filling out forms on the computer, use only the tab key to move your cursor - do not use the return





How to delete a unit? (click ?-icon)

A. Equipment Description

1.	Facility identifiers:	
	CLEAN HARBORS OF BRAINTREE	
	a. Facility name	
	34839	1190564
	b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
2.	Emission unit identifiers:	
	BOILER #2-HURST #30 1.004 MMBTU/HR #2 O	IL-0.3%S
	a. Facility's choice of emission unit name – edit as needed	2
	b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # – old point #
	d. ORIS ID # - for large electrical utilities only	e. Combined Units – enter number of individual units
3.	DEP approvals – leave blank if not applicable:	
	a. Most recent approval number	b. DEP approval date (mm/dd/yyyy)
4.	Is this unit exempt under 310 CMR 7.02 Plan Appr	rovals?
5.	If exempt from Plan Approval, indicate reason why BELOW THRESHOLDS IN 310 CMR 7.02 (2)(B) 7 AND 15 Reason for exemption	(e.g., cite a specific DEP regulation):
6.	Emission unit installation date and decommission 5/1/2003	date:
_	a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable Complete only if the unit was shutdown permanently or
9 7.	Emission unit replacement:	replaced since the last report.
	a. Is this unit replacing another emission unit?	
	✓ no yes – enter DEP's emission unit nu	umber and name for the unit being replaced below:
	b. DEP's emission unit number and facility unit name	
8.	Additional state reporting requirements:	
	a. Are there other routine air quality reporting requ	irements for this emissions unit?
	yes - specify reporting frequency below	✓ no – skip to question 8c
	b. Reporting frequency - check all that apply:	
	☐ 1. Monthly ☐ 2. Quarterly ☐ 3. Semi-annu (include Operating Permit and Plan Approval reports, but not ex	_
	c. Is this unit subject to (check all that apply):	
	□ NESHAP □ NSPS □ MACT	



Bureau of Waste Prevention - Air Quality

Emission Unit - Fuel Utilization Equipment

A. Equipment Description (cont.)



Equipment: a. Type on combined units? boiler other: ☐ furnace ☐ engine Describe "other" equipment type **HURST** 4VT-50BHP b. Manufacturer c. Model number d. Max input rating MMBtu/hr (enter "0" if not applicable) e. Number of burners (enter "0" if not applicable) if data f. Type of burner - check one: mech. atomizer steam atomizer rotary unknown or not available? ☐ air atomizer ☐ traveling grate hand fired other: "other" burner type **HURST** 30 g. Burner manufacturer h. Burner model number 5/1/2003 i. Burner installation date (mm/dd/yyyy) 10. Hours of operation for the emission unit: a. Check if continuously operated – 24 x 7 x 52 b. Number of hours per day c. Number of days per week d. Number of weeks per year e. Percent of total annual operation that occurs in each calendar quarter: 71 0 29 0 Sum of Q1+Q2+Q3+Q4 must = 100%, or 0% if the unit was not operated for any quarter Ω2 Q3 Q4 11. Ozone season operation schedule – May 1 through September 30: 0 a. Ozone season hours per day b. Ozone season days per week c. Weeks operated in ozone season 12. Emission release point – select one: Engines click here for instructions:





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Non-Stack Release Points: fugitive horizontal vent engine exh. downward facing vent vertical stack/vent less than 10ft

Physical Stacks: ✓ vertical stack

vertical with rain cap/sleeve

If Non-Stack release point, skip to question 14.

13. Link this unit to a physical stack (if applicable) – pick from the list below:

2 STACK #2- BOILER #2- HURST #30- #2 OIL 0.3%S

Facility's stack identifier from STACK form - to change stack name use STACK form

If the stack for this unit is not listed, save and exit this form now and complete a new Stack form before completing to this form.



Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

A. Equipment Description (cont.)

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?	14. Is there a pollution control device	Check here if you need to report more than 3 air pollution control devices on	
How to delete a control ?	yes – answer a through i	✓ no – skip to question 15	this unit. eDEP will add another page of control devices after this form.
	Air pollution control device 1	Air pollution control device 2	Air pollution control device 3
(
	а. Туре	Туре	Туре
Do not leave blank –	b. Manufacturer	Manufacturer	Manufacturer
if unknown write 'unknown' or	c. Model number	Model number	Model number
estimate	d. Facility's ID for this device	Facility's ID for this device	Facility's ID for this device
	e. Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)
Leave f , g , h blank if not	f. DEP approval # (most recent)	DEP approval # (most recent)	DEP approval # (most recent)
applicable.	g. DEP approval date (mm/dd/yyyy)	DEP approval date (mm/dd/yyyy)	DEP approval date (mm/dd/yyyy)
	h. Decommission date (mm/dd/yyyy)	Decommission date (mm/dd/yyyy)	Decommission date (mm/dd/yyyy)

i. Percent overall efficiency - enter for all pollutants that the device was designed to control: PM 10 % Overall eff. % Overall eff. % Overall eff. PM 2.5 % Overall eff. % Overall eff. % Overall eff. SO₂ % Overall eff. % Overall eff. % Overall eff. CO % Overall eff. % Overall eff. % Overall eff. VOC % Overall eff. % Overall eff. % Overall eff. NO₂ % Overall eff. % Overall eff. % Overall eff. NH3 % Overall eff. % Overall eff. % Overall eff. HOC % Overall eff. % Overall eff. % Overall eff. HYC % Overall eff. % Overall eff. % Overall eff. Hg % Overall eff. % Overall eff. % Overall eff. Pb % Overall eff. % Overall eff. % Overall eff. Other % Overall eff. % Overall eff. % Overall eff. Specify "Other" Specify "Other" Specify "Other"



Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

A. Equipment Description (cont.)

15. Is there **monitoring equipment** on this unit or its related control devices?

✓ to delete

✓ yes – answer a through I
✓ no – skip to section B

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a monitor?	<u> </u>			
		Monitor 1	Monitor 2	Monitor 3
	a. Monitor type:	check only one: CEM Opacity other - describe:	check only one: CEM Opacity other - describe:	check only one: CEM Opacity other - describe:
Do not leave blank – if unknown write 'unknown' or estimate	b. Manufacturer:	Describe "other"	Describe "other"	Describe "other"
	c. Model number:			
	d. Monitor ID #:	Facility's Designation	Facility's Designation	Facility's Designation
	e. Installation date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
	f. DEP approval #:			
Leave f, g, h blank if not	g. DEP approval date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
applicable.	h. Decommission date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
	i. Recorder ?	yes no	yes no	yes no
	j. Audible alarm ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
9	k. Data system ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
	I. Monitored pollutants (check all that apply):	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe:	PM 10 PM 2.5 SO2 CO VOC NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity other – describe:	PM 10 PM 2.5 SO2 CO VOC NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity other – describe:
		Describe "other"	Describe "other"	Describe "other"



Massachusetts Department of Environmental ProtectionBureau of Waste Prevention – Air Quality

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2006 Year of record DEP EU# (old Point #) 1190564 Facility AQ identifier

B. Fuels and Emissions

		F 1N /01	BOILER #2-HURST #30 - #2 OIL-0.3 SULFU
	1.	Fuel Name / Characteristics:	Fuel name
		Number of fuels for this unit (previous records): 1	1
?		_	DEP Fuel #
How does eDEF nandle multiple uels?	o	Add a NEW fuel: Check the box if you need to add a fuel that you did not report on previously (eDEP will add a blank Sect. B form to your package).	Delete this fuel: check box if you stopped using this fuel in this unit permanently. You must still report for this year of record even if amount is "0" – the fuel will be removed from the unit in the next report cycle.
		When to NOT check this box ?	
		a. Source Classification Code (SCC)	10200501
		(see instructions):	SC Code (call DEP if SC code will not validate)
			DIST.OIL- GRADE #1 OR #2 OIL
		h Tung of fuel shock once	SCC Code Description – filled by eDEP
		b. Type of fuel – check one:	☑ no.2
			☐ diesel ☐ coal ☐ natural gas
		Note: The option to have eDEP calculate your emissions is not available if your fuel type is "other".	☐ jet fuel ☐ other - describe:
			Describe "other" fuel
		c. Sulfur content for oils and coal $(0 - 2.2)$:	.138
		,	Percent by weight
		d. Ash content for oils and coal (0 -10):	0.000
Note for e: Enter the Maximum Fuel Rate at			Percent by weight
which the unit can burn		e. Maximum hourly fuel rate for all firing burners:	.011 1000 GALLONS
fuel (its			Amount Units per hour
absolute uncontrolled design			Enter "0" if unit decommissioned prior to this Year of Record.
capacity). Do		f. Do you have fuel or usage restrictions?	yes volume of yes yes volume of yes
not enter the normal		g. DEP approval number for restrictions:	
operation rate nor any restricted		3	Most recent for this fuel
(allowable) rate.		h. Annual use restriction (amount or hours):	
		For this fuel	Quantity Units
		i. Short term use restriction (amount or hours):	
		For this fuel	Quantity Units
			Per: month week day hour
			CAUTION: check your amount vs.units
	2.	Annual usage:	30.485 1000 GALLONS
	۷.	•	a. Amount – year of record b. Units
		Enter "0" if not used in the year of record	d0 1000 GALLONS c. Total annual usage for prior year of record – eDEP only
			o. Total allitual adage for prior year of fection — EDEF Offiy



Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

B. Fuels and Emissions (cont.)

3. Total emissions for this fuel only in tons per year:

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Facility AQ identifier



Part 75 Requirements

☐ NO2 Pollutant: ☐ PM10 ☐ PM2.5 ☐ SO2 .006 .0015 .852 .48 Actual for previous year Tons Tons Tons Tons eDEP only: 0.03 0.01 0.65 0.30 ctual for year of record: Tons Tons Tons Tons 0.05 0.03 2 0.90 otential emissions at max Tons Tons capacity uncontrolled: Tons Tons 1.000000 142.000000 24.000000 .25 Emission factor: 1000 GALLONS 1000 GALLONS 1000 GALLONS 1000 GALLONS in pounds per unit: Maximum allowed emissions – annual: Tons Tons Tons Tons For this fuel only Maximum allowed emissions short term: Pounds **Pounds** Pounds Pounds Short term period (or MMBtu): **EXEMPT EXEMPT EXEMPT EXEMPT** Basis - DEP approval number or regulation:

Calculations: The form will automatically calculate the actual and potential emissions UNLESS you check a box to manually

enter emissions for each specific pollutant. Click the "?" icon for information to help you decide how to use this feature:

other:

				TOTAL SUSP	PENDED PARTICULATES
	Pollutant:	□ co	□ voc	□ NH3	specify
	Actual for previous year	.1			0
	eDEP only:	Tons	Tons	Tons	Tons
		0.08		0.0122	0.0300
	Actual for year of record:	Tons	Tons	Tons	Tons
	Potential emissions at max	0.23		0.0385	0.1000
	capacity uncontrolled:	Tons	Tons	Tons	Tons
	Emission factor:	5.000000	0	0.80	2.000000
	in pounds per unit:	1000 GALLONS	1000 GALLONS	1000 GALLONS	1000 GALLONS
	Maximum allowed emissions –				
<u>~</u>	annual:	Tons	Tons	Tons	Tons
For this fuel only	Maximum allowed emissions – short term:	Pounds	Pounds	Pounds	Pounds
	Short term period (or MMBtu):				
For	Basis – DEP approval number or regulation:	EXEMPT	EXEMPT	EXEMPT	EXEMPT



Bureau of Waste Prevention - Air Quality

Emission Unit - Fuel Utilization Equipment

	В.	Fuels	and	Emissions	(cont.)
--	----	--------------	-----	------------------	---------

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1190564
Eacility AO identifier

4.	Ozone season emissions - May 1 through Se	ptember 30:
	0	0
	a. Typical day VOC emissions – pounds per day	b. Typical day NOx emissions –pounds per day
	check to enter your own values	check to enter your own values

C. Notes and Attachments

1. Notes: please include in the space below any additional information that will help DEP understand your submission.

2. Attachments:

Check here to submit attachments to this form (e.g., calculations) – add a note in the field above
indicating what is attached. For eDEP on-line filers, this will create a new step on your Current
Submittal Page where you can attach electronic files to your submittal. Please list attachments
that cannot be sent electronically in the notes field above and deliver them to DEP with a paper
copy of this form.

Bureau of Waste Prevention - Air Quality

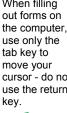
Emission Unit – Process Description

2006 Year of record 65

DEP EU# (old Point #) 1190564

Facility AQ identifier

Important: When filling out forms on the computer, use only the tab key to move your cursor - do not use the return





Α.	Emission Unit – Proc	ess	Descrip	otion
1.	Facility identifiers:			

CLEAN HARBORS OF BRAINTREE

a. Facility name

34839

b. DEP Account number

1190564

c. Facility AQ identifier - SSEIS ID number

Emission unit identifiers:



PAINT CAN POUR-OFF + CRUSHING

a. Facility's choice of emission unit name - edit as needed

b. Facility's emission unit number / code - edit as needed

65

c. DEP emissions unit # (old SSEIS Point #)

d. Combined Units - enter number of individual units



3. DEP approvals – leave blank if not applicable



b. DEP approval date (mm/dd/yyyy)

MBR-87-IND-191

a. Most recent approval number

4. Is this unit exempt under 310 CMR 7.02 Plan Approvals? yes ✓ no

5. If exempt from Plan Approval, indicate reason why (e.g., cite a specific DEP regulation):

Reason for exemption



6. Equipment manufacturer and model number and type:

APPLETON

500

a. Manufacturer

b. Model number

PAINT CAN CRUSHER

c. Equipment Type



Emission unit installation and decommission dates:

8/1/1995

a. Installation date - estimate if unknown (mm/dd/yyyy)

b. Decommission date (mm/dd/yyyy) - if applicable

Complete only if the unit was shut down permanently or replaced since the last report.

Bureau of Waste Prevention – Air Quality

BWP AQ AP-2

Emission Unit – Process Description

2006
ear of record
55
EP EU# (old Point #)
190564
acility AQ identifier

			_		
8.	Emission unit replace	ment:			
	a. Is this unit replacing	g another en	nission unit?		
	✓ no yes –	enter DFP'	s emissions un	nit number for the un	it being replaced below:
	F 110 J yes =	CHICI DEI	3 CITII33IOTI3 UI	in number for the arr	it being replaced below.
	DEP's emission unit numb	per and facility ι	unit name		
9.	Additional state repor	ting reguiren	nents:		
	·				oriania wa wait O
	a. Are there other rou	•		uirements for this er no – skip to	
	yes – specify repo		-	IV TIO — SKIP to	question 90
	b. Reporting frequence			_	
	☐ Monthly ☐ Quar	rterly 🗌 Se	emi-annual	Annual RES	
	(include Operating Permit	and Plan Appro	oval reports, but no	t exceedance reporting)	
	c. Is this unit subject	`	,		
	☐ NESHAP ☐ NSF	PS N	MACT		
	lla af amanatian fac				
10.	Hours of operation to	r the emissio	on unit: a. l	check if continuous	sly operated – 24 x 7 x 52
10.	·		_		sly operated – 24 x 7 x 52 0
10.	0 b. Number of hours per day		on unit: a. L 0 c. Number of day		sly operated – 24 x 7 x 52 O d. Number of weeks per year
10.	·	<u>, , , , , , , , , , , , , , , , , , , </u>	c. Number of day	ys per week	0 d. Number of weeks per year
10.	b. Number of hours per day	<u>, , , , , , , , , , , , , , , , , , , </u>	c. Number of day	ys per week n each calendar qual	d. Number of weeks per year
?	b. Number of hours per day e. Percent of total ann o	nual operatio	c. Number of day on that occurs in Q Q4	ys per week n each calendar qual Sum of Q1+Q2+Q3- (or 0% if the unit wa	0 d. Number of weeks per year
?	b. Number of hours per day	nual operatio	on that occurs in Q4 through Septer	ys per week n each calendar quai Sum of Q1+Q2+Q3- (or 0% if the unit wa mber 30:	d. Number of weeks per year
?	b. Number of hours per day e. Percent of total ann o	nual operatio organization Q3 ule – May 1	on that occurs in Q4 through Septer	ys per week n each calendar quai Sum of Q1+Q2+Q3- (or 0% if the unit wa mber 30:	d. Number of weeks per year rter: +Q4 must = 100% s not operated for any quarter)
?	b. Number of hours per day e. Percent of total ann o	nual operatio organization Q3 ule – May 1	on that occurs in Q4 through Septer	ys per week n each calendar qual Sum of Q1+Q2+Q3- (or 0% if the unit wa	d. Number of weeks per year
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11.	b. Number of hours per day e. Percent of total ann o	nual operatio 0 Q3 ule – May 1	on that occurs in Q4 through Septer 0 b. Ozone season	ys per week n each calendar quai Sum of Q1+Q2+Q3- (or 0% if the unit wa mber 30:	d. Number of weeks per year rter: +Q4 must = 100% s not operated for any quarter)
11.	b. Number of hours per day e. Percent of total ann o Q1 Q1 Q2 Ozone season schede o a. Ozone season hours per	nual operatio O Q3 ule – May 1 r day nt – select of	on that occurs in that occurs in Q4 through Septem 0 b. Ozone season	ys per week n each calendar quai Sum of Q1+Q2+Q3- (or 0% if the unit wa mber 30:	d. Number of weeks per year rter: +Q4 must = 100% s not operated for any quarter)
11.	b. Number of hours per day e. Percent of total ann o Q1 Q2 Ozone season schede o a. Ozone season hours per Emission release poir Non-Stack Release fugitive	nual operation orday Today Points: horizontal ve	on that occurs in Q4 through Septer D b. Ozone season	ys per week n each calendar qual Sum of Q1+Q2+Q3 (or 0% if the unit wa mber 30: days per week Physical Stacks: Vertical stack	d. Number of weeks per year rter: +Q4 must = 100% as not operated for any quarter) 0 c. Weeks operated in ozone season
11.	b. Number of hours per day e. Percent of total ann o Q1 Q2 Ozone season schede a. Ozone season hours per Emission release poir Non-Stack Release fugitive gooseneck	nual operation organic Q3 ule – May 1 r day nt – select organic Points: horizontal vedownward fa	on that occurs in that occurs in that occurs in that occurs in the occur	ys per week n each calendar quai Sum of Q1+Q2+Q3 (or 0% if the unit wa mber 30: days per week Physical Stacks:	d. Number of weeks per year rter: +Q4 must = 100% as not operated for any quarter) 0 c. Weeks operated in ozone season
11.	b. Number of hours per day e. Percent of total ann o Q1 Q1 Q2 Ozone season schede o a. Ozone season hours per Emission release poir Non-Stack Release	nual operation organic Q3 ule – May 1 r day nt – select organic Points: horizontal vedownward fant less than 1	on that occurs in that occurs in Q4 through Septer b. Ozone season ne: ?	ys per week n each calendar qual Sum of Q1+Q2+Q3 (or 0% if the unit wa mber 30: days per week Physical Stacks: Vertical stack	d. Number of weeks per year rter: +Q4 must = 100% as not operated for any quarter) 0 c. Weeks operated in ozone season
11.	b. Number of hours per day e. Percent of total and o Q1 Q2 Ozone season schede a. Ozone season hours per Emission release point Non-Stack Release fugitive	nual operation organic Q3 ule – May 1 r day nt – select organic Points: horizontal veric downward fait less than 1 nt, skip to quest	on that occurs in Q4 through Septer b. Ozone season ne: ?	ys per week n each calendar quan Sum of Q1+Q2+Q3- (or 0% if the unit wa mber 30: days per week Physical Stacks: Vertical stack vertical with ra	d. Number of weeks per year rter: +Q4 must = 100% ss not operated for any quarter) 0 c. Weeks operated in ozone season in cap/sleeve
11.	b. Number of hours per day e. Percent of total ann o Q1 Q1 Q2 Ozone season schede o a. Ozone season hours per Emission release poir Non-Stack Release	nual operation organic Q3 ule – May 1 r day nt – select organic Points: horizontal vedownward fant less than 1 nt, skip to quest sical stack (if	on that occurs in that occurs in Q4 through Septer b. Ozone season ent icing vent 10ft tion 14. f applicable) — p	ys per week n each calendar quan Sum of Q1+Q2+Q3 (or 0% if the unit wa mber 30: days per week Physical Stacks: Vertical stack vertical with ra pick from the list belo	d. Number of weeks per year rter: +Q4 must = 100% ss not operated for any quarter) 0 c. Weeks operated in ozone season in cap/sleeve
11.	b. Number of hours per day e. Percent of total and o Q1 Q2 Ozone season schede a. Ozone season hours per Emission release poir Non-Stack Release fugitive I gooseneck Q vertical stack/ver If Non-Stack release poir Link this unit to a phys 10 CUT OFF ROOM - PAI Facility' s stack identifier fr	nual operation organic Q3 ule – May 1 r day nt – select organic Points: horizontal veric downward faint less than 1 nt, skip to quest sical stack (if	on that occurs in that occurs in that occurs in that occurs in the occurs in the occurs in the occurs of the occur	ys per week n each calendar quan Sum of Q1+Q2+Q3- (or 0% if the unit wa mber 30: days per week Physical Stacks: Vertical stack vertical with ra pick from the list belocation of the pick from the list belocation of the pick from the SZERO 06 contains the pick from the STACK for the pick from t	d. Number of weeks per year rter: +Q4 must = 100% as not operated for any quarter) 0 c. Weeks operated in ozone season in cap/sleeve

Bureau of Waste Prevention – Air Quality

BWP AQ AP-2

Emission Unit - Process Description

2006
Year of record
65
DEP EU# (old Point #)
1190564
Facility AO identifier

?	yes – answer a t		s unit of its related control de to Question 15	evices ?
How to delete monitor		Monitor 1	Monitor 2	Monitor 3
	a. Monitor type:	check only one:	check only one:	check only one:
Do not leave blank – if unknown write		☐ CEMs ☐ opacity ☐ fuel flow meter ☐ time recorder ☐ temperature recorder ☐ pressure ☐ other – describe:	☐ CEMs ☐ opacity ☐ fuel flow meter ☐ time recorder ☐ temperature recorder ☐ pressure ☐ other — describe:	☐ CEMs ☐ opacity ☐ fuel flow meter ☐ time recorder ☐ temperature recorder ☐ pressure ☐ other – describe:
' unknown' or estimate		Describe " other"	Describe " other"	Describe " other"
	b. Manufacturer:			
	c. Model #:			
	d. Monitor ID #:			
	e. Installation date:	Facility's Designation	Facility's Designation	Facility's Designation
(>	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
	f. DEP approval #:			
Leave f, g, h	g. DEP approval date:			
applicable.	h. Decommission date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
	i. Recorder ?	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
	i. Recorder ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
	j. Audible alarm ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
?	k. Data system ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
	I. Monitored pollutants - check all that apply:	PM 10 PM 2.5 SO2 CO VOC NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity other – describe:	PM 10 PM 2.5 SO2 CO VOC NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity other – describe:	PM 10 PM 2.5 SO2 CO VOC NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity other – describe:
		DOCONDO OUTO	DOSONIDO OUNO	2000100 00101

Bureau of Waste Prevention – Air Quality

BWP AQ AP-2

Emission Unit - Process Description

2006
Year of record
65
DEP EU# (old Point #)
1190564
Facility AQ identifier

2	15.	Are there air pollution control de	evices on this emissions unit?	Check here if you need to report more than 3 air pollution control devices on
How to delete a control		☐ yes – answer a through i	✓ no – skip to Section B	this unit. eDEP will add another page of control devices after this form.
		Air pollution control device 1	Air pollution control device 2	Air pollution control device 3
		a. Type	Туре	Туре
Do not leave blank –		b. Manufacturer	Manufacturer	Manufacturer
if unknown write ' unknown' of		C. Model number	Model number	Model number
estimate		d. Facility's ID for this device	Facility's ID for this device	Facility's ID for this device
<u> </u>	?	e. Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)
Leave f, g, h		f. DEP approval # (most recent)	DEP approval # (most recent)	DEP approval # (most recent)
blank if not applicable.		g. DEP approval date (mm/dd/yyyy)	DEP approval date (mm/dd/yyyy)	DEP approval date (mm/dd/yyyy)
		h. Decommission date (mm/dd/yyyy)	Decommission date (mm/dd/yyyy)	Decommission date (mm/dd/yyyy)
	?	i. Percent overall efficiency - er	nter for all pdlutants that the device	was designed to control:
PM 10		% Overall eff.	% Overall eff.	% Overall eff.
PM 2.5	i			
SO2		% Overall eff.	% Overall eff.	% Overall eff.
		% Overall eff.	% Overall eff.	% Overall eff.
CO		% Overall eff.	% Overall eff.	% Overall eff.
VOC	:	% Overall eff.	% Overall eff.	% Overall eff.
NO2		% Overall eff.	% Overall eff.	% Overall eff.
NH3		76 Overall ell.	% Overall ell.	76 Overall ell.
HOC		% Overall eff.	% Overall eff.	% Overall eff.
		% Overall eff.	% Overall eff.	% Overall eff.
HYC		% Overall eff.	% Overall eff.	% Overall eff.
Hg		% Overall eff.	% Overall eff.	% Overall eff.
Pb)	% Overall eff.	% Overall eff.	% Overall eff.
Other				
		% Overall eff.	% Overall eff.	% Overall eff.
		Specify " Other"	Specify " Other"	Specify " Other"

Massachusetts Department of Environmental ProtectionBureau of Waste Prevention – Air Quality

BWP AQ AP-2

Emission Unit – Process Description

2006
ear of record
5
EP EU# (old Point #)
190564
acility AO identifier

	В.	Emissions for Raw Materials/Finis	shed Products	
		Add a NEW material / product: Check the box if you need to add a material or product that you did not report on previously (eDEP will add a blank Sect. B form to your package).	unit pe <i>rmanently</i> . You mu	or making this product in this st still report data for this year " 0" – the material / product
	1.	Operation description:	PAINT CANS	
ow does eDEI	5	a. Raw material or finished product name: Number of segments for this unit (previous records): 1		1
andle multiple		b. Is material/product an input or output ?	✓ input □ output	DEP#
aw materials o nished roducts ?	•	c. Process description:	PAINT CAN POUR - OFF	+ CRUSHING
		d. Source Classification Code (SCC): (see instructions)	49099999 SC Code (call DEP if SC Code	will not validate)
			ORGANIC SOLVENT N	OT CLASSIFIED
		e. Maximum process rate for material/product:	SCC Description – filled by eDE	EP upon validation TONS
		e. Maximum process rate for material/product.	Amount	Units per hour
ote: efinition of laximum		f. If organic material, give weight % of:	VOC	HOC
rocess rate			HYC	
		g. Total actual raw material used or finished product produced for year of record:	O Amount	TONS Units
		Enter " 0" if not used in the year of record	Prior year – eDEP only	TONS Units prior year
				, ,
(?	h. Do you have raw material or finished product restrictions?	☐ yes 🗹 no – skip	to question 1.I
1	?	i. DEP approval number for restrictions:	Most recent approval number for	or this material or product
		j. Short term raw material/finished product restriction – if none, leave blank:	Quantity (amount or hours)	Units
		restriction – il fione, icave biank.	Per: month weel	
		k. Annual material/product restrictionif none, leave blank:	Quantity (amount or hours)	Units
		I. Indicate which air pollution control devices from Section A, Question 15 control this	Device ID #	Device ID #
		material/product by listing the facility- designated control device ID # for each unit	Device ID #	Device ID #
		that applies:	Device ID #	Device ID #
		How to make a new air pollution control device appear in these drop menus?	check here if ALL air pollur unit apply to this material/p	
		09/19/05	BWP AQ AP-2 Emission Unit -	Process Description • Page 5

Bureau of Waste Prevention - Air Quality

BWP AQ AP-2

Short term period:

Basis - DEP approval number or regulation:

MBR-87-IND-

Emission Unit - Process Description

2006

Year of record

65

DEP EU# (old Point #) 1190564

Facility AQ identifier

B. Emissions for Raw Materials/Finished Products (cont.)

2. Total emissions for this material/product – tons per year:

?	2. Total emissions for this	materiai/product	t – tons per year	•		
Important: Leaving blanks for Actual and Potential	Pollutant	PM10	PM2.5	SO2	NO2	со
emissions means that you are certifying that	Actual for previous year eDEP only:	Tons	Tons	Tons	Tons	Tons
there were less than 0.0001 (or zero) tons of emissions for each	Actual for year of record:	Tons	Tons	Tons	Tons	Tons
blank.	Potential emissions at maximum capacity uncontrolled:	Tons	Tons	Tons	Tons	Tons
	Emission factor:				·	
	In pounds per unit::					
ial or Iy	Max allowed – annual:	Tons	Tons	Tons	Tons	Tons
For this material or product only (leave blank if none)	Max allowed — short term:	Pounds	Pounds	Pounds	Pounds	Pounds
r this prodi	Short term period:					
Fo	Basis: DEP approval number or regulation:	MBR-87-IND-	MBR-87-IND-	MBR-87-IND-	MBR-87-IND-	MBR-87-IND-
Important:						Other:
Reporting now required for	Pollutant	VOC	нос	*Reserved*	NH3	specify
t-Butyl Acetate	Actual for previous year eDEP only:	Tons	Tons	Tons	Tons	Tons
	Actual for year of record:	Tons	Tons	Tons	Tons	Tons
	Potential emissions at maximum capacity uncontrolled:	Tons	Tons	Tons	Tons	Tons
	Emission factor:					
	In pounds per unit:					
al or one)	Max allowed – annual:	Tons	Tons	Tons	Tons	Tons
s material or duct only	Max allowed – short term:	Pounds	Pounds	Pounds	Pounds	Pounds
છે. છે છે	Chart tarm paried					

check to enter your own values

MBR-87-IND-

Bureau of Waste Prevention - Air Quality

BWP AQ AP-2

Emission Unit – Process Description

2006
ear of record
PEP EU# (old Point #)
acility AO identifier

,	0	b. Typical ozone day NOx emissions – pounds per day	
	a. Typical ozone day VOC emissions – pounds per day		
	check to enter your own values	check to enter your own values	

C. Notes and Attachments

1. **Notes**: please include in the space below any additional information that will help DEP understand your submission.

2. Attachments:

☐ Check here to submit attachments to this form (e.g., calculations). For eDEP on-line filers, this will create a new step on your Current Submittals Page where you will attach electronic files to your submittal. For attachments that cannot be sent electronically, please list all such attachments below and deliver them to DEP with a paper copy of this form.

Bureau of Waste Prevention - Air Quality

Emission Unit – Process Description

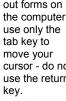
2006 Year of record

61 DEP EU# (old Point #)

1190564

Facility AQ identifier

Important: When filling out forms on the computer, cursor - do not use the return





Α.	Emissi	on U	Init –	Process	Descri	ption

,			
CLEAN	HARBORS	OF	BRAINTREE

a. Facility name

1. Facility identifiers:

34839

b. DEP Account number

1190564

c. Facility AQ identifier - SSEIS ID number

Emission unit identifiers:



REPACKAGING SOLVENTS

a. Facility's choice of emission unit name - edit as needed

b. Facility's emission unit number / code - edit as needed

61

c. DEP emissions unit # (old SSEIS Point #)

d. Combined Units - enter number of individual units



3. DEP approvals – leave blank if not applicable

MBR-87-IND-191

a. Most recent approval number



b. DEP approval date (mm/dd/yyyy)

4. Is this unit exempt under 310 CMR 7.02 Plan Approvals? yes ✓ no

5. If exempt from Plan Approval, indicate reason why (e.g., cite a specific DEP regulation):

Reason for exemption



units?

6. Equipment manufacturer and model number and type:

N/A

N/A

a. Manufacturer

b. Model number

DRUMS AND BULK TANKERS FOR PACKAGING SOLVENTS

c. Equipment Type



Emission unit installation and decommission dates:

1/1/1986

a. Installation date - estimate if unknown (mm/dd/yyyy)

b. Decommission date (mm/dd/yyyy) - if applicable

Complete only if the unit was shut down permanently or replaced since the last report.

Bureau of Waste Prevention – Air Quality

BWP AQ AP-2

Emission Unit – Process Description

2006
Year of record
61
DEP EU# (old Point #)
1190564
Facility AQ identifier

8.		Emission unit replaceme	nt:			
		a. Is this unit replacing a	nother en	nission unit?		
		, ,				
		✓ no yes – en	ter DEP	s emissions un	it number for the ur	nit being replaced below:
		DEP's emission unit number a	and facility u	unit name		
			-			
9.		Additional state reporting	requiren	nents:		
		a. Are there other routine	air quali	ty reporting req	uirements for this e	emissions unit?
		☐ yes – specify reporting	ng frequer	ncy below	no − skip to	question 9c
		b. Reporting frequency -	- check a	ill that apply:		
		☐ Monthly ☐ Quarter] Annual □ RES	
		(include Operating Permit and				
		c. Is this unit subject to			. e	
		□ NESHAP □ NSPS	·	ласт ЛАСТ		
10		-				usly operated – 24 x 7 x 52
10		-				
10)	0 b. Number of hours per day		o. Number of day	vs per week	0 d. Number of weeks per year
?	•	b. Number of hours per day e. Percent of total annua	l operatio	c. Number of day	vs per week n each calendar qua	d. Number of weeks per year
10	•	b. Number of hours per day e. Percent of total annua	l operatio	c. Number of day	vs per week n each calendar qua	0 d. Number of weeks per year
?	•	b. Number of hours per day e. Percent of total annua	l operatio	c. Number of day on that occurs in Q Q4	ys per week n each calendar qua Sum of Q1+Q2+Q3 (or 0% if the unit w	d. Number of weeks per year
?	1.	b. Number of hours per day e. Percent of total annua o Q1 Q2 Ozone season schedule	I operatio O Q3 — May 1	on that occurs in Q4 through Septer	s per week n each calendar qua Sum of Q1+Q2+Q3 (or 0% if the unit w	d. Number of weeks per year arter: 3+Q4 must = 100% as not operated for any quarter)
?	1.	b. Number of hours per day e. Percent of total annua 0 Q1 Q2	I operatio O Q3 — May 1	on that occurs in Q4 through Septer	s per week n each calendar qua Sum of Q1+Q2+Q3 (or 0% if the unit w	d. Number of weeks per year arter: 3+Q4 must = 100% as not operated for any quarter)
?	1.	b. Number of hours per day e. Percent of total annua o Q1 Q2 Ozone season schedule	I operatio O Q3 — May 1	on that occurs in Q4 through Septer	s per week n each calendar qua Sum of Q1+Q2+Q3 (or 0% if the unit w	d. Number of weeks per year arter: 3+Q4 must = 100% as not operated for any quarter)
1	1.	b. Number of hours per day e. Percent of total annua 0	I operatio O Q3 — May 1	on that occurs in Q4 through Septer 0 b. Ozone season	s per week n each calendar qua Sum of Q1+Q2+Q3 (or 0% if the unit w	d. Number of weeks per year arter: 3+Q4 must = 100% as not operated for any quarter)
1	1.	b. Number of hours per day e. Percent of total annua o Q1 Q2 Ozone season schedule o a. Ozone season hours per day Emission release point —	I operation O Q3 — May 1	on that occurs in Q4 through Septer 0 b. Ozone season	rs per week n each calendar qua Sum of Q1+Q2+Q3 (or 0% if the unit w mber 30: days per week	d. Number of weeks per year arter: 3+Q4 must = 100% as not operated for any quarter)
1	1.	b. Number of hours per day e. Percent of total annua o Q1 Q1 Q2 Ozone season schedule o a. Ozone season hours per day Emission release point — Non-Stack Release Po	I operation O Q3 — May 1 y select or ints:	on that occurs in Q4 through Septer D b. Ozone season	rs per week n each calendar qua Sum of Q1+Q2+Q3 (or 0% if the unit w mber 30: days per week Physical Stacks:	d. Number of weeks per year arter: 3+Q4 must = 100% as not operated for any quarter)
1	1.	b. Number of hours per day e. Percent of total annua o Q1 Q1 Q2 Ozone season schedule o a. Ozone season hours per day Emission release point — Non-Stack Release Po fugitive	I operation O Q3 — May 1 y select or ints:	on that occurs in Q4 through Septer D b. Ozone season	rs per week n each calendar qua Sum of Q1+Q2+Q3 (or 0% if the unit w mber 30: days per week Physical Stacks:	d. Number of weeks per year arter: 3+Q4 must = 100% as not operated for any quarter)
1	1.	b. Number of hours per day e. Percent of total annua o Q1 Q1 Q2 Ozone season schedule o a. Ozone season hours per day Emission release point — Non-Stack Release Po fugitive	I operation O Q3 — May 1 y select or ints: izontal very and far	on that occurs in Q4 through Septer O b. Ozone season ne: ?	rs per week n each calendar qua Sum of Q1+Q2+Q3 (or 0% if the unit w mber 30: days per week Physical Stacks:	d. Number of weeks per year earter: 3+Q4 must = 100% eas not operated for any quarter) 0 c. Weeks operated in ozone season
1:	1.	b. Number of hours per day e. Percent of total annua 0	l operation O Q3 — May 1 y select or ints: izontal very ixy ixy kip to quest	on that occurs in Q4 through Septer b. Ozone season ne: ?	rs per week n each calendar qua Sum of Q1+Q2+Q3 (or 0% if the unit w mber 30: days per week Physical Stacks: Vertical stack vertical with ra	d. Number of weeks per year arter: 3+Q4 must = 100% as not operated for any quarter) 0 c. Weeks operated in ozone season
1:	1.	b. Number of hours per day e. Percent of total annua o	I operation O Q3 — May 1 y select or ints: izontal verynward far ess than 1 kip to quest il stack (if	on that occurs in that occurs in that occurs in the thickness of the thick	rs per week n each calendar qua Sum of Q1+Q2+Q3 (or 0% if the unit w mber 30: days per week Physical Stacks: Vertical stack vertical with ra	d. Number of weeks per year arter: 3+Q4 must = 100% as not operated for any quarter) 0 c. Weeks operated in ozone season
1:	1. 2.	b. Number of hours per day e. Percent of total annua 0	I operation O Q3 — May 1 select or ints: izontal verynward far ess than 1 kip to quest al stack (if	on that occurs in that occurs in Q4 through Septer On b. Ozone season ent occurs in Q4 ent occurs in	rs per week n each calendar qua Sum of Q1+Q2+Q3 (or 0% if the unit week) mber 30: days per week Physical Stacks: vertical stack vertical with rapic or continuous process.	d. Number of weeks per year earter: 3+Q4 must = 100% eas not operated for any quarter) O c. Weeks operated in ozone season eain cap/sleeve low:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-2

Emission Unit - Process Description

2006
Year of record
61
DEP EU# (old Point #)
1190564
Facility AO identifier

?	yes – answer a	through I v linis emission	p to Question 15	devices ?
How to delete monitor	a	Monitor 1	Monitor 2	Monitor 3
(a. Monitor type:	check only one:	check only one:	check only one:
Do not leave blank – if unknown write		☐ CEMs ☐ opacity ☐ fuel flow meter ☐ time recorder ☐ temperature recorder ☐ pressure ☐ other – describe:	☐ CEMs ☐ opacity ☐ fuel flow meter ☐ time recorder ☐ temperature recorder ☐ pressure ☐ other – describe:	☐ CEMs ☐ opacity ☐ fuel flow meter ☐ time recorder ☐ temperature recorder ☐ pressure ☐ other – describe:
' unknown' or estimate		Describe " other"	Describe " other"	Describe " other"
	b. Manufacturer:			
	c. Model #:			
	d. Monitor ID #:			
	- Installation data:	Facility's Designation	Facility's Designation	Facility's Designation
(e. Installation date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
	f. DEP approval #:			
Leave f, g, h	g. DEP approval date:			
applicable.	h. Decommission date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
((mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
	i. Recorder ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
	j. Audible alarm ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
?	k. Data system ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
	I. Monitored pollutants - check all that apply:	PM 10 PM 2.5 SO2 CO VOC NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity other – describe:	PM 10 PM 2.5 SO2 CO VOC NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity other – describe:	PM 10 PM 2.5 SO2 CO VOC NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity other – describe:
		Describe offici	Describe offici	Describe " other"

Bureau of Waste Prevention - Air Quality

BWP AQ AP-2

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2006
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1190564
Facility AQ identifier

2	15.	Are there air pollution control de	Check here if you need to report more than 3 air pollution control devices on	
How to delete a control		☐ yes – answer a through i	✓ no – skip to Section B	this unit. eDEP will add another page of control devices after this form.
		Air pollution control device 1	Air pollution control device 2	Air pollution control device 3
(-			
		a. Type	Туре	Туре
Do not leave blank – if unknown		b. Manufacturer	Manufacturer	Manufacturer
write ' unknown' or		C. Model number	Model number	Model number
estimate		d. Facility's ID for this device	Facility's ID for this device	Facility's ID for this device
	?	e. Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)
Leave f, g, h		f. DEP approval # (most recent)	DEP approval # (most recent)	DEP approval # (most recent)
blank if not applicable.		g. DEP approval date (mm/dd/yyyy)	DEP approval date (mm/dd/yyyy)	DEP approval date (mm/dd/yyyy)
		h. Decommission date (mm/dd/yyyy)	Decommission date (mm/dd/yyyy)	Decommission date (mm/dd/yyyy)
	?	i. Percent overall efficiency – er	nter for all pollutants that the device wa	as designed to control:
PM 10		% Overall eff.	% Overall eff.	% Overall eff.
PM 2.5	5	70 Overall etc.		
SO2	,	% Overall eff.	% Overall eff.	% Overall eff.
		% Overall eff.	% Overall eff.	% Overall eff.
CC)	% Overall eff.	% Overall eff.	% Overall eff.
VOC	;	% Overall eff.	% Overall eff.	% Overall eff.
NO2	2	Overall ell.		
NH3	١	% Overall eff.	% Overall eff.	% Overall eff.
		% Overall eff.	% Overall eff.	% Overall eff.
HOC		% Overall eff.	% Overall eff.	% Overall eff.
HYC	;	% Overall eff.	% Overall eff.	% Overall eff.
Hg)	% Overall eff.	% Overall eff.	% Overall eff.
Pb)	% Overall eff.	9/ Ovorall off	9/ Overall off
Othe	r		% Overall eff.	% Overall eff.
		% Overall eff.	% Overall eff.	% Overall eff.
		Specify " Other"	Specify " Other"	Specify " Other"

Massachusetts Department of Environmental Protection Bureau of Waste Prevention – Air Quality

BWP AQ AP-2

Emission Unit – Process Description

2006
Year of record
61
DEP EU# (old Point #)
1190564
Facility AO identifier

	В.	Emissions for Raw Materials/Finis	hed Products	
		Add a NEW material / product: Check the box if you need to add a material or product that you did not report on previously (eDEP will add a blank Sect. B form to your package).	unit p <i>ermanently</i> . You mu of record even if amount is	uct: check the box if you I or making this product in this st still report data for this year " 0" – the material / product init in the next report cycle.
	1.	Operation description:	SOLVENTS	
ow does eDEF	D.	a. Raw material or finished product name: Number of segments for this unit (previous records): 1b. Is material/product an input or output ?	✓ input □ output	1
iw materials of nished roducts ?	r	c. Process description:	REPACKAGING SOLVE PACKAGED IN 2006-	DEP# NTS -NONE
		d. Source Classification Code (SCC): (see instructions)	49099999 SC Code (call DEP if SC Code ORGANIC SOLVENT N	OT CLASSIFIED
?		e. Maximum process rate for material/product:	SCC Description – filled by eDI Mount	TONS Units per hour
ote: efinition of laximum rocess rate		f. If organic material, give weight % of:	VOC	HOC
occoo idio		g. Total actual raw material used or finished product produced for year of record:	HYC 0 Amount	TONS Units
		Enter " 0" if not used in the year of record	Prior year – eDEP only	Units prior year
(?	h. Do you have raw material or finished product restrictions?	☐ yes no – skip	to question 1.I
(?	i. DEP approval number for restrictions:	Most recent approval number f	or this material or product
		j. Short term raw material/finished product restriction – if none, leave blank:	Quantity (amount or hours)	Units
		, , , , , , , , , , , , , , , , , , ,	Per: month wee	k
		k. Annual material/product restrictionif none, leave blank:	Quantity (amount or hours)	Units
		I. Indicate which air pollution control devices from Section A, Question 15 control this	Device ID #	Device ID #
		material/product by listing the facility- designated control device ID # for each unit that applies:	Device ID #	Device ID #
		How to make a new air pollution control device appear in these drop menus?	Device ID # check here if ALL air pollu unit apply to this material/	Device ID # tion control devices on the product
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Bureau of Waste Prevention - Air Quality

BWP AQ AP-2

Emission Unit - Process Description

2006

Year of record

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Facility AQ identifier

B. Emissions for Raw Materials/Finished Products (cont.)

2. Total emissions for this material/product – tons per year:

?	2. Total emissions for this	materiai/product	: – tons per year	:		
Important: Leaving blanks for Actual and Potential	Pollutant	PM10	PM2.5	SO2	NO2	СО
emissions means that you are certifying that there were less than	Actual for previous year eDEP only:	Tons	Tons	Tons	Tons	Tons
0.0001 (or zero) tons of emissions for each blank.	Actual for year of record: Potential emissions at maximum	Tons	Tons	Tons	Tons	Tons
Dialik.	capacity uncontrolled:	Tons	Tons	Tons	Tons	Tons
	Emission factor: In pounds per unit::					
	in poundo per unit.					
ial or	Max allowed – annual:	Tons	Tons	Tons	Tons	Tons
For this material or product only (leave blank if none)	Max allowed — short term:	Pounds	Pounds	Pounds	Pounds	Pounds
or this	Short term period:	MBR-87-IND-	MBR-87-IND-	MBR-87-IND-	MBR-87-IND-	MBR-87-IND-
Ľ.	Basis: DEP approval number or regulation:	MIDIT-07-IND-				
Important:						Other:
Reporting now required for	Pollutant	VOC	НОС	*Reserved*	NH3	specify
t-Butyl Acetate	Actual for previous year eDEP only:	Tons	Tons	Tons	Tons	Tons
	Actual for year of record:	Tons	Tons	Tons	Tons	Tons
	Potential emissions at maximum capacity uncontrolled:	Tons	Tons	Tons	Tons	Tons
	Emission factor:					
	In pounds per unit:	-				
al or y	Max allowed – annual:	Tons	Tons	Tons	Tons	Tons
s material or tuct only	Max allowed – short term:	Pounds	Pounds	Pounds	Pounds	Pounds

Short term period:

Basis - DEP approval number or regulation:

MBR-87-IND-

MBR-87-IND-

check to enter your own values

Bureau of Waste Prevention - Air Quality

BWP AQ AP-2

Emission Unit – Process Description

2006
ear of record
DEP EU# (old Point #) 1190564
acility AO identifier

? 3.	Ozone season emissions – May 1 through September 30:				
	0	0			
	a. Typical ozone day VOC emissions – pounds per day	b. Typical ozone day NOx emissions – pounds per day			
	check to enter your own values	check to enter your own values			
	NOTE : The form has estimated the emissions for you. However, you may enter your own values by checking the boxes above for VOC and NOx.				

C. Notes and Attachments

1. **Notes**: please include in the space below any additional information that will help DEP understand your submission.

2. Attachments:

☐ Check here to submit attachments to this form (e.g., calculations). For eDEP on-line filers, this will create a new step on your Current Submittals Page where you will attach electronic files to your submittal. For attachments that cannot be sent electronically, please list all such attachments below and deliver them to DEP with a paper copy of this form.

Bureau of Waste Prevention - Air Quality

Emission Unit - Process Description

2006 Year of record 5 DEP EU# (old Point #) 1190564

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Important: When filling out forms on the computer, use only the tab key to move your use the return key.







Α.	Emissi	ion U	Init –	Process	Descr	iption

	CLEAN	HARBORS	OF BRAINTREE	
--	-------	---------	--------------	--

a. Facility name

1. Facility identifiers:

34839

b. DEP Account number

1190564

c. Facility AQ identifier - SSEIS ID number

Emission unit identifiers:



2 DRUM CRUSHING LINES

a. Facility's choice of emission unit name - edit as needed

5

b. Facility's emission unit number / code - edit as needed

c. DEP emissions unit # (old SSEIS Point #)

d. Combined Units - enter number of individual units



3. DEP approvals – leave blank if not applicable

MBR-87-IND-191



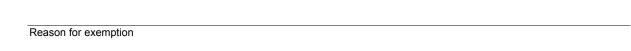
1/13/1988

a. Most recent approval number

b. DEP approval date (mm/dd/yyyy)

4. Is this unit exempt under 310 CMR 7.02 Plan Approvals? yes ✓ no

5. If exempt from Plan Approval, indicate reason why (e.g., cite a specific DEP regulation):





6. Equipment manufacturer and model number and type:

GREENBECK

18 SWB

a. Manufacturer

b. Model number

c. Equipment Type

DRUM CRUSHER

How to delete a unit? (click ?-icon)

Emission unit installation and decommission dates:

6/1/1986

a. Installation date - estimate if unknown (mm/dd/yyyy)

b. Decommission date (mm/dd/yyyy) - if applicable

Complete only if the unit was shut down permanently or replaced since the last report.

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8.	Emission unit replacement:				
	a. Is this unit replacing another emission unit?				
	✓ no	o's emissions ur	nit number for the un	it being replaced below:	
	DEP' s emission unit number and facility unit name				
9.	9. Additional state reporting requirements:				
	a. Are there other routine air qua ☐ yes – specify reporting frequency		•		
	b. Reporting frequency – check all that apply: Monthly Quarterly Semi-annual Annual RES (include Operating Permit and Plan Approval reports, but not exceedance reporting) c. Is this unit subject to (check all that apply):				
	□ NESHAP □ NSPS □	MACT			
10.	Hours of operation for the emiss	sion unit: a. [check if continuou	sly operated – 24 x 7 x 52	
	0	0		0	
0 0 b. Number of hours per day c. Number of days per week 0 d. Number of week				al Niverban of visales nonvisan	
			, , , , , , ,	d. Number of weeks per year	
	e. Percent of total annual operation				
_	e. Percent of total annual operations of the total annual operations of tot	tion that occurs i	n each calendar qua	rter:	
11.	·	tion that occurs in Q4	n each calendar qua Sum of Q1+Q2+Q3 (or 0% if the unit wa	rter:	
11.		tion that occurs in O Q4 1 through Septe	n each calendar qua Sum of Q1+Q2+Q3 (or 0% if the unit wa mber 30:	rter: +Q4 must = 100% is not operated for any quarter)	
11.	0 0 0 Q2 Q3	tion that occurs in O Q4 1 through Septe	n each calendar qua Sum of Q1+Q2+Q3 (or 0% if the unit wa mber 30:	rter: +Q4 must = 100% is not operated for any quarter)	
		tion that occurs in O Q4 1 through Septe O b. Ozone season	n each calendar qua Sum of Q1+Q2+Q3 (or 0% if the unit wa mber 30:	rter: +Q4 must = 100% is not operated for any quarter)	
	Ozone season schedule – May Oano Season hours per day	tion that occurs in O Q4 1 through Septe O b. Ozone season	n each calendar qua Sum of Q1+Q2+Q3 (or 0% if the unit wa mber 30:	rter: +Q4 must = 100% is not operated for any quarter)	
	Ozone season schedule – May Oa. Ozone season hours per day Emission release point – select Non-Stack Release Points: I fugitive I horizontal	tion that occurs in O Q4 1 through Septe O b. Ozone season t one: ?	n each calendar qua Sum of Q1+Q2+Q3 (or 0% if the unit wa mber 30: days per week	rter: +Q4 must = 100% as not operated for any quarter) O c. Weeks operated in ozone season	
12.	Ozone season schedule – May Oa. Ozone season hours per day Emission release point – select Non-Stack Release Points: fugitive horizontal gooseneck downward	tion that occurs in O Q4 1 through Septe O b. Ozone season one: vent facing vent facing vent n 10ft estion 14. (if applicable) —	n each calendar qua Sum of Q1+Q2+Q3 (or 0% if the unit wa mber 30: days per week Physical Stacks: vertical stack vertical with ra	rter: +Q4 must = 100% Is not operated for any quarter) O c. Weeks operated in ozone season in cap/sleeve	

Bureau of Waste Prevention – Air Quality

BWP AQ AP-2

Emission Unit - Process Description

2006
Year of record
5
DEP EU# (old Point #)
1190564
Facility AO identifier

?	 14. Is there monitoring equipment on this emissions unit or its related control devices? 					
How to delete monitor	a	Monitor 1	Monitor 2	Monitor 3		
	a. Monitor type:	check only one: CEMs opacity	check only one: CEMs opacity	check only one: ☐ CEMs ☐ opacity		
Do not leave blank – if unknown write		fuel flow meter time recorder temperature recorder pressure other – describe:	fuel flow meter time recorder temperature recorder pressure other – describe:	fuel flow meter time recorder temperature recorder pressure other – describe:		
' unknown' or estimate	b. Manufacturer:	Describe " other"	Describe " other"	Describe " other"		
	c. Model #:					
	d. Monitor ID #:	Facility's Designation	Facility's Designation	Facility's Designation		
(e. Installation date: f. DEP approval #:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)		
Leave f, g, h	g. DEP approval date:					
applicable.	h. Decommission date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)		
	i. Recorder ?	(mm/dd/yyyy) □ yes □ no	(mm/dd/yyyy) ☐ yes ☐ no	(mm/dd/yyyy) ☐ yes ☐ no		
	j. Audible alarm ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no		
?	k. Data system ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no		
	I. Monitored pollutants - check all that apply:	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other - describe:	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe:	□ PM 10 □ PM 2.5 □ SO2 □ CO □ VOC □ NO2 □ NH3 □ Mercury □ Oxygen □ CO2 □ H2S □ HCL □ Opacity □ other - describe:		
		Describe " other"	Describe " other"	Describe " other"		

Bureau of Waste Prevention - Air Quality

BWP AQ AP-2

Emission Unit - Process Description

2006
Year of record
5
DEP EU# (old Point #)
1190564
Facility AQ identifier

? 15	. Are there air pollution control de	evices on this emissions unit?	Check here if you need to report more than 3 air pollution control devices on	
How to delete a control	☐ yes – answer a through i	✓ no – skip to Section B	this unit. eDEP will add another page of control devices after this form.	
	Air pollution control device 1	Air pollution control device 2	Air pollution control device 3	
	a. Type	Туре	Туре	
Do not				
leave blank – if unknown	b. Manufacturer	Manufacturer	Manufacturer	
write ' unknown' or	C. Model number	Model number	Model number	
estimate	d. Facility's ID for this device	Facility's ID for this device	Facility's ID for this device	
?	e. Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)	
Leave f, g, h	f. DEP approval # (most recent)	DEP approval # (most recent)	DEP approval # (most recent)	
blank if not applicable.	g. DEP approval date (mm/dd/yyyy)	DEP approval date (mm/dd/yyyy)	DEP approval date (mm/dd/yyyy)	
	h. Decommission date (mm/dd/yyyy)	Decommission date (mm/dd/yyyy)	Decommission date (mm/dd/yyyy)	
?	i. Percent overall efficiency – er	nter for all pdlutants that the device	was designed to control:	
PM 10	% Overall eff.	% Overall eff.	% Overall eff.	
PM 2.5	% Overall eff.	% Overall eff.	% Overall eff.	
SO2	% Overall eff.	% Overall eff.	% Overall eff.	
CO	% Overall eff.	% Overall eff.	% Overall eff.	
VOC	% Overall eff.	% Overall eff.	% Overall eff.	
NO2	% Overall eff.	% Overall eff.	% Overall eff.	
NH3	% Overall eff.	% Overall eff.	% Overall eff.	
НОС				
HYC	% Overall eff.	% Overall eff.	% Overall eff.	
	% Overall eff.	% Overall eff.	% Overall eff.	
Hg	% Overall eff.	% Overall eff.	% Overall eff.	
Pb	% Overall eff.	% Overall eff.	% Overall eff.	
Other	% Overall eff.	% Overall eff.	% Overall eff.	
	Specify " Other"	Specify " Other"	Specify " Other"	

Massachusetts Department of Environmental Protection Bureau of Waste Prevention – Air Quality

BWP AQ AP-2

Emission Unit - Process Description

2006
Year of record
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DEP EU# (old Point #)
1190564
Facility AQ identifier

	B. Emissions for Raw Materials/Finished Products					
		Add a NEW material / product: Check the box if you need to add a material or product that you did not report on previously (eDEP will add a blank Sect. B form to your package).	stopped using this materi unit permanently. You m of record even if amount	duct: check the box if you all or making this product in this ust still report data for this year is "0" — the material / product unit in the next report cycle.		
	1.	Operation description:	RCRA EMPTY DRUMS			
?		a. Raw material or finished product name: Number of segments for this unit (previous records): 1				
ow does eDEP andle multiple		b. Is material/product an input or output?	✓ input □ output	1 DEP#		
nw materials or nished roducts ?	c. Process description:		2 DRUM CRUSHING LINES DRUMS			
		d. Source Classification Code (SCC):	3999998	o villand validata)		
		(see instructions)	SC Code (call DEP if SC Code MISC INDUSTRIAL PR	•		
		a Maximum pragga rate for material/product	SCC Description – filled by eD	DEP upon validation EACH		
		e. Maximum process rate for material/product:	Amount	Units per hour		
ote: efinition of laximum rocess rate		f. If organic material, give weight % of:	VOC	НОС		
		a. Total actual row material used or finished	HYC 0	1000 EACH		
		g. Total actual raw material used or finished product produced for year of record:	Amount 0	Units 1000 EACH		
		Enter " 0" if not used in the year of record	Prior year – eDEP only	Units prior year		
	?	h. Do you have raw material or finished product restrictions?	☐ yes no – ski	p to question 1.I		
	? i. DEP approval number for restrictions:		Most recent approval number for this material or product			
	j. Short term raw material/finished product					
		restriction – if none, leave blank:	Quantity (amount or hours)	Units		
			Per: month wee	ek 🗌 day 🗌 hour		
		k. Annual material/product restrictionif none, leave blank:	Quantity (amount or hours)	Units		
		I. Indicate which air pollution control devices from Section A, Question 15 control this	Device ID #	Device ID#		
		material/product by listing the facility- designated control device ID # for each unit	Device ID #	Device ID #		
		that applies:	Device ID #	Device ID #		
	(How to make a new air pollution control device appear in these drop menus?	check here if ALL air poll unit apply to this material	ution control devices on the l/product		
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Short term period:

Basis - DEP approval number or regulation:

MBR-87-IND-

Emission Unit - Process Description

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Year of record

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Facility AQ identifier

B. Emissions for Raw Materials/Finished Products (cont.)

2. Total emissions for this material/product – tons per year:

?	2. Total emissions for this l	materiai/product	t – tons per year	•		
Important: Leaving blanks for	Pollutant	PM10	PM2.5	SO2	NO2	со
Actual and Potential emissions means that you are certifying that	Actual for previous year eDEP only:	Tons	Tons	Tons	Tons	Tons
there were less than 0.0001 (or zero) tons of emissions for each	Actual for year of record:	Tons	Tons	Tons	Tons	Tons
blank.	Potential emissions at maximum capacity uncontrolled:	Tons	Tons	Tons	Tons	Tons
·	Emission factor:					
	In pounds per unit::					
ial or	Max allowed – annual:	Tons	Tons	Tons	Tons	Tons
For this material or product only	Max allowed — short term:	Pounds	Pounds	Pounds	Pounds	Pounds
this prod	Short term period:					
For	Basis: DEP approval number or regulation:	MBR-87-IND-	MBR-87-IND-	MBR-87-IND-	MBR-87-IND-	MBR-87-IND-
Important:						Other:
Reporting now required for	Pollutant	VOC	нос	*Reserved*	NH3	specify
t-Butyl Acetate	Actual for previous year eDEP only:	Tons 0.0000	Tons	Tons	Tons	Tons
	Actual for year of record:	Tons	Tons	Tons	Tons	Tons
	Potential emissions at maximum capacity uncontrolled:	12.0000 Tons	Tons	Tons	Tons	Tons
	Emission factor:					
	In pounds per unit:					
o (a	Max allowed – annual:	Tons	Tons	Tons	Tons	Tons
material or ct only	Max allowed — short term:	Pounds	Pounds	Pounds	Pounds	Pounds

check to enter your own values

MBR-87-IND-

Bureau of Waste Prevention - Air Quality

BWP AQ AP-2

Emission Unit – Process Description

2006
Year of record 5
DEP EU# (old Point #) 1190564
Facility AQ identifier

0	0	
a. Typical ozone day VOC emissions – pounds per day	b. Typical ozone day NOx emissions – pounds per day	
check to enter your own values	check to enter your own values	
NOTE : The form has estimated the emissions for you. Howe own values by checking the boxes above for VOC and NOx.	ever, you may enter your	

C. Notes and Attachments

1. **Notes**: please include in the space below any additional information that will help DEP understand your submission.

2. Attachments:

☐ Check here to submit attachments to this form (e.g., calculations). For eDEP on-line filers, this will create a new step on your Current Submittals Page where you will attach electronic files to your submittal. For attachments that cannot be sent electronically, please list all such attachments below and deliver them to DEP with a paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-2

Emission Unit - Process Description

2006
Year of record
4
DEP EU# (old Point #)
1190564

Facility AQ identifier

Important:
When filling
out forms on
the computer,
use only the
tab key to
move your
cursor - do not
use the return
key.

A. Emission Unit – Process Description

1. Facility identifiers:

CLEAN HARBORS OF BRAINTREE

a. Facility name

34839

b. DEP Account number

1190564

c. Facility AQ identifier – SSEIS ID number



2. Emission unit identifiers:



THREE DISTILLATION UNITS- 710 GAL/HR NOT	USED 0
--	--------

a. Facility's choice of emission unit name – edit as needed

b. Facility's emission unit number / code - edit as needed

c. DEP emissions unit # (old SSEIS Point #)

d. Combined Units – enter number of individual units

licable.

DEP approvals – leave blank if not applicable

MBR-88-IND-229

a. Most recent approval number



b. DEP approval date (mm/dd/yyyy)

4. Is this unit exempt under 310 CMR 7.02 Plan Approvals ? ☐ yes ✓ no

5. If exempt from Plan Approval, indicate reason why (e.g., cite a specific DEP regulation):

Reason for exemption



units?

6. Equipment manufacturer and model number and type:

LUWA/PFAUDLER/CLEAN HARBORS

F-1

a. Manufacturer

b. Model number

THIN FILM EVAPORATOR/ WIPE FILM EVAP./BATCH STILL

c. Equipment Type

How to delete a unit ? (click ?-icon)

7. Emission unit installation and decommission dates:

11/9/1988

a. Installation date - estimate if unknown (mm/dd/yyyy)

b. Decommission date (mm/dd/yyyy) - if applicable

Complete only if the unit was shut down permanently or replaced since the last report.

Bureau of Waste Prevention – Air Quality

BWP AQ AP-2

Emission Unit – Process Description

2006
Year of record
4
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Emission Unit – Process Description (cont.)

8.	Emission unit replacement:					
	a. Is this unit replacing another emission unit?					
	✓ no					
	DEP's emission unit number and facility unit name					
9.	Additional state reporting requirements:					
	 a. Are there other routine air quality reporting requirements for this emissions unit ? ☐ yes – specify reporting frequency below ☑ no – skip to question 9c 					
	b. Reporting frequency – check all that apply: Monthly Quarterly Semi-annual Annual RES (include Operating Permit and Plan Approval reports, but not exceedance reporting) c. Is this unit subject to (check all that apply):					
	□ NESHAP □ NSPS □ MA	ACT				
10.	Hours of operation for the emission	unit: a.	check if continuous	sly operated – 24 x 7 x 52		
2	0 b. Number of hours per day	O Number of days	a nonwook	d. Number of weeks per year		
	e. Percent of total annual operation		•			
	$\frac{0}{Q1}$ $\frac{0}{Q2}$ $\frac{0}{Q3}$	Q4	(or 0% if the unit was	Q4 must = 100% not operated for any quarter)		
11.	Ozone season schedule – May 1 th	nrough Septem	nber 30:			
	·	• ,		0		
	a. Ozone season hours per day	o. Ozone season o	days per week	c. Weeks operated in ozone season		
12.	12. Emission release point – select one:					
	Non-Stack Release Points:		Physical Stacks:			
	☐ fugitive ☐ horizontal vent ☐ gooseneck ☐ downward facing vent ☐ vertical stack/vent less than 10ft ☐ vertical stack					
	If Non-Stack release point, skip to question	n 14.				
13.	13. Link this unit to a physical stack (if applicable) – pick from the list below:					
	Ellin tino dini to a priyolodi otdok (ii d	ipplicable) – p	ick from the list belo	W:		
	4 THREE DISTILLATION UNITS- NOT USE Facility's stack identifier from STACK form-	ED 2006				

Bureau of Waste Prevention – Air Quality

BWP AQ AP-2

Emission Unit - Process Description

2006
Year of record
4
DEP EU# (old Point #)
1190564
Facility AO identifier

A. Emission Unit – Process Description (cont.)

?					
How to delete monitor	a	Monitor 1	Monitor 2	Monitor 3	
(a. Monitor type:	check only one:	check only one:	check only one:	
Do not leave blank – if unknown write		☐ CEMs ☐ opacity ☐ fuel flow meter ☐ time recorder ☐ temperature recorder ☐ pressure ☐ other – describe:	☐ CEMs ☐ opacity ☐ fuel flow meter ☐ time recorder ☐ temperature recorder ☐ pressure ☐ other – describe:	☐ CEMs ☐ opacity ☐ fuel flow meter ☐ time recorder ☐ temperature recorder ☐ pressure ☐ other – describe:	
' unknown' or estimate		Describe " other"	Describe " other"	Describe " other"	
	b. Manufacturer:				
	c. Model #:				
	d. Monitor ID #:				
	- Installation data:	Facility's Designation	Facility's Designation	Facility's Designation	
(e. Installation date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)	
	f. DEP approval #:				
Leave f, g, h	g. DEP approval date:				
applicable.	h. Decommission date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)	
((mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)	
	i. Recorder ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	
	j. Audible alarm ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	
?	k. Data system ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	
	I. Monitored pollutants - check all that apply:	PM 10 PM 2.5 SO2 CO VOC NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity other – describe:	PM 10 PM 2.5 SO2 CO VOC NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity other – describe:	PM 10 PM 2.5 SO2 CO VOC NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity other – describe:	
		Describe offici	Describe offici	Describe " other"	

Bureau of Waste Prevention – Air Quality

BWP AQ AP-2

Emission Unit – Process Description

2006
Year of record
4
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Emission Unit – Process Description (cont.)

? 18	5. Are there air pollution control de	Check here if you need to report more than 3 air pollution control devices on		
How to delete a control	☐ yes – answer a through i		this unit. eDEP will add another page of control devices after this form.	
	Air pollution control device 1	Air pollution control device 2	Air pollution control device 3	
	а. Туре	Туре	Туре	
Do not leave blank –	b. Manufacturer	Manufacturer	Manufacturer	
if unknown write unknown or	C. Model number	Model number	Model number	
estimate	d. Facility's ID for this device	Facility's ID for this device	Facility's ID for this device	
?	e. Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)	
Leave f, g, h	f. DEP approval # (most recent)	DEP approval # (most recent)	DEP approval # (most recent)	
blank if not applicable.	g. DEP approval date (mm/dd/yyyy) DEP approval date (mm/dd/yyyy)		DEP approval date (mm/dd/yyyy)	
	h. Decommission date (mm/dd/yyyy)	Decommission date (mm/dd/yyyy)	Decommission date (mm/dd/yyyy)	
?	i. Percent overall efficiency – el	nter for all pdlutants that the device	was designed to control:	
PM 10	% Overall eff.	% Overall eff.	% Overall eff.	
PM 2.5 SO2	% Overall eff.	% Overall eff.	% Overall eff.	
	% Overall eff.	% Overall eff.	% Overall eff.	
CO	% Overall eff.	% Overall eff.	% Overall eff.	
VOC	% Overall eff.	% Overall eff.	% Overall eff.	
NO2	% Overall eff.	% Overall eff.	% Overall eff.	
NH3	% Overall eff.	% Overall eff.	% Overall eff.	
HOC	% Overall eff.	% Overall eff.	% Overall eff.	
HYC	% Overall eff.	% Overall eff.	% Overall eff.	
Hg	% Overall eff.	% Overall eff.	% Overall eff.	
Pb	% Overall eff.	% Overall eff.	% Overall eff.	
Other	% Overall eff.	% Overall eff.	% Overall eff.	
	Specify " Other"	Specify " Other"	Specify " Other"	

Massachusetts Department of Environmental ProtectionBureau of Waste Prevention – Air Quality

BWP AQ AP-2

09/19/05

Emission Unit - Process Description

2006
Year of record
4
DEP EU# (old Point #)
1190564
Facility AO identifier

	B. Emissions for Raw Materials/Finished Products					
		Add a NEW material / product: Check the box if you need to add a material or product that you did not report on previously (eDEP will add a blank Sect. B form to your package).	unit permanently. You mu of record even if amount is	uct: check the box if you I or making this product in this st still report data for this year " 0" – the material / product init in the next report cycle.		
	1.	Operation description:	CHLORINATED SOLVENTS			
?		a. Raw material or finished product name: Number of segments for this unit (previous records): 1				
ow does eDEP andle multiple	0	b. Is material/product an input or output ?	✓ input □ output	1 DEP #		
aw materials or nished roducts ?			STILLS #4, 5, 6- CHLORINATED SOLVENTS DOWN 2006			
		d. Source Classification Code (SCC): (see instructions)	30184001 SC Code (call DEP if SC Code			
			GENERAL PROCESSES			
		a Maximum process rate for material/product:	SCC Description – filled by eDf 710	EP upon validation GALLONS		
		e. Maximum process rate for material/product:	Amount	Units per hour		
ote: efinition of laximum rocess rate		f. If organic material, give weight % of:	VOC	HOC		
			HYC			
		g. Total actual raw material used or finished product produced for year of record:	Amount	TONS Units		
		Enter " 0" if not used in the year of record	Prior year – eDEP only	TONS Units prior year		
	 h. Do you have raw material or finished product restrictions? i. DEP approval number for restrictions: 		✓ yes ☐ no – skip to question 1.I			
			MBR-88-IND-229 Most recent approval number for this material or product			
`		j. Short term raw material/finished product	710	GALLONS		
		restriction – if none, leave blank:	Quantity (amount or hours)	Units		
			Per: month wee	k 🗌 day 🗹 hour		
		k. Annual material/product restriction	6132000	GALLONS		
		if none, leave blank:	Quantity (amount or hours)	Units		
		I. Indicate which air pollution control devices from Section A, Question 15 control this	Device ID #	Device ID #		
		material/product by listing the facility- designated control device ID # for each unit	Device ID #	Device ID #		
		that applies:	Device ID #	Device ID #		
		How to make a new air pollution control device appear in these drop menus?	check here if ALL air pollu unit apply to this material/	tion control devices on the product		

BWP AQ AP-2 Emission Unit - Process Description • Page 5

Bureau of Waste Prevention - Air Quality

BWP AQ AP-2

Emission Unit - Process Description

2006 Year of record 4 DEP EU# (old Point #) 1190564

Facility AQ identifier

B. Emissions for Raw Materials/Finished Products (cont.)

?	2. Total emissions for this	material/product	t – tons per year	r:		
Important: Leaving blanks for	Pollutant	PM10	PM2.5	SO2	NO2	со
Actual and Potential	Actual for previous year					
emissions means that you are certifying that	eDEP only:	Tons	Tons	Tons	Tons	Tons
there were less than 0.0001 (or zero) tons	Actual for year of record:	Tons	Tons	Tons	Tons	Tons
of emissions for each blank.	Potential emissions at maximum					
orani.	capacity uncontrolled:	Tons	Tons	Tons	Tons	Tons
	Emission factor:					
	In pounds per unit::					
= 6	Max allowed – annual:		Tons			Tons
i al o I y		Tons	Ions	Tons	Tons	ions
For this material or product only (leave blank if none)	Max allowed — short term:	Pounds	Pounds	Pounds	Pounds	Pounds
this I	Short term period:					
For t	Basis: DEP approval number or regulation:	MBR-88-IND-	MBR-88-IND-	MBR-88-IND-	MBR-88-IND-	MBR-88-IND
?						Other:
Important: Reporting now	Dallistant	V00	1100	*D	AUTO	
required for	Pollutant	VOC	НОС	*Reserved*	NH3	specify
t-Butyl Acetate	Actual for previous year					
	eDEP only:	Tons	Tons	Tons	Tons	Tons
	Actual for year of record:	Tons	Tons	Tons	Tons	Tons
	Potential emissions at maximum					
	capacity uncontrolled:	Tons	Tons	Tons	Tons	Tons
	Emission factor:					
	In pounds per unit:					
k 3	Max allowed – annual:	Tono	Tana	T	T	T
ial c		Tons	Tons	Tons	Tons	Tons
naterial or ct only	Max allowed – short term:	Pounds	Pounds	Pounds	Pounds	Pounds

Short term period:

Basis - DEP approval number or regulation:

MBR-88-IND-

MBR-88-IND-

check to enter your own values

MBR-88-IND

MBR-88-IND-

MBR-88-IND-

Bureau of Waste Prevention - Air Quality

BWP AQ AP-2

Emission Unit – Process Description

2006
Year of record
4
DEP EU# (old Point #)
1190564
Facility AQ identifier

0	0	
ds per day b.	Typical ozone day VOC emissions – pounds per day b. Typical ozone day NOx emissions – pour	ids per day
	check to enter your own values	
ns for you. However, you	check to enter your own values Light check to enter your own values TE: The form has estimated the emissions for you. However, you may enter your	

C. Notes and Attachments

1. **Notes**: please include in the space below any additional information that will help DEP understand your submission.

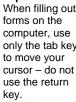
2. Attachments:

☐ Check here to submit attachments to this form (e.g., calculations). For eDEP on-line filers, this will create a new step on your Current Submittals Page where you will attach electronic files to your submittal. For attachments that cannot be sent electronically, please list all such attachments below and deliver them to DEP with a paper copy of this form.

Bureau of Waste Prevention – Air Quality

BWP AQ AP-3

2006
Year of record
1
DEP EU# (old Point#)
1190564
Facility AQ identifier







	En	nission Unit – Incinerator: Solid Waste, Sludge, M	edical Waste, other $\frac{1}{F}$	acility AQ identifier			
Important: When filling out forms on the	A.	Emission Unit – Incinerator Informa	ation				
computer, use only the tab key	1.	Facility identifiers:					
to move your		CLEAN HARBORS OF BRAINTREE					
cursor – do not use the return		a. Facility name 34839	1190564				
key.		b. DEP Account number	c. Facility AQ identifier – SSEIS	ID number			
tab							
return	2.	Emission unit identifiers:					
		INCINERATOR #1-VENT-O-MATIC CAE 500 #2 OI	L-0.2%S				
		a. Facility's choice of emission unit name – edit as needed	1				
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS	S point #			
	3.	DEP approvals – leave blank if not applicable:					
	0.	MBR-89-INC-003	5/17/1993				
		a. Most recent approval number	b. DEP approval date (mm/dd/yy	уу)			
How to delete a unit?	4.	Emission unit installation and decommission dates: 5/1/1989 a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/y) Complete only if the unit was replaced since the last report	s shut down permanently or			
	5.	Emission unit replacement?					
		a. Is this unit, replacing another emission unit?					
		✓ no	nber for the unit being repla	ced below:			
		b. DEP's Emission Unit Number and facility's unit name					
	6.	Are there routine air quality reporting requirements for Registration)?	or this emissions unit (other	than Source			
		a. Are there other routine air quality reporting require	ments for this emissions un	nit ?			
		b. Reporting frequency – check all that apply:					
		☐ Monthly ☐ Quarterly ☐ Semi-annual ☐ Annual ☐ RES					
		(include Operating Permit and Plan Approval reports, but not exce	edance reporting)				
		c. Is this unit subject to (check all that apply):					
		□NESHAP □ NSPS □MACT					

Bureau of Waste Prevention – Air Quality

BWP AQ AP-3

Emission Unit – Incinerator: Solid Waste, Sludge, Medical Waste, other

2006
Year of record
1
DEP EU# (old Point#)
1190564
Facility AQ identifier

			,					
lote: This ection is not for	7.	Incinerator description:						
Ifterburners or other pollution		a. Type: commercial industrial medical						
ontrol quipment.			INCINERATOR					
		municipal sludge 🗹 other:	Specify "other" incinerator type					
		VENT-O -MATIC	CAE500					
		b. Manufacturer:	c. Model number					
		d. Maximum operating capacity:	350					
		a. Maximum operating dapadity.	amount in units of:					
		e. Pounds of steam per hour	f. MMBtu per hour					
	8.	Waste type − select one: ☐ Type 0 Waste	e – dry rubbish, trash					
		Type 1 Waste	e – rubbish					
			e – mix of rubbish & garbage					
		☐ Type 3 Waste	e – garbage e – infectious/medical waste					
			e – intectious/medical waste e – industrial (liquid)					
			e – industrial (solid)					
		other:						
	Specify Other Waste Type							
	9.	Source Classification Code (SCC)	50200505					
		(see instructions):	SC Code (call DEP if SC code will not validate)					
			INCINERATION-SPCL-PATHOLOGICAL					
			SC Code Description – filled by eDEP upon validation					
	10.	. Amount of material incinerated in year of record:	0					
			Tons 0					
			Tons in previous year – eDEP only					
	11	. Charging rate restriction (for batch units only):	Tons in previous year – ebci only					
		. Only only rate restriction (for batch drifts only).	a. Amount					
			b. pounds of waste per hour OR					
			tons of waste per hour					
	12.	. Heat recovery?	☑ yes ☐ no					
	13.	. Number of hearths:	1					
	14.	. Total hearth area (total square footage):	100					
	15	Automatic fooder?	Square Feet					
	15.	. Automatic feeder?	☑ yes □ no					

Massachusetts Department of Environmental ProtectionBureau of Waste Prevention – Air Quality

BWP AQ AP-3

Emission Unit - Incinerator: Solid Waste, Sludge, Medical Waste, other

2006
Year of record
1
DEP EU# (old Point#)
1190564
Facility AQ identifier

10.	Hours of operatio	n for the emis	sion unit:	a. U ched	ck if cor		erated – 24 x	7 x 52	
	0	0	_			O d Novikasa (ovala sassasa			
	b. Number of hours per day c. Number of days per week d. Number of weeks per year								
	 e. Percent of total annual operation that occurs in each calendar quarter: 0 0								
	$\frac{0}{Q1}$ $\frac{0}{Q2}$						Q2+Q3+Q4 must = 100% it was not operated for any quarter		
		Q3							
17.	Ozone season so 0	chedule – May	1 through \$	September 3	0:	0			
	a. Ozone season hou	rs per day	b. Ozone	season days p	er week	c. W	eeks operated in	n ozone season	
	Non-Stack Rele ☐ fugitive	☐ horizonta				stack			
18.	Emission release		t one: ?						
	☐ fugitive ☐ horizontal vent ☐ vertical stack ☐ gooseneck ☐ downward facing vent ☐ vertical with rain call for the call of th						v/alagyra		
			u racing ven	11 1 1		willi falli Cal	//Sieeve		
	ulum vertical stac	k/vent less that	an 10ft		VOITIOAI	•			
					VOITIOGI				
19.	If Non-Stack releas Link this unit to a	e point, skip to qu	uestion 20.						
19.	If Non-Stack release	e point, skip to qu physical stack	uestion 20.						
19.	If Non-Stack releas Link this unit to a 1 STACK #1- INCINERATO Facility's stack identifi	e point, skip to que physical stackor #1-VENT-O-MATIC-lier from STACK for	uestion 20. c (if applicabout 100 - NA 2007 crm — to change	ole) – pick fro ge stack name u	om the I	ist below:			
19.	If Non-Stack releas Link this unit to a 1 STACK #1-INCINERATO	e point, skip to que physical stackor #1-VENT-O-MATIC-lier from STACK for	uestion 20. c (if applicabout 100 - NA 2007 crm — to change	ole) – pick fro ge stack name u	om the I	ist below:		ing to this form.	
19.	If Non-Stack releas Link this unit to a 1 STACK #1- INCINERATO Facility's stack identifi	e point, skip to que physical stackor #1-VENT-O-MATIC-lier from STACK for	uestion 20. c (if applicabout 100 - NA 2007 crm — to change	ole) – pick fro ge stack name u	om the I	ist below:		ing to this form.	
	If Non-Stack releas Link this unit to a 1 STACK #1- INCINERATO Facility's stack identifi	e point, skip to que physical stack or #1-VENT-O-MATIC-ier from STACK foit is not listed, sav	uestion 20. ((if applicable - NA 2007 orm – to changive and exit this	ple) – pick from the stack name us form now and stack name us for now now and stack name us for now now and stack name us for now	om the I	ist below:	m before return		
	If Non-Stack releas Link this unit to a 1 STACK #1- INCINERATO Facility's stack identifi If the stack for this unit Temperature — de	e point, skip to que physical stack on #1-VENT-O-MATIC-ier from STACK foit is not listed, savegrees in Fahr	uestion 20. ((if applicable - NA 2007 orm – to changive and exit this	ple) – pick from the stack name us form now and s	om the I	ist below: FACK form a new Stack for	m before return		
	If Non-Stack releas Link this unit to a 1 STACK #1-INCINERATO Facility's stack identifi If the stack for this unit	e point, skip to que physical stack on #1-VENT-O-MATIC-ier from STACK foit is not listed, savegrees in Fahr	uestion 20. ((if applicable - NA 2007 orm – to changive and exit this	ple) – pick from the stack name us form now and stack form from the stack name us form now and stack name us for now and stack name us form now and stack name us for now and st	om the I se the S complete Primary 0 ower	ist below: FACK form a new Stack for Chamber 100 Upper	m before return	ing to this form. Ary Chambe	
	If Non-Stack releas Link this unit to a 1 STACK #1- INCINERATO Facility's stack identifi If the stack for this unit Temperature — de	e point, skip to que physical stack presented in the presentation of the presentation	uestion 20. ((if applicable - NA 2007 orm – to changive and exit this	ple) – pick from the stack name up to form now and the stack name up to fo	om the I se the S complete Primary 0 ower 0	ist below: FACK form a new Stack for Chamber 100 Upper 100	m before return Seconda	ary Chambe	
	If Non-Stack releas Link this unit to a 1 STACK #1- INCINERATO Facility's stack identifi If the stack for this unit Temperature — de a. Operating rang	e point, skip to que physical stack presented in the presentation of the presentation	uestion 20. ((if applicable - NA 2007 orm – to changive and exit this	ple) – pick from the stack name up to form now and the stack name up to fo	om the I se the S complete Primary 0 ower	ist below: FACK form a new Stack for Chamber 100 Upper	m before return	ary Chambe	
20.	If Non-Stack releas Link this unit to a 1 STACK #1- INCINERATO Facility's stack identifi If the stack for this unit Temperature — de a. Operating rang	e point, skip to que physical stack physical stack on #1-VENT-O-MATIC ier from STACK foit is not listed, save egrees in Fahr ge:	uestion 20. ((if applicable - NA 2007 orm – to changive and exit this	ple) – pick from the stack name up to form now and the stack name up to fo	om the I se the S complete Primary 0 ower 0	ist below: FACK form a new Stack for Chamber 100 Upper 100	m before return Seconda	ary Chambe Upper	
20.	If Non-Stack releas Link this unit to a 1 STACK #1- INCINERATO Facility's stack identifi If the stack for this unit Temperature — de a. Operating rang b. Permitted rang	pe point, skip to que physical stack physical stack on #1-VENT-O-MATIC. iter from STACK four it is not listed, save agrees in Fahr pe:	uestion 20. ((if applicable - NA 2007 orm – to changive and exit this	ple) – pick from the stack name up to form now and the stack name up to fo	om the I se the S complete Primary 0 ower 0	ist below: FACK form a new Stack for Chamber 100 Upper 100	m before return Seconda	ary Chambe Upper	

Bureau of Waste Prevention – Air Quality

BWP AQ AP-3

Emission Unit - Incinerator: Solid Waste, Sludge, Medical Waste, other

2006
Year of record
1
DEP EU# (old Point#)
1190564
Facility AQ identifier

		,			
. Primary chamber auxiliary burner	s:				
a. Type of burner – check one:	☐ rotary ☐ air atomize ☑ other:	☐ mech. atomizer or ☐ traveling grate	☐ steam atomizer ☐ hand fired		
		MECH ATOMIZER			
		Specify "other" burner type			
CARLIN					
b. Burner manufacturer 201-CRD		0.770			
c. Burner model number		d. Maximum rating MMBtu	/ hr		
c. burner moder number		aa			
e. Source Classification C code (S	SCC):	50290005			
(see instructions)		SC Code (call DEP if SC code will not validate)			
		AUX.FUEL/NO EMSNS-DISTILLATE OIL			
		SC Code Description – fille	d by eDEP upon validation		
f. Type of fuel – check one:		☐ no.2 ☐ no.4	☐ no.6		
		☐ diesel ☐ natural gas 🗹 other – describ			
		AUX FUEL			
g. Sulfur content for oils (0-2.2):		Percent by weight			
h. Maximum hourly fuel rate for all	l firing burners	0.175	1000 GALLONS		
The manufacture of the contract of the contrac	g samere.	Amount	Units per hour ?		
i. Total actual fuel used for year of	record:	0	1000 GALLONS		
(Enter "0" if not used in the year of recor		Amount – year of record	Units		
		0	1000 GALLONS		
		Prior year – eDEP only	Units		
j. Do you have fuel or usage restri	ctions?	☐ yes 🗹 no – s	kip to question 23		
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			, ,		
k. DEP approval number for fuel re	estrictions: 😗	Most recent for this fuel			
I. Annual usage restriction (for this	s fuel):	Quantity	Units		
m. Short term use restriction (for t	his fuel):	Quantity	Units		
		Doru	upok 🗆 dov. 🗆 berra		
		Per: ☐ month ☐ v	veek 🔲 day 🔲 hour		

Bureau of Waste Prevention - Air Quality

BWP AQ AP-3

Emission Unit – Incinerator: Solid Waste, Sludge, Medical Waste, other

2006
Year of record
1
DEP EU# (old Point#)
1190564
Facility AQ identifier

23.	Secondary chamber auxiliary burners:				
	Is there a secondary chamber?	es 🗹 No –	if no skip to	Question 24	4
	□ ai	tary r atomizer her:	☐ mech. at ☐ traveling		steam atomizer hand fired
			Specify "other	" burner type	
	b. Burner manufacturer				
	c. Burner model number		d. Maximum ra	ating MMBtu/hr	
	e. Source Classification C code (SCC): (see instructions)		SC Code (call	DEP if SC cod	le will not validate)
			SC Code Des	cription – filled	by eDEP upon validation
	f. Type of fuel – check one:		☐ no.2	no.4	☐ no.6
			diesel	natural g	as other – describe:
			Describe "othe	er" fuel	
	g. Sulfur content for oils (0-2.2):h. Maximum hourly fuel rate for all firing be	urners:	Percent by we	eight	Units per hour
	i. Total actual fuel used for year of record: (Enter "0" if not used in the year of record)		Amount – yea Prior year – el		Units
	j. Do you have fuel usage restrictions?		☐ yes	✓ no – ski	ip to question 24
	k. DEP approval number for fuel restriction	ns:	Most recent for	or this fuel	
	I. Annual usage restriction (for this fuel):		Quantity		Units
	m. Short term fuel use restriction (for this	fuel):	Quantity		Units
			Per: m	onth 🗌 we	eek 🗌 day 🔲 hour

Bureau of Waste Prevention – Air Quality

BWP AQ AP-3

Emission Unit – Incinerator: Solid Waste, Sludge, Medical Waste, other

Year of record

1
DEP EU# (old Point#)
1190564
Facility AQ identifier

24	. Is there an air pollution control (device/s on this emissions unit?	than 3 air pollution control devices on
How to delete a control?	✓ yes – answer a through i	✓ yes – answer a through i ☐ no – skip to question 25	
a control.	Air pollution control device	Air pollution control device	Air pollution control device
	197	SODIUM-ALKALI SCRUBBING	252
	a. Type	Туре	Туре
	0	0	0
Do not	b. Manufacturer	Manufacturer	Manufacturer
if unknown	0	0	0
write	C. Model number	Model number	Model number
'unknown' or	1CAE500	2 CAE500	3 CAE500
estimate	d. Facility's ID for this device	Facility's ID for this device	Facility's ID for this device
	·	-	
(?	4/1/1989	4/1/1989	4/1/1989
	e. Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)
Leave f, g, h blank if not	f. DEP approval # (most recent)	DEP approval # (most recent)	DEP approval # (most recent)
applicable.	g. DEP approval date (mm/dd/yyyy)	DEP approval date (mm/dd/yyyy)	DEP approval date (mm/dd/yyyy)
	h. Decommission date (mm/dd/yyyy)	Decommission date (mm/dd/yyyy)	Decommission date (mm/dd/yyyy)
?	i. Percent overall efficiency – er	nter for all pollutants that the device	was designed to control:
PM 10	99	99	99
	% Overall eff.	% Overall eff.	% Overall eff.
PM 2.5	0	0	0
1 101 2.0	% Overall eff.	% Overall eff.	% Overall eff.
SO2	0	0	0
302	% Overall eff.	% Overall eff.	% Overall eff.
00	0	0	0
CO			
	% Overall eff.	% Overall eff.	% Overall eff.
VOC	0	0	0
	% Overall eff.	% Overall eff.	% Overall eff.
NO2	0	0	0
	% Overall eff.	% Overall eff.	% Overall eff.
NH3	0	0	0
	% Overall eff.	% Overall eff.	% Overall eff.
HOC	0	0	0
	% Overall eff.	% Overall eff.	% Overall eff.
HYC	0	0	0
1110	% Overall eff.	% Overall eff.	% Overall eff.
Hg	% Overall eff.	0 % Overall eff.	0 % Overall eff.
DL	0	76 Overall en. 0	0
Pb			
.	% Overall eff.	% Overall eff.	% Overall eff.
Other	99	99	99
	% Overall eff.	% Overall eff.	% Overall eff.
	TOTAL SUSPENDED PARTICULATES	TOTAL SUSPENDED PARTICULATES	TOTAL SUSPENDED PARTICULATES
	Specify "Other"	Specify "Other"	Specify "Other"

Bureau of Waste Prevention - Air Quality

BWP AQ AP-3

Emission Unit - Incinerator: Solid Waste, Sludge, Medical Waste, other

2006
ear of record
DEP EU# (old Point#)
190564
acility AQ identifier

	25. Is there monitoring equipment on this emissions unit: yes – answer a through I no – skip to section B						
How to delete a monitor?		Monitor 1	Monitor 2	Monitor 3			
	a. Monitor type:	check only one:	check only one: ☐ CEMs	check only one: ☐ CEMs			
Do not leave blank – /		☐ opacity ☐ fuel flow meter ☐ time recorder ☐ temperature recorder ☐ pressure ☑ other – describe:	opacity fuel flow meter time recorder temperature recorder pressure other – describe:	opacity fuel flow meter time recorder temperature recorder pressure other – describe:			
if unknown write		DYNATROL					
'unknown' or estimate	b. Manufacturer:	Describe "other" DYNATROL	Describe "other"	Describe "other"			
	c. Model number:	NO. 110M					
	d. Monitor ID #:	1					
	e. Installation date:	Facility's Designation 5/17/1990	Facility's Designation	Facility's Designation			
	f. DEP approval #:	(mm/dd/yyyy) MBR-91-INC-003B	(mm/dd/yyyy)	(mm/dd/yyyy)			
Leave f, g, h blank if not	g. DEP approval date:	5/17/1993 (mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)			
applicable.	h. Decommission date:						
	i. Recorder?	(mm/dd/yyyy) ☐ yes	(mm/dd/yyyy) ☐ yes ☐ no	(mm/dd/yyyy) ☐ yes ☐ no			
	j. Audible alarm?	✓ yes □ no	☐ yes ☐ no	☐ yes ☐ no			
	k. Data system?	☐ yes 🗹 no	☐ yes ☐ no	☐ yes ☐ no			
	I. Monitored pollutants – check all that apply:	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe:	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe:	PM 10 PM 2.5 SO2 CO VOC NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity other – describe:			
		Describe "other"	Describe "other"	Describe "other"			

Bureau of Waste Prevention - Air Quality

BWP AQ AP-3

Emission Unit - Incinerator: Solid Waste, Sludge, Medical Waste, other

2006 Year of record DEP EU# (old Point#) 1190564 Facility AQ identifier

B. Emissions

	1. Total emissions for this	s emissions unit	– tons per year:			
	Pollutant	PM10	PM2.5	SO2	NO2	со
Important: Leaving blanks for	Actual for previous year	0	0	0	0	0
Actual and Potential emissions means that	eDEP only:	Tons 0.0000	Tons 0.0000	Tons 0.0000	Tons 0.0000	Tons 0.0000
you are certifying that there were less than	Actual for year of record:	Tons	Tons	Tons	Tons	Tons
0.0001 (or zero) tons	Potential emissions at	0.0480	0.0000	3	5	6
of emissions for each blank.	max capacity uncontrolled:	Tons	Tons	Tons	Tons	Tons
	Emission factor:					
	Emission factor units in pounds per:					
i û	Maximum allowed emissions – annual:	Tons	Tons	Tons	Tons	Tons
uou e	Maximum allowed					
entir inly ank if	emissions – short term:	Pounds	Pounds	Pounds	Pounds	Pounds
For the entire unit only (leave blank if none)	Short term period (or MMBtu):	MBR-91-INC-003B	MDD of INC coop	MDD of INC 100D	MDD of INC coop	MDD 04 ING 000D
Ŗ (e)	Basis: DEP approval number or regulation:	MBK-91-INC-003B	MBR-91-INC-003B	MBR-91-INC-003B	MBR-91-INC-003B	MBR-91-INC-003B
					TOTAL SUSPE	Other:
	Pollutant	VOC	HOC	*Reserved*	NH3	Specify
	Actual for previous year eDEP only:	Tons	Tons	Tons	Tons	Tons
	Actual for year of	0.0000				0.0000
	record:	Tons	Tons	Tons	Tons	Tons
	Potential emissions at maximum capacity uncontrolled:	Tons	Tons	Tons	Tons	0.1840 Tons
		10113	10113	10115	10115	10113
	Emission factor:					
	Emission factor units in pounds per:					
~	Maximum allowed emissions – annual:	Tono	Tono	Tons	Tons	Tons
unit 10ne	Maximum allowed	Tons	Tons	TOTIS	TORS	TORS
he entire unit only	emissions – short term:	Pounds	Pounds	Pounds	Pounds	Pounds
For the entire uni only	Short term period (or MMBtu):					
For th	Basis – DEP approval number or regulation:	MBR-91-INC-003B			MBR-91-INC-003B	MBR-91-INC-003B
?	2. Ozone season emissio	ons – May 1 thro	ugh September	30:		
NOTE for	a. Typical day VOC emissio	ns – pounds per dav	,	b. Typical day NOx emissions – pounds per day		
Ozone Season Emissions				_		- p
	check to enter your own	values		cneck to enter	your own values	

Bureau of Waste Prevention – Air Quality

BWP AQ AP-3

Emission Unit – Incinerator: Solid Waste, Sludge, Medical Waste, other

2006
Year of record
1
DEP EU# (old Point#)
1190564
Facility AQ identifier

C. Notes and Attachments

1. Notes: please include any additional information that will help DEP understand your submission.

INCINERATOR HAS NOT OPERATED IN MORE THAN 10 YEARS

2	Δtt	ach	me	nts:

Check here to submit attachments to this form (e.g., calculations). For eDEP on-line filers, this will
create a new step on your Current Submittals Page where you will attach electronic files to your
submittal. For attachments that cannot be sent electronically, please list all such attachments
below and deliver them to DEP with a paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
9
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Cor	mplete one AP-4 for EACH organic material storage ta	nk.
Important: When filling out forms on	Α.	Equipment Description	
the computer, use only the tab key to move your	1.	Facility identifiers: ? CLEAN HARBORS OF BRAINTREE	
cursor – do		a. Facility name 34839	1190564
not use the return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
Table 1	2.	Emission unit identifiers:	
return		AG TANK A4- 5,200 GAL WASTE STREAM A-4	0
		a. Facility's choice of emission unit name – edit as needed	9
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # – SSEIS point #
		,	
How to combine units?		d. Combined Units – enter number of individual units	
units:	3.	Emission unit installation and decommission dates:	
_		1/1/1986	
?		a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
How to delete a unit ?			Complete only if the unit was shut down permanently or replaced since the last report.
?	4.	Emission unit replacement:	
•		a. Is this unit replacing another emission unit?	
		✓ no	umber for the unit being replaced below:
		b. DEP's Emission Unit Number and facility unit name	
?	5.	Unit descriptions:	
		a. Description: above ground below ground below ground	nd
		b. Roof type:	
		10.66 10.5 5200	Specify other
			city – gallons

6. Construction: ✓ steel weld ☐ other weld ☐ rivet ☐ fiberglass ☐ gunite

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
9
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

	Material stored (at start of year):	
	HALOGENATED FUEL	
	a. Name of material	40-0000
		40722098
	b. CAS number if single chemical ORGANIC CHEM.SPECIFY IN COMMNETS	c. SC Code for standing / breathing loss
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C
?	52	75188.0000 ?
	f. Temperature – typical storage temp. in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only
	j. Oxygenate name – gasoline only	
8.	New material stored (enter new material if conter	nts changed during year of record):
	a. Name of material	
	b. CAS number if single chemical	c. SC Code for standing / breathing loss
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only
	j. Oxygenate name – gasoline only	
	y, end general generality	
	Notes and Attachments	ditional information that will help DEP understand
В.	Notes and Attachments Notes: please include in the space below any ad	ditional information that will help DEP understand
В.	Notes and Attachments Notes: please include in the space below any ad	ditional information that will help DEP understand
В.	Notes and Attachments Notes: please include in the space below any ad	ditional information that will help DEP understand
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В.	Notes and Attachments Notes: please include in the space below any ad	ditional information that will help DEP understand
В.	Notes and Attachments Notes: please include in the space below any ad	ditional information that will help DEP understand

paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
8
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Coi	mplete one AP-4 for EACH organic material storage tan	k.
Important: When filling out forms on	A.	Equipment Description	
the computer, use only the	1.	Facility identifiers: (7)	
tab key to		CLEAN HARBORS OF BRAINTREE	
move your cursor – do		a. Facility name	
not use the		34839	1190564
return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
tab			
	2.	Emission unit identifiers:	
return		AG TANK A3-9,800 GAL WASTE STREAM A-22	
		a. Facility's choice of emission unit name – edit as needed	
		8	8
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #
		d Combined Unite contemporaries at individual conte	
How to		d. Combined Units – enter number of individual units	
combine units ?			
	3.	Emission unit installation and decommission dates:	
		1/1/1986	
		a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
How to delete a unit?			Complete only if the unit was shut down permanently or replaced since the last report.
?	4.	Emission unit replacement:	
		a. Is this unit replacing another emission unit?	
		✓ no	mber for the unit being replaced below:
		b. DEP's Emission Unit Number and facility unit name	

?)5.	Unit description							
	a. Description:	☑ at	oove ground	☐ belo	ow ground			
	b. Roof type:	☐ flo	pating roof red	inte	rnal roof er:			
	14.66		11.5		9800	Specify other		
	c. Height / Length -	- feet	d. Diameter - fe	eet	e. Capacity –	gallons		

6. Construction: ✓ steel weld ☐ other weld ☐ rivet ☐ fiberglass ☐ gunite

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
8
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):					
	LEAN WATER					
	a. Name of material					
		40799998				
	b. CAS number if single chemical	c. SC Code for standing / breathing loss				
	MISC.CHEMICAL STORAGE	_				
?	d. SC Code description – filled by eDEP 52	e. Vapor pressure in PSI at 25° C ?				
	f. Temperature – typical storage temp. in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)				
?	h. RVP – gasoline only	n. RVP – gasoline only i. Total oxygen percent – gasoline only				
	j. Oxygenate name – gasoline only	_				
8.	New material stored (enter new material if conte	nts changed during year of record): ?				
	a. Name of material					
	b. CAS number if single chemical	c. SC Code for standing / breathing loss				
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons				
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only				
	j. Oxygenate name – gasoline only	_				
B. 1.	Notes and Attachments Notes: please include in the space below any ac your submission.	dditional information that will help DEP understand				
	2 Attachments: Check here to submit attach	nments to this form. For attachments that cannot be				
•		nts in notes above and deliver them to DEP with a				

paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
7
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Cor	Complete one AP-4 for EACH organic material storage tank.					
Important: When filling out forms on	A.	Equipment	Description				
the computer,	1.	Facility identifier	rs: 🧑				
use only the tab key to		CLEAN HARBO	RS OF BRAINTRE	E			
move your cursor – do		a. Facility name					
not use the		34839			1190564		
return key.		b. DEP Account nur	mber		c. Facility AQ identifier – SSEIS ID number		
	2.	Emission unit id	entifiers:				
return		AG TANK A2-9,	800 GAL WASTE	STREAM A-22			
			of emission unit name –	edit as needed			
		7			7		
		b. Facility's emission	n unit number / code – e	edit as needed	c. DEP emissions unit # - SSEIS point #		
How to		d. Combined Units -	- enter number of individ	dual units			
units?							
	3.	Emission unit in	stallation and decor	mmission dates:			
		1/1/1986					
		a. Installation date -	- estimate if unknown (m	nm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable		
How to delete a unit?					Complete only if the unit was shut down permanently or replaced since the last report.		
?	4.	Emission unit re	placement:				
		a. Is this unit rep	olacing another emi	ission unit?			
		✓ no	yes – enter DEP's e	emissions unit nu	mber for the unit being replaced below:		
		b. DEP's Emission	Unit Number and facility	unit name			
?	5.	Unit descriptions	s:				
		a. Description:	✓ above ground	☐ below groun	nd		
		b. Roof type:	☐ floating roof ✓ fixed	internal roof other:	Specify other		
		14.66	11.5	9800	Specify other		
				0000			

d. Diameter - feet

e. Capacity - gallons

c. Height / Length – feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2	2006
Υ	ear of record
7	7
Г	DEP EU# (old Point #)
1	1190564
F	acility AQ identifier

A. Equipment Description (cont.)

7. Material stored (at start of ye	ar):					
I FAN WATER FOR INCINE	LEAN WATER FOR INCINERATION					
a. Name of material	0.111011					
a. Hame of material		40799998				
b. CAS number if single chemical		c. SC Code for standing / breathing loss				
MISC.CHEMICAL STORAGE	=	or our continuing / or continuing root				
d. SC Code description – filled by et		e. Vapor pressure in PSI at 25° C				
252	721	40189.0000				
f. Temperature – typical storage tem	n in °Eahranhait	g. Annual throughput in gallons (enter 0 if not used)				
i. remperature typical storage tem	p. III Tamomon	g. Allitual tilloughput ill gallons (effer o il flot useu)				
h. RVP – gasoline only		i. Total oxygen percent – gasoline only				
j. Oxygenate name – gasoline only		=				
8. New material stored (enter no a. Name of material	ew material if conte	nts changed during year of record): ?				
ar riame of material						
b. CAS number if single chemical		c. SC Code for standing / breathing loss				
b. c/to named in single shormed		o. So sous for startainly broatning loss				
d. SC Code description – filled by et)FP	e. Vapor pressure in PSI at 25° C				
d. So Souc description Timed by CE)L1	c. vapor pressure in r or at 25° o				
f. Temperature – typical storage tem	p. in ºFahrenheit	g. Annual throughput in gallons				
h. RVP – gasoline only		i. Total oxygen percent – gasoline only				
j. Oxygenate name – gasoline only		-				
B. Notes and Attachm	ents					
1. Notes : please include in the your submission.	space below any ac	dditional information that will help DEP understand				
,						
2. Attachments: Check h	ere to submit attach	ments to this form. For attachments that cannot be				

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
63
DEP EU# (old Point #)
1190564

Facility AQ identifier

Complete o	ne AP-4 for	EACH org	ganic material	storage t	ank.

Important: When filling out forms on the computer use only the tab key to move your cursor – do not use the return key.

combine units?

a unit?

A.	Equipment Description	on					
1.	Facility identifiers:						
١.	CLEAN HARBORS OF BRAINTREE						
	a. Facility name	NLL					
	34839		1190564				
	b. DEP Account number		c. Facility AQ identifier – SSEIS ID number				
2.	Emission unit identifiers:						
	AG TANK B9 POLYOLEFIN H	TANKS WASTEWA	ATER NO VOCS				
	a. Facility's choice of emission unit nam	e – edit as needed					
	h Facility's emission unit number / code	odit oo naadad	63				
	b. Facility's emission unit number / code	e – edit as needed	c. DEP emissions unit # - SSEIS point #				
	d. Combined Units – enter number of in	dividual units					
3.	Emission unit installation and decommission dates:						
	1/1/1977						
	a. Installation date – estimate if unknow	n (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable				
			Complete only if the unit was shut down permanently or replaced since the last report.				
4.	Emission unit replacement:						
	a. Is this unit replacing another	emission unit?					
	✓ no yes – enter DEP's emissions unit number for the unit being replaced below:						
	b. DEP's Emission Unit Number and fa	cility unit name					
_							
5.	Unit descriptions:						
	a. Description: 🗹 above groun	nd	und				
	b. Roof type:	internal ro	of				
	✓ fixed	other:	On all and an				
			Specify other				

6250

e. Capacity - gallons

6.	Construction:	steel weld	other weld	☐ rivet	fiberglass
----	---------------	------------	------------	---------	------------

11.75

d. Diameter - feet

10.5

c. Height / Length - feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006			
Year of record			
63			
DEP EU# (old Point #)			
1190564			
Facility AQ identifier			

A. Equipment Description (cont.)

a. Name of material	TO REPORT
	30187097
b. CAS number if single chemical	c. SC Code for standing / breathing loss
SPECIFY LIQUID:BREATHING LOSS	
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C
f. Temperature – typical storage temp. in °Fahrenheit	0
i. Temperature – typicai storage temp. in Famerineit	g. Annual throughput in gallons (enter 0 if not used)
h. RVP – gasoline only	i. Total oxygen percent – gasoline only
j. Oxygenate name – gasoline only	_
New material stored (enter new material if conte	ents changed during year of record):
b. CAS number if single chemical	c. SC Code for standing / breathing loss
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C
f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons
h. RVP – gasoline only	i. Total oxygen percent – gasoline only
j. Oxygenate name – gasoline only	_
Notes and Attachments	
	dditional information that will halp DED understor
your submission.	dditional information that will help DEP understar
your oubtricoion.	

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
62
DEP EU# (old Point #)
1190564
Facility AQ identifier

Important:
When filling
out forms on
the computer,
use only the
tab key to
move your
cursor – do
not use the
return key.
tab
-

combine units?

a unit?

Col	mplete one AP-4 for EACH organic material storage tar	k.			
Α.	Equipment Description				
1.	Facility identifiers: 7				
	CLEAN HARBORS OF BRAINTREE				
	a. Facility name				
	34839	1190564			
	b. DEP Account number	c. Facility AQ identifier – SSEIS ID number			
2.	Emission unit identifiers:				
	AG TANK B8- POLYOLEFIN H TANKS WASTEWATER NO VOCS				
	a. Facility's choice of emission unit name – edit as needed				
[62	62			
	b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #			
	d. Combined Units – enter number of individual units				
3.	Emission unit installation and decommission dates:				
	1/1/1977				
	a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable			
		Complete only if the unit was shut down permanently or replaced since the last report.			
4.	Emission unit replacement:				
,	a. Is this unit replacing another emission unit?				
	✓ no yes – enter DEP's emissions unit nu	mber for the unit being replaced below:			

H)								
	a. Is this unit replacing another emission unit?							
	v no □	yes – enter DEP's e	missions	unit numbe	er for the unit be	ing replaced b	pelow:	
	b. DEP's Emission	Unit Number and facility	unit name					_
? 5.	Unit description	ns:						
	a. Description:	✓ above ground	☐ belo	w ground				
	b. Roof type:	☐ floating roof ✓ fixed	inter	rnal roof er:	Specify other			
	9.6 c. Height / Length -	11.75 - feet d. Diameter – fe	net .	7000 e. Capacity –		_		
	c. Height / Length -	- leet G. Didilletei – le	.Ci	e. Capacity –	yalloris			

steel weld other weld rivet fiberglass gunite

6. Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
62
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

000000000000000000000000000000000000000	Material stored (at start of year):			
CORROSIVES NO VOCS NOT APPLICABLE TO REPORT				
a. Name of material	20407007			
b. CAS number if single chemical	30187097			
SPECIFY LIQUID:BREATHING LOSS	c. SC Code for standing / breathing loss			
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C			
2 52	0			
f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)			
h. RVP – gasoline only	i. Total oxygen percent – gasoline only			
j. Oxygenate name – gasoline only	<u> </u>			
New material stored (enter new material if cont a. Name of material	New material stored (enter new material if contents changed during year of record):			
b. CAS number if single chemical	c. SC Code for standing / breathing loss			
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C			
f. Temperature – typical storage temp. in ^o Fahrenheit	g. Annual throughput in gallons			
h. RVP – gasoline only	i. Total oxygen percent – gasoline only			
gaodinio omy	i. Total oxygen percent – gasoline only			
j. Oxygenate name – gasoline only	i. Total oxygen percent – gasoline only			
j. Oxygenate name – gasoline only	i. Total oxygen percent – gasoline only			
j. Oxygenate name – gasoline only 3. Notes and Attachments	additional information that will help DEP understand			
j. Oxygenate name – gasoline only B. Notes and Attachments . Notes: please include in the space below any a				
j. Oxygenate name – gasoline only B. Notes and Attachments . Notes: please include in the space below any a				
j. Oxygenate name – gasoline only B. Notes and Attachments . Notes: please include in the space below any a				
j. Oxygenate name – gasoline only B. Notes and Attachments . Notes: please include in the space below any a				
j. Oxygenate name – gasoline only B. Notes and Attachments . Notes: please include in the space below any a				
j. Oxygenate name – gasoline only B. Notes and Attachments . Notes: please include in the space below any a				
j. Oxygenate name – gasoline only B. Notes and Attachments . Notes: please include in the space below any a				
j. Oxygenate name – gasoline only B. Notes and Attachments . Notes: please include in the space below any a				
j. Oxygenate name – gasoline only B. Notes and Attachments . Notes: please include in the space below any a				
j. Oxygenate name – gasoline only B. Notes and Attachments . Notes: please include in the space below any a				
j. Oxygenate name – gasoline only B. Notes and Attachments . Notes: please include in the space below any a				
j. Oxygenate name – gasoline only B. Notes and Attachments . Notes: please include in the space below any a				

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention - Air Quality

Emission Unit - Organic Material Storage

2006 Year of record 60 DEP EU# (old Point #) 1190564 Facility AQ identifier

	Со	mplete one AP-4 for EACH organic material storage t	ank.
Important: When filling out forms on	A.	Equipment Description	
the computer, use only the	1.	Facility identifiers:	
tab key to		CLEAN HARBORS OF BRAINTREE	
move your cursor – do		a. Facility name	
not use the		34839	1190564
return key.		b. DEP Account number	c. Facility AQ identifier - SSEIS ID number
tab			
	2.	Emission unit identifiers:	
return		AG TANK B7- POLYOLEFIN H TANKS WASTEV	VATER NO VOCS
		a. Facility's choice of emission unit name – edit as needed	
		60	60
		b. Facility's emission unit number / code - edit as needed	c. DEP emissions unit # - SSEIS point #
		d. Combined Units – enter number of individual units	
How to			

3. Emission unit installation and decommission dates:

10

d. Diameter - feet



combine units?

a. Installation date - estimate if unknown (mm/dd/yyyy)

b. Decommission date (mm/dd/yyyy) - if applicable

Complete only if the unit was shut down permanently or replaced since the last report.

4.	4. Emission unit replacement:		
	a. Is this unit re	eplacing another emi	ssion unit?
	v no □	yes – enter DEP's e	emissions unit number for the unit being replaced below:
	b. DEP's Emission	n Unit Number and facility	unit name
5.	Unit description	ns:	
	a. Description:	✓ above ground	below ground
	b. Roof type:	☐ floating roof ✓ fixed	internal roof other:

6250

e. Capacity - gallons

Specify other

11.5

c. Height / Length – feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
60
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

a. Name of material	O REPORT	
	30187097	
b. CAS number if single chemical	c. SC Code for standing / breathing loss	
SPECIFY LIQUID:BREATHING LOSS		
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C	
52	0.0000	
f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)	
h. RVP – gasoline only	i. Total oxygen percent – gasoline only	
j. Oxygenate name – gasoline only	-	
New material stored (enter new material if contents changed during year of record):		
a. Name of material		
b. CAS number if single chemical	c. SC Code for standing / breathing loss	
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C	
f. Temperature – typical storage temp. in ^o Fahrenheit	g. Annual throughput in gallons	
h. RVP – gasoline only	i. Total oxygen percent – gasoline only	
j. Oxygenate name – gasoline only	_	
Notes and Attachments		
	dditional information that will help DEP understan	
your submission.		

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention – Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
6
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Co	mplete one AP-4 for EACH organic material storage tar	nk.
i nt: ling	A.	Equipment Description	
s on puter,	1.	Facility identifiers: 7	
the to		CLEAN HARBORS OF BRAINTREE	
our		a. Facility name	
do the		34839	1190564
эу. ☐		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
	2.	Emission unit identifiers:	
	۷.		
		AG TANK A1-9,800 GAL WASTE STREAM A-21	
		a. Facility's choice of emission unit name – edit as needed	2
		6	6
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #
		d. Combined Units – enter number of individual units	
e		u. Combined offits – effet flumber of fluvidual diffs	
	2	Emission unit installation and decommission dates:	
	3.		
		1/1/1986	
)		a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
delete			Complete only if the unit was shut down permanently or replaced since the last report.
?	4.	Emission unit replacement:	
		a. Is this unit replacing another emission unit?	
		✓ no yes – enter DEP's emissions unit nu	imber for the unit being replaced below:
		b. DEP's Emission Unit Number and facility unit name	
		Unit descriptions:	
9	<u>7</u> 5.	·	
?	5.		
?	5.	a. Description: 🗹 above ground 🗌 below ground	nd
?	5.	b. Roof type:	
?	5.	• • - •	
?	5.	b. Roof type:	f

 $lue{}$ steel weld $\ \square$ other weld $\ \square$ rivet $\ \square$ fiberglass $\ \square$ gunite

6. Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
6
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):		
	FLAMMABLE LIQUIDS		
	a. Name of material		
		40799998	
	b. CAS number if single chemical	c. SC Code for standing / breathing loss	
	MISC.CHEMICAL STORAGE		
?	d. SC Code description – filled by eDEP 52	e. Vapor pressure in PSI at 25° C 21595.0000	
	f. Temperature – typical storage temp. in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)	
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only	
	j. Oxygenate name – gasoline only	_	
8.	New material stored (enter new material if conte	nts changed during year of record): ?	
	a. Name of material		
	b. CAS number if single chemical	c. SC Code for standing / breathing loss	
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C	
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons	
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only	
	j. Oxygenate name – gasoline only	-	
B.	Notes and Attachments Notes: please include in the space below any ac your submission.	dditional information that will help DEP understand	
	2 Attachments. Check have to submit attach	ments to this form. For attachments that cannot be	
•		nts in notes above and deliver them to DEP with a	

paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
59
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Cor	mplete one AP-4 for EACH organic material storage tar	nk		
Important:		Equipment Description			
When filling out forms on	<i>,</i>	Equipment Bosonption			
the computer, use only the	1.	Facility identifiers:			
tab key to		CLEAN HARBORS OF BRAINTREE			
move your cursor – do		a. Facility name			
not use the		34839	1190564		
return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number		
	2.	Emission unit identifiers:			
return	AG TANK B6- POLYOLEFIN H TANKS WASTEWATER NO VOCS				
		a. Facility's choice of emission unit name – edit as needed			
		59	59		
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #		
2		d. Combined Units – enter number of individual units			
How to combine units ?					
units :	3.	Emission unit installation and decommission dates:			
_		1/1/1977			
?		a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable		
How to delete a unit?			Complete only if the unit was shut down permanently or replaced since the last report.		
?	4.	Emission unit replacement:			
		a. Is this unit replacing another emission unit?			
		✓ no yes – enter DEP's emissions unit nu	mber for the unit being replaced below:		
		b. DEP's Emission Unit Number and facility unit name			
?	5.	Unit descriptions:			
		a. Description: 🗹 above ground 🗌 below ground	nd		
		b. Roof type:			
		11.5	Specify other		
		11.5 c. Height / Length – feet d. Diameter – feet e. Capac	city – gallons		
		o. Holgati / Edilgiti Toot a. Diamotol Toot e. Oapat	my ganono		

steel weld other weld rivet fiberglass gunite

Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
59
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

• ,	Material stored (at start of year):			
COROSSIVES NO VOCS NOT APPLIBABLE TO REPORT				
a. Name of material	30187097			
b. CAS number if single chemical	c. SC Code for standing / breathing loss			
SPECIFY LIQUID:BREATHING LOSS	Ç Ç			
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C			
f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)			
h. RVP – gasoline only	i. Total oxygen percent – gasoline only			
i Ovuganeta nama, ganalina anlu	_			
j. Oxygenate name – gasoline only				
New material stored (enter new material if conte	ew material stored (enter new material if contents changed during year of record):			
a. Name of material				
b. CAS number if single chemical	c. SC Code for standing / breathing loss			
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C			
f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons			
h. RVP – gasoline only	i. Total oxygen percent – gasoline only			
j. Oxygenate name – gasoline only	_			
. Notes and Attachments				
Notes: please include in the space below any a	additional information that will help DEP understand			
your submission.				
.				

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paper copy of this form.

Bureau of Waste Prevention - Air Quality

Emission Unit - Organic Material Storage

2006 Year of record 58 DEP EU# (old Point #) 1190564 Facility AQ identifier

important:
When filling
out forms on
the compute
use only the
tab key to
move your
cursor – do
not use the
return key.

0	mplete one AP-4 for EACH organic material storage t	ank.
٩.	Equipment Description	
	Facility identifiers: (?)	
	CLEAN HARBORS OF BRAINTREE	
	a. Facility name	
	34839	1190564
	b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
2.	Emission unit identifiers:	
	AG TANK B5- POLYHLEFIN H TANKS WASTEV	VATER NO VOCS
	a. Facility's choice of emission unit name – edit as needed	
	58	58
	b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #
	d. Combined Units – enter number of individual units	
3.	Emission unit installation and decommission dates	3:



?
How to delete
a unit ?

a. Installation date - estimate if unknown (mm/dd/yyyy)

b. Decommission date (mm/dd/yyyy) - if applicable

Complete only if the unit was shut down permanently or replaced since the last report.

? 4.	Emission unit replacement:

1/1/1977

a. Is this unit replacing another emission unit?

✓ no yes – enter DEP's emissions unit number for the unit being replaced below:

	b. DEP's Emission	unit Number and facility	unit name	;		
? 5.	Unit description	ns:				
	a. Description:	above ground	☐ belo	ow ground		
	b. Roof type:	☐ floating roof ☑ fixed	☐ inte	ernal roof er:		
	40.5	44.75		0050	Specify other	
	10.5	11.75		6250		
	c. Height / Length -	- feet d. Diameter – fe	et	e. Capacity –	gallons	

steel weld vother weld rivet fiberglass gunite 6. Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
58
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

	Material stored (at start of year):					
CORROSIVES NO VOCS NOT APPLICABLE T a. Name of material	O REPORT					
a. Name of material	30187097					
b. CAS number if single chemical	c. SC Code for standing / breathing loss					
SPECIFY LIQUID:BREATHING LOSS	5 0					
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C					
52	0					
f. Temperature – typical storage temp. in *Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)					
h. RVP – gasoline only	i. Total oxygen percent – gasoline only					
j. Oxygenate name – gasoline only	_					
New material stored (enter new material if conte	nts changed during year of record):					
b. CAS number if single chemical	c. SC Code for standing / breathing loss					
•						
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C					
f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons					
h. RVP – gasoline only	i. Total oxygen percent – gasoline only					
j. Oxygenate name – gasoline only						
. Notes and Attachments						
Notes: please include in the space below any additional information that will help DEP understand your submission.						
your submission.						

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
57
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Complete one AP-4 for EACH organic material storage tank.		
Important: When filling out forms on	Α.	Equipment Description	
the computer, use only the tab key to	1.	Facility identifiers: ? CLEAN HARBORS OF BRAINTREE	
move your cursor – do		a. Facility name	
not use the		34839	1190564
return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
	2.	Emission unit identifiers:	
return		AG TANK B4- POLYOLEFIN H WASTEWATER N	NO VOCS
		a. Facility's choice of emission unit name – edit as needed	
		57	57
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #
Plow to combine units ?		d. Combined Units – enter number of individual units	
uiiits :	3.	Emission unit installation and decommission dates:	
	٠.	1/1/1977	
2		a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
How to delete a unit?		(, ,,,,,	Complete only if the unit was shut down permanently or replaced since the last report.
9	4.	Emission unit replacement:	
		a. Is this unit replacing another emission unit?	
		a. 13 this drift replacing another emission drift:	
		✓ no	umber for the unit being replaced below:
		b. DEP's Emission Unit Number and facility unit name	
<u> </u>	5.	Unit descriptions:	
•		a. Description: 🗹 above ground 🗌 below grou	nd
		b. Roof type:	
			Specify other

6. Construction: ☐ steel weld ☑ other weld ☐ rivet ☐ fiberglass ☐ gunite

7000

e. Capacity - gallons

11.75

d. Diameter - feet

9.5

c. Height / Length – feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
57
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

a. Name of material	TO REPORT
a. Name of material	30187097
b. CAS number if single chemical	c. SC Code for standing / breathing loss
SPECIFY LIQUID:BREATHING LOSS	
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C
52	0
f. Temperature – typical storage temp. in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)
h. RVP – gasoline only	i. Total oxygen percent – gasoline only
j. Oxygenate name – gasoline only	_
New material stored (enter new material if conte	ents changed during year of record):
•	
a. Name of material	
b. CAS number if single chemical	c. SC Code for standing / breathing loss
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C
f. Temperature – typical storage temp. in ^o Fahrenheit	g. Annual throughput in gallons
h. RVP – gasoline only	i. Total oxygen percent – gasoline only
j. Oxygenate name – gasoline only	_
Notes and Attachments	
Notes: please include in the space below any a	dditional information that will help DEP understan
your submission.	dutional information that will help be didenstan
,	

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Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
56
DEP EU# (old Point #)
1190564
Facility AQ identifier

Important:
When filling
out forms on
the computer,
use only the
tab key to
move your
cursor – do
not use the
return key.
tab
1/
return

combine units?

a unit?

Co	mplete one AP-4 for EACH organic material storage ta	nk.
A.	Equipment Description	
1.	Facility identifiers: CLEAN HARBORS OF BRAINTREE a. Facility name 34839 b. DEP Account number	1190564 c. Facility AQ identifier – SSEIS ID number
2.	Emission unit identifiers: AG TANK B3- POLYOLEFIN TANKS WASTEWA a. Facility's choice of emission unit name – edit as needed 56	TER NO VOCS 56
3.	b. Facility's emission unit number / code – edit as needed d. Combined Units – enter number of individual units Emission unit installation and decommission dates: 1/1/1977	c. DEP emissions unit # - SSEIS point #
	a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable Complete only if the unit was shut down permanently or replaced since the last report.
4.	Emission unit replacement: a. Is this unit replacing another emission unit? I no yes – enter DEP's emissions unit nu	umber for the unit being replaced below:
5.	b. DEP's Emission Unit Number and facility unit name Unit descriptions:	
	a. Description: 🗹 above ground 🗌 below grou	nd
	b. Roof type:	f

6.	Construction

11.5

c. Height / Length – feet

10

d. Diameter - feet

ightharpoonup steel weld $\ \square$ other weld $\ \square$ rivet $\ \square$ fiberglass $\ \square$ gunite

e. Capacity - gallons

6250

Specify other

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
56
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

	CORROSIVES NO VOCS NOT APPLICABLE TO REPORT					
	a. Name of material					
	b. CAS number if single chemical	30187097 c. SC Code for standing / breathing loss				
	SPECIFY LIQUID:BREATHING LOSS	c. SC Code for standing / breatning loss				
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
?	52	0				
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons (enter $\overline{0}$ if not used)				
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only				
	j. Oxygenate name – gasoline only	_				
8.	New material stored (enter new material if conte	ents changed during year of record):				
	a. Name of material					
	b. CAS number if single chemical	c. SC Code for standing / breathing loss				
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons				
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only				
	. Oxygenate name – gasoline only					
	j. Oxygenate name – gasoline only	_				
В.	j. Oxygenate name – gasoline only Notes and Attachments	_				
B.	Notes and Attachments Notes: please include in the space below any a	dditional information that will help DEP understand				
	Notes and Attachments	dditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any a	dditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any a	dditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any a	dditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any a	dditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any a	dditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any a	dditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any a	dditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any a	dditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any a	dditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any a	dditional information that will help DEP understand				

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention - Air Quality

Emission Unit - Organic Material Storage

2006 Year of record 54 DEP EU# (old Point #) 1190564 Facility AQ identifier

	Complete one AP-4 for EACH organic material storage tank.				
Important: When filling out forms on	Α.	Equipment Description			
the computer, use only the tab key to	1.	Facility identifiers: ? CLEAN HARBORS OF BRAINTREE			
move your cursor – do not use the		a. Facility name 34839	1190564		
return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number		
	2.	Emission unit identifiers:			
return		AG TANK B2- POLYOLEFIN TANK WASTEWA	ATER NO VOCS		
		a. Facility's choice of emission unit name – edit as needed 54	54		
_		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #		
How to combine		d. Combined Units – enter number of individual units			

3. Emission unit installation and decommission dates:



units?

a. Installation date - estimate if unknown (mm/dd/yyyy)

b. Decommission date (mm/dd/yyyy) - if applicable

Complete only if the unit was shut down permanently or replaced since the last report.

? 4.	Emission unit replacement:					
	a. Is this unit replacing another emission unit?					
	✓ no	☐ yes – enter DEP's emissions unit number for the unit being replaced below:				
	b. DEP's Em	ission Unit Number and facility unit name				

Unit description	s:			
a. Description:	✓ above ground	below groun	d	
b. Roof type:	☐ floating roof <a>✓ fixed	internal roof other:	Specify other	
11.5	10	6250	Specify other	
c. Height / Length -	d. Diameter – fe	e. Capac	ty – gallons	

steel weld other weld rivet fiberglass gunite 6. Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
54
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

	_
	30187097
b. CAS number if single chemical	c. SC Code for standing / breathing loss
SPECIFY LIQUID:BREATHING LOSS	
d. SC Code description – filled by eDEP 52	e. Vapor pressure in PSI at 25° C 0.0000
f. Temperature – typical storage temp. in Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)
	,
h. RVP – gasoline only	i. Total oxygen percent – gasoline only
j. Oxygenate name – gasoline only	_
New material stored (enter new material if conte	ents changed during year of record):
a. Name of material	
b. CAS number if single chemical	c. SC Code for standing / breathing loss
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C
f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons
h. RVP – gasoline only	i. Total oxygen percent – gasoline only
j. Oxygenate name – gasoline only	_
Notes and Attachments	
	d Proceedings of the Committee DED
Notes : please include in the space below any a your submission.	dditional information that will help DEP understa
your submission.	

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
53
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Cor	mplete one AP-4 for EACH organic material storage tan	ık.
Important: When filling out forms on	A.	Equipment Description	
the computer, use only the tab key to move your	1.	Facility identifiers: ? CLEAN HARBORS OF BRAINTREE	
cursor – do not use the return key.		a. Facility name 34839	1190564
tab tab		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
X	2.	Emission unit identifiers:	
Tecum		AG TANK B1- POLYOLEFIN WASTEWATER a. Facility's choice of emission unit name – edit as needed	
		53b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #
How to combine units ?		d. Combined Units – enter number of individual units	
unito :	3.	Emission unit installation and decommission dates:	
		1/1/1987	h Decembration data (mm/dd/ssss) if applicable
How to delete a unit?		a. Installation date – estimate if unknown (mm/dd/yyyy)	 b. Decommission date (mm/dd/yyyy) – if applicable Complete only if the unit was shut down permanently or replaced since the last report.
?) 4.	Emission unit replacement:	
	,	a. Is this unit replacing another emission unit?	
		✓ no	mber for the unit being replaced below:
		b. DEP's Emission Unit Number and facility unit name	
?	5.	Unit descriptions:	
		a. Description: 🗹 above ground 🗌 below groun	nd
		b. Roof type: ☐ floating roof ☐ internal roof ☐ other:	
		11.5 10 6250 c. Height / Length – feet d. Diameter – feet e. Capac	Specify other ity – gallons

steel weld other weld rivet fiberglass gunite

6. Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
53
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

	CORROSIVES NO VOCS NOT APPLIBABLE TO REPORT				
a. Name of material	TO REFORT				
	30187097				
b. CAS number if single chemical	c. SC Code for standing / breathing loss				
SPECIFY LIQUID:BREATHING LOSS					
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
52	0.0000				
f. Temperature – typical storage temp. in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)				
h. RVP – gasoline only	i. Total oxygen percent – gasoline only				
j. Oxygenate name – gasoline only	_				
New material stored (enter new material if conta. Name of material	ents changed during year of record):				
b. CAS number if single chemical	c. SC Code for standing / breathing loss				
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons				
h. RVP – gasoline only	i. Total oxygen percent – gasoline only				
	<u> </u>				
j. Oxygenate name – gasoline only					
. Notes and Attachments Notes: please include in the space below any a	additional information that will help DEP understand				
. Notes and Attachments	additional information that will help DEP understand				
. Notes and Attachments Notes: please include in the space below any a	additional information that will help DEP understand				
. Notes and Attachments Notes: please include in the space below any a	additional information that will help DEP understand				
. Notes and Attachments Notes: please include in the space below any a	additional information that will help DEP understand				
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. Notes and Attachments Notes: please include in the space below any a	additional information that will help DEP understand				
. Notes and Attachments Notes: please include in the space below any a	additional information that will help DEP understand				
. Notes and Attachments Notes: please include in the space below any a	additional information that will help DEP understand				
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. Notes and Attachments Notes: please include in the space below any a	additional information that will help DEP understand				
. Notes and Attachments Notes: please include in the space below any a	additional information that will help DEP understand				
. Notes and Attachments Notes: please include in the space below any a	additional information that will help DEP understand				
. Notes and Attachments Notes: please include in the space below any a	additional information that will help DEP understand				

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Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

Year of record
52
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Cor	mplete one AP-4 for EACH organic material storage tar	ık.
Important: When filling out forms on	A.	Equipment Description	
the computer, use only the tab key to	1.	Facility identifiers: ? CLEAN HARBORS OF BRAINTREE	
move your cursor – do		a. Facility name 34839	1190564
not use the return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
return	2.	Emission unit identifiers: AG TANK A12- 6,300 GAL #2 FUEL-0.3%S	
		a. Facility's choice of emission unit name – edit as needed 52	52
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #
How to combine units?		d. Combined Units – enter number of individual units	
	3.	Emission unit installation and decommission dates: 1/1/1985	
How to delete a unit?		a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable Complete only if the unit was shut down permanently or replaced since the last report.
<u></u>	4.	Emission unit replacement:	
		a. Is this unit replacing another emission unit?	
		✓ no	mber for the unit being replaced below:
		b. DEP's Emission Unit Number and facility unit name	
?	5.	Unit descriptions:	
		a. Description: 🗹 above ground 🗌 below ground	nd
		b. Roof type:	
		20 6 4000	Specify other
			ity – gallons

✓ steel weld □ other weld □ rivet □ fiberglass □ gunite

6. Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
52
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

Name of material CAS number if single chemical ETROLEUM STORAGEDIST FUEL NO.2 SC Code description – filled by eDEP 2 Temperature – typical storage temp. in Fahrenheit RVP – gasoline only Oxygenate name – gasoline only ew material stored (enter new material if conte	40301021 c. SC Code for standing / breathing loss e. Vapor pressure in PSI at 25° C 22252.0000 g. Annual throughput in gallons (enter 0 if not used) i. Total oxygen percent – gasoline only
CAS number if single chemical ETROLEUM STORAGEDIST FUEL NO.2 SC Code description – filled by eDEP 2 Temperature – typical storage temp. in *Fahrenheit RVP – gasoline only Oxygenate name – gasoline only	c. SC Code for standing / breathing loss e. Vapor pressure in PSI at 25° C 22252.0000 g. Annual throughput in gallons (enter 0 if not used) i. Total oxygen percent – gasoline only
SC Code description – filled by eDEP 2 Temperature – typical storage temp. in Fahrenheit RVP – gasoline only Oxygenate name – gasoline only	c. SC Code for standing / breathing loss e. Vapor pressure in PSI at 25° C 22252.0000 g. Annual throughput in gallons (enter 0 if not used) i. Total oxygen percent – gasoline only
SC Code description – filled by eDEP 2 Temperature – typical storage temp. in Fahrenheit RVP – gasoline only Oxygenate name – gasoline only	e. Vapor pressure in PSI at 25° C 22252.0000 g. Annual throughput in gallons (enter 0 if not used) i. Total oxygen percent – gasoline only
SC Code description – filled by eDEP 2 Temperature – typical storage temp. in Fahrenheit RVP – gasoline only Oxygenate name – gasoline only	g. Annual throughput in gallons (enter 0 if not used) i. Total oxygen percent – gasoline only
2 Temperature – typical storage temp. in Fahrenheit RVP – gasoline only Oxygenate name – gasoline only	g. Annual throughput in gallons (enter 0 if not used) i. Total oxygen percent – gasoline only
RVP – gasoline only Oxygenate name – gasoline only	i. Total oxygen percent – gasoline only
Oxygenate name – gasoline only	-
	nts changed during year of record): 낁
ew material stored (enter new material if conte	nts changed during year of record): 👩
Name of material	
CAS number if single chemical	c. SC Code for standing / breathing loss
SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C
Temperature – typical storage temp. in ^o Fahrenheit	g. Annual throughput in gallons
RVP – gasoline only	i. Total oxygen percent – gasoline only
Oxygenate name – gasoline only	-
lotes and Attachments otes: please include in the space below any acour submission.	dditional information that will help DEP understand
A44 1	ments to this form. For attachments that cannot be
	SC Code description – filled by eDEP Temperature – typical storage temp. in °Fahrenheit RVP – gasoline only Oxygenate name – gasoline only Iotes and Attachments otes: please include in the space below any accour submission.

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Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
51
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Cor	nplete one AP-4 for EACH organic material storage tan	k.
Important: When filling out forms on	A.	Equipment Description	
the computer, use only the	1.	Facility identifiers:	
tab key to		CLEAN HARBORS OF BRAINTREE	
move your		a. Facility name	
cursor – do not use the		34839	1190564
return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
tab			
	2.	Emission unit identifiers:	
return		AG TANK A13- 4,000 GAL #2 DIESEL -0.3%S	
		a. Facility's choice of emission unit name – edit as needed	
		51	51
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #
How to		d. Combined Units – enter number of individual units	
combine units ?			
	3.	Emission unit installation and decommission dates:	
		1/1/1985	
?		a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
How to delete a unit?			Complete only if the unit was shut down permanently or replaced since the last report.
?) 4.	Emission unit replacement:	
		a. Is this unit replacing another emission unit?	
		✓ no	mber for the unit being replaced below:
		b. DEP's Emission Unit Number and facility unit name	

b. DEP's Emission	n Unit Number and facilit	y unit name		
Unit description	ns:			
a. Description:	✓ above ground	below ground		
b. Roof type:	☐ floating roof ☑ fixed	internal roof other:		
25	7	4000	Specify other	
c. Height / Length	– feet d. Diameter – f		- gallons	

✓ steel weld □ other weld □ rivet □ fiberglass □ gunite

6. Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
51
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

CUEL NO. 2 Name of material CAS number if single chemical PETROLEUM STORAGEDIST FUEL NO.2 SC Code description – filled by eDEP 2 Temperature – typical storage temp. in Fahrenheit RVP – gasoline only	e. Vapor pressure in PSI at 25° C 152769.0000 g. Annual throughput in gallons (enter 0 if not used)
CAS number if single chemical PETROLEUM STORAGEDIST FUEL NO.2 SC Code description – filled by eDEP Temperature – typical storage temp. in Fahrenheit	c. SC Code for standing / breathing loss e. Vapor pressure in PSI at 25° C 152769.0000
PETROLEUM STORAGEDIST FUEL NO.2 SC Code description – filled by eDEP 2 Temperature – typical storage temp. in Fahrenheit	c. SC Code for standing / breathing loss e. Vapor pressure in PSI at 25° C 152769.0000
PETROLEUM STORAGEDIST FUEL NO.2 SC Code description – filled by eDEP 2 Temperature – typical storage temp. in Fahrenheit	e. Vapor pressure in PSI at 25° C ?
. SC Code description – filled by eDEP 2 Temperature – typical storage temp. in Fahrenheit	152769.0000
2 Temperature – typical storage temp. in [°] Fahrenheit	152769.0000
	g. Annual throughput in gallons (enter 0 if not used)
PVP – gasoline only	
. KVI — gasonile only	i. Total oxygen percent – gasoline only
Oxygenate name – gasoline only	-
lew material stored (enter new material if conte	nts changed during year of record): 🥐
. Name of material	
. CAS number if single chemical	c. SC Code for standing / breathing loss
. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C
Temperature – typical storage temp. in ⁰Fahrenheit	g. Annual throughput in gallons
. RVP – gasoline only	i. Total oxygen percent – gasoline only
Oxygenate name – gasoline only	-
lotes: please include in the space below any ac	Iditional information that will help DEP understand
	. Name of material . CAS number if single chemical . SC Code description – filled by eDEP Temperature – typical storage temp. in °Fahrenheit . RVP – gasoline only Oxygenate name – gasoline only Notes and Attachments Iotes: please include in the space below any accour submission.

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Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
48
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Col	mplete one AP-4 for EACH organic material storage tan	k.
Important: When filling out forms on	A.	Equipment Description	
the computer, use only the	1.	Facility identifiers: (2)	
tab key to		CLEAN HARBORS OF BRAINTREE	
move your cursor – do		a. Facility name	
not use the		34839	1190564
return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
tab			
	2.	Emission unit identifiers:	
return		AG TANK P14- 2400GAL -NOT USED 2006	
		a. Facility's choice of emission unit name – edit as needed	
		48	48
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #
		d Combined Units - outer growth as of individual resits	
How to		d. Combined Units – enter number of individual units	
combine units ?			
	3.	Emission unit installation and decommission dates:	
		1/1/1989	
(?)		a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
How to delete a unit?			Complete only if the unit was shut down permanently or replaced since the last report.
?	4.	Emission unit replacement:	
		a. Is this unit replacing another emission unit?	
		✓ no	mber for the unit being replaced below:
		b. DEP's Emission Unit Number and facility unit name	

b. DEP's Emission	Unit Number and facility	unit name		
Unit description	ns:			
a. Description:	✓ above ground	☐ below ground		
b. Roof type:	☐ floating roof ☑ fixed	☐ internal roof ☐ other:		
			Specify other	
6	8	2400		
c. Height / Length -	- feet d. Diameter - fe	eet e. Capacity -	- gallons	

✓ steel weld □ other weld □ rivet □ fiberglass □ gunite

6. Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
48
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):							
	NONE	NONE						
	a. Name of material	4070000						
	h OAO ampharif signife showing	40722098						
	b. CAS number if single chemical ORGANIC CHEM.SPECIFY IN COMMNETS	c. SC Code for standing / breathing loss						
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C						
2	52	0						
	f. Temperature – typical storage temp. in *Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)						
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only						
	j. Oxygenate name – gasoline only	-						
3.	New material stored (enter new material if conter	nts changed during year of record): 🥐						
	a. Name of material							
	b. CAS number if single chemical	c. SC Code for standing / breathing loss						
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C						
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons						
	f. Temperature – typical storage temp. in °Fahrenheit h. RVP – gasoline only	g. Annual throughput in gallons i. Total oxygen percent – gasoline only						
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments							
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any ad	i. Total oxygen percent – gasoline only						
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any ad	i. Total oxygen percent – gasoline only						
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any ad	i. Total oxygen percent – gasoline only						
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any ad	i. Total oxygen percent – gasoline only						
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any ad	i. Total oxygen percent – gasoline only						
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any ad	i. Total oxygen percent – gasoline only						
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any ad	i. Total oxygen percent – gasoline only						
B.	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any ad	i. Total oxygen percent – gasoline only						
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any ad	i. Total oxygen percent – gasoline only						
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any ad	i. Total oxygen percent – gasoline only						
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any ad	i. Total oxygen percent – gasoline only						

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Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
47
DEP EU# (old Point #)
1190564
Facility AQ identifier

Complete one AP-4 for EACH organic material storage tank.

important:
When filling
out forms on
the compute
use only the
tab key to
move your
cursor – do
not use the
return key.

•	•		•
			Equipment Descr

CLEAN HARBORS OF BRAINTREE

a. Facility name

1. Facility identifiers:

34839

b. DEP Account number

1190564

c. Facility AQ identifier - SSEIS ID number



Emission unit identifiers:

AG TANK P13- 2400 GAL -NOT USED 2006

a. Facility's choice of emission unit name – edit as needed 47

b. Facility's emission unit number / code - edit as needed

d. Combined Units - enter number of individual units

47

c. DEP emissions unit # - SSEIS point #



3. Emission unit installation and decommission dates:

1/1/1080

a. Installation date - estimate if unknown (mm/dd/yyyy)

b. Decommission date (mm/dd/yyyy) - if applicable

Complete only if the unit was shut down permanently or replaced since the last report.



4. Emission unit replacement:

a. Is this unit replacing another emission unit?

✓ no yes – enter DEP's emissions unit number for the unit being replaced below:

b. DEP's Emission Unit Number and facility unit name



. Unit descriptions:

a. Description: 🗹 above ground 🗌 below ground

b. Roof type: I floating roof Internal roof

Specify other 8 2400

c. Height / Length – feet d. Diameter – feet e. Capacity – gallons

6. Construction: ✓ steel weld ☐ other weld ☐ rivet ☐ fiberglass ☐ gunite

Bureau of Waste Prevention – Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
47
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):						
	NONE						
	a. Name of material						
		40799998					
	b. CAS number if single chemical	c. SC Code for standing / breathing loss					
	MISC.CHEMICAL STORAGE						
<u> </u>	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C					
T	52	0					
	f. Temperature – typical storage temp. in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)					
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only					
	j. Oxygenate name – gasoline only	-					
8.	New material stored (enter new material if conte	nts changed during year of record):					
	a. Name of material						
	b. CAS number if single chemical	c. SC Code for standing / breathing loss					
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C					
	f. Temperature – typical storage temp. in ^o Fahrenheit	g. Annual throughput in gallons					
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only					
	j. Oxygenate name – gasoline only	-					
В.	Notes and Attachments						
1.		dditional information that will help DEP understand					
	your submission.						
	2 Attachments: Check here to submit attach	ments to this form. For attachments that cannot be					

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
46
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Cor	mplete one AP-4 for EACH organic material storage tar	nk.
Important: When filling out forms on	A.	Equipment Description	
the computer, use only the tab key to move your	1.	Facility identifiers: ? CLEAN HARBORS OF BRAINTREE	
cursor – do		a. Facility name 34839	1190564
not use the return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
return	2.	Emission unit identifiers: AG TANK P12- 3,000 GAL -NOT USED 2006	
		a. Facility's choice of emission unit name – edit as needed 46	46
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #
How to combine units ?		d. Combined Units – enter number of individual units	
_	3.	Emission unit installation and decommission dates: 1/1/1989	
How to delete a unit?		a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable Complete only if the unit was shut down permanently or replaced since the last report.
<u> </u>	4.	Emission unit replacement:	
		a. Is this unit replacing another emission unit?	
		✓ no	mber for the unit being replaced below:
		b. DEP's Emission Unit Number and facility unit name	
?	5.	Unit descriptions:	
		a. Description: 🗹 above ground 🗌 below ground	nd
		b. Roof type: ☐ floating roof ☐ internal roof ☐ other:	
		12 8 3000	Specify other
			sity – gallons

✓ steel weld □ other weld □ rivet □ fiberglass □ gunite

6. Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
46
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

Name of material CAS number if single chemical ISC.CHEMICAL STORAGE SC Code description – filled by eDEP 2 Femperature – typical storage temp. in °Fahrenheit RVP – gasoline only Oxygenate name – gasoline only	40799998 c. SC Code for standing / breathing loss e. Vapor pressure in PSI at 25° C 0 g. Annual throughput in gallons (enter 0 if not used) i. Total oxygen percent – gasoline only
CAS number if single chemical ISC.CHEMICAL STORAGE SC Code description – filled by eDEP 2 Temperature – typical storage temp. in Fahrenheit RVP – gasoline only	c. SC Code for standing / breathing loss e. Vapor pressure in PSI at 25° C O g. Annual throughput in gallons (enter 0 if not used)
ISC.CHEMICAL STORAGE SC Code description – filled by eDEP Temperature – typical storage temp. in Fahrenheit RVP – gasoline only	c. SC Code for standing / breathing loss e. Vapor pressure in PSI at 25° C O g. Annual throughput in gallons (enter 0 if not used)
ISC.CHEMICAL STORAGE SC Code description – filled by eDEP Temperature – typical storage temp. in Fahrenheit RVP – gasoline only	e. Vapor pressure in PSI at 25° C 0 g. Annual throughput in gallons (enter 0 if not used)
SC Code description – filled by eDEP 2 Cemperature – typical storage temp. in Fahrenheit RVP – gasoline only	g. Annual throughput in gallons (enter 0 if not used)
Pemperature – typical storage temp. in Fahrenheit RVP – gasoline only	g. Annual throughput in gallons (enter 0 if not used)
Femperature – typical storage temp. in [°] Fahrenheit RVP – gasoline only	g. Annual throughput in gallons (enter 0 if not used)
RVP – gasoline only	
	i. Total oxygen percent – gasoline only
)xvgenate name – gasoline only	
skygonato namo gasomio omy	
ew material stored (enter new material if conten	nts changed during year of record):
Name of material	
CAS number if single chemical	c. SC Code for standing / breathing loss
SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C
Femperature – typical storage temp. in ⁰Fahrenheit	g. Annual throughput in gallons
RVP – gasoline only	i. Total oxygen percent – gasoline only
Dxygenate name – gasoline only	
otes and Attachments	
	ditional information that will help DEP understand
our submission.	
	Name of material CAS number if single chemical SC Code description – filled by eDEP Temperature – typical storage temp. in °Fahrenheit RVP – gasoline only Dxygenate name – gasoline only otes and Attachments

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

help

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
45
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Coi	mplete one AP-4	for EACH organic m	aterial storage tar	nk.
Important: When filling out forms on	A.	Equipmen	t Description		
the computer, use only the	1.	Facility identifie	ers: 🕎		
tab key to		CLEAN HARBO	ORS OF BRAINTRE	ΕE	
move your cursor – do		a. Facility name			
not use the		34839			1190564
return key.		b. DEP Account nu	mber		c. Facility AQ identifier – SSEIS ID number
	2.	Emission unit id	dentifiers:		
return		AG TANK P11-	- 3,000 GAL -NOT	USED 2006	
			of emission unit name -		
		45			45
		b. Facility's emission	on unit number / code – e	edit as needed	c. DEP emissions unit # - SSEIS point #
		d Combined Unite	antar number of indivi	dual unita	
How to combine units ?		a. Combined Units	– enter number of indivi	duai units	
	3.	Emission unit in	nstallation and deco	mmission dates:	
		1/1/1989			
		a. Installation date	 estimate if unknown (n 	nm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
How to delete a unit?					Complete only if the unit was shut down permanently or replaced since the last report.
?	4.	Emission unit r	eplacement:		
		a. Is this unit re	placing another em	ission unit?	
		☑ no □	yes – enter DEP's o	emissions unit nu	mber for the unit being replaced below:
		b. DEP's Emission	unit Number and facility	y unit name	
?	5.	Unit description	ns:		
		a. Description:	✓ above ground	below grour	nd
		b. Roof type:	☐ floating roof ☑ fixed	internal roof other:	Specify other
		10	Ω	3000	oponiy onlor

6. Construction: \checkmark steel weld \square other weld \square rivet \square fiberglass \square gunite

e. Capacity - gallons

c. Height / Length – feet d. Diameter – feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
45
DEP EU# (old Point #)
1190564

Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):							
	NONE							
	a. Name of material							
	b. CAC growth as if signals absenced	40722098						
	b. CAS number if single chemical ORGANIC CHEM.SPECIFY IN COMMNETS	c. SC Code for standing / breathing loss						
_	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C						
?	52	0						
	f. Temperature – typical storage temp. in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)						
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only						
	j. Oxygenate name – gasoline only							
8.	New material stored (enter new material if conten	ts changed during year of record):						
	a. Name of material							
	b. CAS number if single chemical	c. SC Code for standing / breathing loss						
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C						
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons						
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only						
	j. Oxygenate name – gasoline only							
В.	Notes and Attachments							
1.	Notes: please include in the space below any add	ditional information that will help DEP understand						
	your submission.							
	2 Attachments: Check here to submit attachr	nents to this form. For attachments that cannot be						

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention - Air Quality

Emission Unit - Organic Material Storage

2006 Year of record 44 DEP EU# (old Point #) 1190564 Facility AQ identifier

Important:
When filling
out forms on
the computer,
use only the
tab key to
move your
cursor – do
not use the
return key.
N tab

Coi	mplete one AP-4 for EACH organic material storage tan	ık.
Α.	Equipment Description	
1.	Facility identifiers:	
	CLEAN HARBORS OF BRAINTREE	
	a. Facility name	
	34839	1190564
	b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
2.	Emission unit identifiers:	
	AG TANK P10- 3,000 GAL -NOT USED 2006	
	a. Facility's choice of emission unit name – edit as needed	
	44	44
	b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #
	d. Combined Units – enter number of individual units	
3.	Emission unit installation and decommission dates:	
	1/1/1990	
	a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
		Complete only if the unit was shut down permanently or replaced since the last report.
4	Emission unit replacement:	



combine units?

a. Is this unit replacing another emission unit?

✓ no yes – enter DEP's emissions unit number for the unit being replaced below:

b. DEP's Emission Unit Number and facility unit name

? 5.	Unit de	escript	ions:
			_

a. Description: 🗹 above ground below ground

b. Roof type: floating roof internal roof fixed other:

Specify other 12 8 3000

e. Capacity - gallons c. Height / Length - feet d. Diameter - feet

✓ steel weld □ other weld □ rivet □ fiberglass □ gunite 6. Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
44
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

	Material stored (at start of year):							
	NONE							
	a. Name of material							
		40722098						
	b. CAS number if single chemical	c. SC Code for standing / breathing loss						
	ORGANIC CHEM.SPECIFY IN COMMNETS d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C						
2	52	0.0000						
<u> </u>	f. Temperature – typical storage temp. in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)						
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only						
	j. Oxygenate name – gasoline only							
8.	New material stored (enter new material if conten	its changed during year of record): 🥐						
	a. Name of material							
	b. CAS number if single chemical	c. SC Code for standing / breathing loss						
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C						
	f. Temperature – typical storage temp. in ^o Fahrenheit	g. Annual throughput in gallons						
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only						
	j. Oxygenate name – gasoline only							
В.	Notes and Attachments							
1.	Notes: please include in the space below any add	ditional information that will help DEP understand						
	varia aribinianian							
	your submission.							
	your submission.							
	your submission.							
	your submission.							
	your submission.							
	your submission.							
	your submission.							
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	your submission.							
	your submission.							
	your submission.							
	your submission.							

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BWP AQ AP-4

Emission Unit - Organic Material Storage

Year of record
43
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Complete one AP-4 for EACH organic material storage tank.					
Important: When filling out forms on	A.	Equipment Description				
the computer, use only the tab key to move your	1.	Facility identifiers: CLEAN HARBORS OF BRAINTREE				
cursor – do		a. Facility name 34839	1190564			
not use the return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number			
tab						
	2.	Emission unit identifiers:				
return		AG TANK P9- 3,000 GAL -NOT USED 2006				
		a. Facility's choice of emission unit name – edit as needed 43	42			
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #			
How to combine units?		d. Combined Units – enter number of individual units				
units :	3.	Emission unit installation and decommission dates:				
		1/1/1989				
?		a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable			
How to delete a unit?			Complete only if the unit was shut down permanently or replaced since the last report.			
?	4.	Emission unit replacement:				
•		a. Is this unit replacing another emission unit?				
		✓ no yes – enter DEP's emissions unit nu	mber for the unit being replaced below:			
		b. DEP's Emission Unit Number and facility unit name				
?	5.	Unit descriptions:				
		a. Description: 🗹 above ground 🗌 below groun	nd			
		b. Roof type:				
		12 8 3000	Specify other			
			sity – gallons			

6. Construction: \checkmark steel weld \square other weld \square rivet \square fiberglass \square gunite

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
43
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

Material stored (at start of year):				
NONE					
a. Name of material					
75092		40722008			
b. CAS number if single chemical		c. SC Code for standing / breathing loss			
METHYLENE CHLORIDE-WIT	HDRAWAL				
d. SC Code description – filled by eDE 52	P	e. Vapor pressure in PSI at 25° C			
f. Temperature – typical storage temp.	in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)			
		g			
h. RVP – gasoline only		i. Total oxygen percent – gasoline only			
j. Oxygenate name – gasoline only	·				
New material stored (enter new	material if contents of	changed during year of record): ?			
a. Name of material					
b. CAS number if single chemical		c. SC Code for standing / breathing loss			
d. SC Code description – filled by eDE	P	e. Vapor pressure in PSI at 25° C			
f. Temperature – typical storage temp.	in ºFahrenheit	g. Annual throughput in gallons			
f. Temperature – typical storage temp. h. RVP – gasoline only	in ºFahrenheit	g. Annual throughput in gallons i. Total oxygen percent – gasoline only			
	in ºFahrenheit				
h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachme	nts	i. Total oxygen percent – gasoline only			
h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachme Notes: please include in the sp	nts	i. Total oxygen percent – gasoline only			
h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachme Notes: please include in the sp	nts	i. Total oxygen percent – gasoline only			
h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachme Notes: please include in the sp	nts	i. Total oxygen percent – gasoline only			
h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachme Notes: please include in the sp	nts	i. Total oxygen percent – gasoline only			
h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachme Notes: please include in the sp	nts	i. Total oxygen percent – gasoline only			
h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachme Notes: please include in the sp	nts	i. Total oxygen percent – gasoline only			
h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachme Notes: please include in the sp	nts	i. Total oxygen percent – gasoline only			
h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachme Notes: please include in the sp	nts				
h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachme Notes: please include in the sp	nts	i. Total oxygen percent – gasoline only			
h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachme Notes: please include in the sp	nts	i. Total oxygen percent – gasoline only			
h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachme Notes: please include in the sp	nts	i. Total oxygen percent – gasoline only			
h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachme Notes: please include in the sp	nts	i. Total oxygen percent – gasoline only			

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Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
42
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Coi	Complete one AP-4 for EACH organic material storage tank.				
Important: When filling out forms on	A.	Equipment Description				
the computer, use only the	1.	Facility identifiers: (?)				
tab key to		CLEAN HARBORS OF BRAINTREE				
move your cursor – do		a. Facility name				
not use the		34839	1190564			
return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number			
	2.	Emission unit identifiers:				
return		AG TANK P8- 3,000 GAL -NOT USED 2006				
		a. Facility's choice of emission unit name – edit as needed				
		42	42			
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #			
How to combine		d. Combined Units – enter number of individual units				
units?	3.	Emission unit installation and decommission dates				
	Э.		•			
2		a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable			
How to delete a unit?		a. Installation date commute in animown (minutally))))	Complete only if the unit was shut down permanently or replaced since the last report.			
6	4.	Emission unit replacement:				
U		a. Is this unit replacing another emission unit?				
		a. 15 this thin replacing another emission thin:				
		✓ no yes – enter DEP's emissions unit n	umber for the unit being replaced below:			
		b. DEP's Emission Unit Number and facility unit name				
5. Unit descriptions:						
		a. Description: ✓ above ground ☐ below ground	und			
		b. Roof type:	of			
		<u> </u>	Specify other			

3000

e. Capacity - gallons

12

c. Height / Length – feet d. Diameter – feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
42
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

	Material stored (at start of year):					
	NONE					
	a. Name of material					
		40706022				
	b. CAS number if single chemical	c. SC Code for standing / breathing loss				
	PERCHLOROETHYLENE-WORKING LOSS					
?	d. SC Code description – filled by eDEP 52	e. Vapor pressure in PSI at 25° C				
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)				
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only				
	j. Oxygenate name – gasoline only					
3.	New material stored (enter new material if conter	nts changed during year of record): ?				
	a. Name of material					
	b. CAS number if single chemical	c. SC Code for standing / breathing loss				
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
	f. Temperature – typical storage temp. in ^o Fahrenheit	g. Annual throughput in gallons				
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only				
	j. Oxygenate name – gasoline only	-				
	, ,,,					
	Notes and Attachments	ditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any ad	ditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any ad	ditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any ad	ditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any ad	ditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any ad	ditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any ad	ditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any ad	ditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any ad	ditional information that will help DEP understand				
B.	Notes and Attachments Notes: please include in the space below any ad	ditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any ad	ditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any ad	ditional information that will help DEP understand				
	Notes and Attachments Notes: please include in the space below any ad	ditional information that will help DEP understand				

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Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
41
DEP EU# (old Point #)
1190564
Facility AQ identifier

Complete one AP-4 fo	or EACH organi	ic materia	l storage	tank.
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Important:
When filling
out forms on
the computer,
use only the
tab key to
move your
cursor – do
not use the
return key.

Α.	Equipment Description
1.	Facility identifiers: (?)
	CLEAN HARBORS OF BRAINTREE





2. Emission unit identifiers:

b. DEP Account number

a. Facility name34839

AG TANK P7-	3,000 GAL	-NOT USED 2006
a. Facility's choice	of emission unit	name - edit as needed

b. Facility's emission unit number / code – edit as needed

d. Combined Units - enter number of individual units

c. DEP emissions unit # - SSEIS point #

c. Facility AQ identifier - SSEIS ID number

1190564

41



3. Emission unit installation and decommission dates:

1	/1	/1	q	89

41

a. Installation date - estimate if unknown (mm/dd/yyyy)

b. Decommission date (mm/dd/yyyy) - if applicable

Complete only if the unit was shut down permanently or replaced since the last report.



Emission unit replacement:

a. Is this unit replacing another emission unit?

b. DEP's Emission Unit Number and facility unit name

?)5.	Unit descriptions:

a. Description: 🗹 above ground 🗌 below ground

b. Roof type: ☐ floating roof ☐ internal roof ☐ type: ☐ fixed ☐ other:

Specify other 12 8 3000

c. Height / Length – feet d. Diameter – feet e. Capacity – gallons

6. Construction: ✓ steel weld □ other weld □ rivet □ fiberglass □ gunite

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
41
DEP EU# (old Point #)
1190564

Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):					
	NONE					
	a. Name of material					
	79016	40722010				
	b. CAS number if single chemical	c. SC Code for standing / breathing loss				
	1,1,1-TRICHLOROETHYLENE-WITH LOSS	J. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.				
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
9	52	0				
	f. Temperature – typical storage temp. in *Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)				
		g. 7 miliaa. ameagripat iii gamene (emer e ii net aeea)				
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only				
	j. Oxygenate name – gasoline only					
8.	New material stored (enter new material if conter	New material stored (enter new material if contents changed during year of record):				
	a. Name of material					
	b. CAS number if single chemical	c. SC Code for standing / breathing loss				
	b. CAO number il single chemical	c. So code for standing / breathing loss				
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
	u. So code description – filled by eDEF	e. Vapor pressure in FSI at 25° C				
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons				
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only				
	j. Oxygenate name – gasoline only					
В.	Notes and Attachments					
1.	Notes : please include in the space below any ad your submission.	ditional information that will help DEP understand				
	2. Attachments: Check here to submit attachi	ments to this form. For attachments that cannot be				

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
40
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Co	mplete one AP-4	for EACH organic m	naterial storage tan	ık.
Important: When filling out forms on	A.	Equipmen	nt Description	ı	
the computer, use only the tab key to move your	1.	Facility identified	ers: ? ORS OF BRAINTRE	ΞE	
cursor – do		a. Facility name			4400504
not use the return key.		b. DEP Account no	ımher		c. Facility AQ identifier – SSEIS ID number
tab		S. SET FROCOUNTY			e. Facility / Caladriands Could be familiated.
	2.	Emission unit i	dentifiers:		
return		AG TANK P6-	3,000 GAL -NOT	USED 2006	
		a. Facility's choice	of emission unit name -	edit as needed	
		40			40
		b. Facility's emissi	on unit number / code -	edit as needed	c. DEP emissions unit # - SSEIS point #
How to combine		d. Combined Units	s – enter number of indivi	dual units	
units ?	3.	Emission unit i	nstallation and deco	mmission dates:	
		1/1/1989			
?			- estimate if unknown (r	mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
How to delete a unit ?					Complete only if the unit was shut down permanently or replaced since the last report.
?	4.	Emission unit	eplacement:		
•		a. Is this unit re	eplacing another em	ission unit?	
		v no □	yes – enter DEP's	emissions unit nu	mber for the unit being replaced below:
		b. DEP's Emission	n Unit Number and facilit	y unit name	
?	5.	Unit description	ns:		
		a. Description:	✓ above ground	below grour	nd
		b. Roof type:	☐ floating roof ☑ fixed	internal roof	
		12	8	3000	Specify other

e. Capacity - gallons

c. Height / Length – feet d. Diameter – feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
40
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):						
	NONE						
	a. Name of material						
	75092	40722007					
	b. CAS number if single chemical	c. SC Code for standing / breathing loss					
	METHYLENE CHLORIDE-STAND.LOSS						
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C					
(?)	52	0					
	f. Temperature – typical storage temp. in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)					
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only					
	j. Oxygenate name – gasoline only						
8.	New material stored (enter new material if content	s changed during year of record): ?					
	a. Name of material						
	b. CAS number if single chemical	c. SC Code for standing / breathing loss					
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C g. Annual throughput in gallons					
	f. Temperature – typical storage temp. in °Fahrenheit						
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only					
	j. Oxygenate name – gasoline only						
В.	Notes and Attachments						
1.	Notes: please include in the space below any additional information that will help DEP understand						
	your submission.						
	2 Attachments: Check here to submit attachm	pents to this form. For attachments that cannot be					

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

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Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

Year of record
39
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Coi	nplete one AP-4	for EACH organic m	naterial storage tar	nk.
Important: When filling out forms on	A.	Equipmen	t Description	1	
the computer, use only the tab key to	1.	Facility identified	ers: ? ORS OF BRAINTRI	EE	
move your cursor – do		a. Facility name			
not use the		34839	t		1190564
return key.		b. DEP Account no	umber		c. Facility AQ identifier – SSEIS ID number
	2.	Emission unit i	dentifiers:		
return		AG TANK P5-	3,000 GAL -NOT	USED 2006	
			of emission unit name -		
		39			39
		b. Facility's emissi	on unit number / code –	edit as needed	c. DEP emissions unit # - SSEIS point #
How to combine units ?		d. Combined Units	- enter number of indivi	idual units	
units :	3.	Emission unit i	nstallation and deco	ommission dates:	
	٠.				
2		1/1/1989	– estimate if unknown (r	mm/dd/vvvv)	b. Decommission date (mm/dd/yyyy) – if applicable
How to delete a unit ?			(Complete only if the unit was shut down permanently or replaced since the last report.
<u> </u>	4.	Emission unit r	eplacement:		
•		a. Is this unit re	eplacing another em	nission unit?	
		v no □	yes – enter DEP's	emissions unit nu	mber for the unit being replaced below:
		b. DEP's Emission	n Unit Number and facilit	y unit name	
?	5.	Unit description	ns:		
		a. Description:	✓ above ground	below grour	nd
		b. Roof type:	☐ floating roof ✓ fixed	☐ internal roof☐ other:	
		12	8	3000	Specify other
		14	O	3000	

e. Capacity - gallons

d. Diameter - feet

c. Height / Length – feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
39
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7. Material stored (at start of year)	Material stored (at start of year):						
NONE							
a. Name of material							
79016	40722010						
b. CAS number if single chemical	c. SC Code for standing / breathing loss						
1,1,1-TRICHLOROETHYLENE-	TH LOSS						
d. SC Code description – filled by eDEF	e. Vapor pressure in PSI at 25° C						
52	0						
f. Temperature – typical storage temp. ii	threnheit g. Annual throughput in gallons (enter 0 if not used)						
h. RVP – gasoline only	i. Total oxygen percent – gasoline only						
j. Oxygenate name – gasoline only							
8. New material stored (enter new	New material stored (enter new material if contents changed during year of record):						
a. Name of material							
b. CAS number if single chemical	c. SC Code for standing / breathing loss						
d. SC Code description – filled by eDEF	e. Vapor pressure in PSI at 25° C						
f. Temperature – typical storage temp. i	g. Annual throughput in gallons						
h. RVP – gasoline only	i. Total oxygen percent – gasoline only						
j. Oxygenate name – gasoline only							
B. Notes and Attachmer1. Notes: please include in the spayour submission.	below any additional information that will help DEP understand						
	submit attachments to this form. For attachments that cannot be ch attachments in notes above and deliver them to DEP with a						

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Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
38
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Со	mplete one AP-4 for EACH organic material storage ta	ank.			
Important: When filling out forms on	A.	A. Equipment Description				
the computer,	1.	Facility identifiers: 7				
use only the tab key to		CLEAN HARBORS OF BRAINTREE				
move your cursor – do		a. Facility name				
not use the		34839	1190564			
return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number			
tab						
	2.	Emission unit identifiers:				
return		AG TANK P4- 3,000 GAL -NOT USED 2006				
		a. Facility's choice of emission unit name – edit as needed				
		38	38			
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #			
		d Combined Units anter number of individual units				
How to combine units ?		d. Combined Units – enter number of individual units				
	3.	Emission unit installation and decommission dates	:			
_		1/1/1989				
?		a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable			
How to delete		, , , , , , , , , , , , , , , , , , , ,	Complete only if the unit was shut down permanently			
a unit?			or replaced since the last report.			
9	4.	Emission unit replacement:				
<u> </u>		a. Is this unit replacing another emission unit?				
		a. 13 this drift replacing another emission drift:				
		✓ no yes – enter DEP's emissions unit n	umber for the unit being replaced below:			
		b. DEP's Emission Unit Number and facility unit name				
?	5.	Unit descriptions:				
		a. Description: 🗹 above ground 🗌 below ground	und			
		b. Roof type:	of			

6. Construction: \checkmark steel weld \square other weld \square rivet \square fiberglass \square gunite

3000

e. Capacity – gallons

8

c. Height / Length – feet d. Diameter – feet

Specify other

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
38
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year): NONE							
	a. Name of material							
		40799998						
	b. CAS number if single chemical	c. SC Code for standing / breathing loss						
	MISC.CHEMICAL STORAGE	Vancara in POL at 050 O						
?	d. SC Code description – filled by eDEP 52	e. Vapor pressure in PSI at 25° C						
	f. Temperature – typical storage temp. in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)						
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only						
	j. Oxygenate name – gasoline only	=						
8.	New material stored (enter new material if conte	New material stored (enter new material if contents changed during year of record):						
	a. Name of material							
	b. CAS number if single chemical	c. SC Code for standing / breathing loss						
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C g. Annual throughput in gallons						
	f. Temperature – typical storage temp. in ^o Fahrenheit							
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only						
	j. Oxygenate name – gasoline only							
В.	Notes and Attachments							
1.	Notes: please include in the space below any additional information that will help DEP understand							
	your submission.							
	2 Attachments: Check here to submit attach	amonto to this form. For attachments that cannot he						

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention – Air Quality

Emission Unit - Organic Material Storage

2006 Year of record 37 DEP EU# (old Point #) 1190564 Facility AQ identifier

Important: When filling
out forms on
the compute
use only the
tab key to move your
cursor – do
not use the
return key.
tab
V

					•
	Complete one AP-4 for EACH organic material storage tank.				
Important: When filling out forms on	A.	Equipment Description			
the computer, use only the	1.	Facility identifie	rs: 🕎		
tab key to		CLEAN HARBO	ORS OF BRAINTRE	E	
move your cursor – do		a. Facility name			
not use the return key.		b. DEP Account nu	mhor		1190564 c. Facility AQ identifier – SSEIS ID number
tab tab		b. DEF Account nu	mbei		c. Facility Act Identifier – 33E13 ID Humber
	2.	Emission unit id	dentifiers:		
return		AG TANK P3-	3,000 GAL -NOT	USED 2006	
			of emission unit name –		
		37			37
_		b. Facility's emission	on unit number / code – e	edit as needed	c. DEP emissions unit # - SSEIS point #
How to combine		d. Combined Units	– enter number of individ	dual units	
units ?	3.	Emission unit in	nstallation and deco	mmission dates:	
	٥.	1/1/1989	iotaliation and acco	mmoolon datoo.	
?			- estimate if unknown (m	nm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
How to delete a unit ?				••••	Complete only if the unit was shut down permanently or replaced since the last report.
<u> </u>	4.	Emission unit re	eplacement:		
•		a. Is this unit re	placing another em	ission unit?	
		✓ no	yes – enter DEP's e	emissions unit nui	mber for the unit being replaced below:
		b. DEP's Emission	Unit Number and facility	y unit name	
<u> </u>	5.	Unit description	s:		
•		a. Description:	✓ above ground	below groun	nd
		b. Roof type:	☐ floating roof ✓ fixed	☐ internal roof ☐ other:	Specify other
		12	8	3000	эреспу ошег

e. Capacity - gallons

✓ steel weld □ other weld □ rivet □ fiberglass □ gunite

6. Construction:

c. Height / Length - feet

d. Diameter - feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
37
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):						
	NONE						
	a. Name of material						
	75092	40722008					
	b. CAS number if single chemical	c. SC Code for standing / breathing loss					
	METHYLENE CHLORIDE-WITHDRAWAL						
9	d. SC Code description – filled by eDEP 52	e. Vapor pressure in PSI at 25° C					
Ů	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)					
?	h. RVP – gasoline only i. Total oxygen percent – gasoline only						
	j. Oxygenate name – gasoline only	_					
8.	New material stored (enter new material if conte	New material stored (enter new material if contents changed during year of record): ?					
	a. Name of material	a. Name of material					
	b. CAS number if single chemical	c. SC Code for standing / breathing loss					
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C					
	f. Temperature – typical storage temp. in ^o Fahrenheit	g. Annual throughput in gallons i. Total oxygen percent – gasoline only					
	h. RVP – gasoline only						
	j. Oxygenate name – gasoline only	_					
B. 1.	Notes and Attachments Notes: please include in the space below any acyour submission.	dditional information that will help DEP understand					
	2 Attachments: Check here to submit attach	nments to this form. For attachments that cannot be					
	sent electronically, please list all such attachmen						

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Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
36
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Cor	complete one AP-4 for EACH organic material storage tank.					
Important: When filling out forms on	Α.	A. Equipment Description					
the computer, use only the tab key to 1. Facility identifie CLEAN HARBO			ers: ? ORS OF BRAINTREE				
move your cursor – do		a. Facility name					
not use the		34839			1190564		
return key.		b. DEP Account nu	mber		c. Facility AQ identifier – SSEIS ID number		
	2.	Emission unit id	dentifiers:				
return		AG TANK P2-	3,000 GAL -NOT	USED 2006-			
			of emission unit name –				
		36			36		
		b. Facility's emission	on unit number / code – e	edit as needed	c. DEP emissions unit # - SSEIS point #		
How to combine units ?		d. Combined Units	 enter number of individual 	dual units			
	3.	Emission unit in	nstallation and deco	mmission dates:			
		1/1/1989					
?			 estimate if unknown (n 	nm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable		
How to delete a unit?					Complete only if the unit was shut down permanently or replaced since the last report.		
?	4.	Emission unit replacement:					
•		a. Is this unit replacing another emission unit?					
		☑ no	yes – enter DEP's e	mber for the unit being replaced below:			
		b. DEP's Emission	Unit Number and facility	y unit name			
?	5.	Unit descriptions:					
		a. Description:	✓ above ground	below groun	nd		
		b. Roof type:	☐ floating roof ☑ fixed	☐ internal roof ☐ other:			
		12	8	3000	Specify other		
		_	-				

6. Construction: ✓ steel weld ☐ other weld ☐ rivet ☐ fiberglass ☐ gunite

e. Capacity - gallons

c. Height / Length – feet d. Diameter – feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
36
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):						
	NONE						
	a. Name of material						
	79016	40722010					
	b. CAS number if single chemical	c. SC Code for standing / breathing loss					
	1,1,1-TRICHLOROETHYLENE-WITH LOSS						
7	d. SC Code description – filled by eDEP 52	e. Vapor pressure in PSI at 25° C					
<u> </u>	f. Temperature – typical storage temp. in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)					
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only					
	j. Oxygenate name – gasoline only	-					
8.	New material stored (enter new material if conter	nts changed during year of record): ?					
	a. Name of material						
	b. CAS number if single chemical	c. SC Code for standing / breathing loss					
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C					
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons					
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only					
	j. Oxygenate name – gasoline only	_					
B. 1.	Notes and Attachments Notes: please include in the space below any ac your submission.	dditional information that will help DEP understand					
	O Attack manufacture (Charles to a basis of the	monto to this fame. For attack we do that are					
	 Attachments:	ments to this form. For attachments that cannot be nts in notes above and deliver them to DEP with a					

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Bureau of Waste Prevention – Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
35
DEP EU# (old Point #)
1190564
Facility AQ identifier

combine units?

a unit?

Co	Complete one AP-4 for EACH organic material storage tank.				
Α.	Equipment Description				
1.	Facility identifiers: CLEAN HARBORS OF BRAINTREE				
	a. Facility name 34839 b. DEP Account number	1190564 c. Facility AQ identifier – SSEIS ID number			
2.	Emission unit identifiers: AG TANK P1- 3,000 GAL - NOT USED 2005- To	CE			
	a. Facility's choice of emission unit name – edit as needed 35 b. Facility's emission unit number / code – edit as needed	35 c. DEP emissions unit # - SSEIS point #			
	d. Combined Units – enter number of individual units				
3.	Emission unit installation and decommission dates: 1/1/1989				
	a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable Complete only if the unit was shut down permanently or replaced since the last report.			
4.	Emission unit replacement: a. Is this unit replacing another emission unit?				
	ves − enter DEP's emissions unit nu	mber for the unit being replaced below:			
	b. DEP's Emission Unit Number and facility unit name				
5.	Unit descriptions:				
	a. Description: above ground below ground	nd			

	a. Description:	escription: 🗹 above ground		w ground			
	b. Roof type:	☐ floating roof ✓ fixed	inter	nal roof r:			
					Specify other		
	12	8		3000			
	c. Height / Length -	- feet d. Diameter - fe	et	e. Capacity –	gallons	=	
6.	Construction:	steel weld	other wel	d 🗌 rivet	fiberglass	gunite	

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
35
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):						
	NONE						
	a. Name of material						
	79016	40722010					
	b. CAS number if single chemical	c. SC Code for standing / breathing loss					
	1,1,1-TRICHLOROETHYLENE-WITH LOSS						
7	d. SC Code description – filled by eDEP 52	e. Vapor pressure in PSI at 25° C					
<u> </u>	f. Temperature – typical storage temp. in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)					
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only					
	j. Oxygenate name – gasoline only	-					
8.	New material stored (enter new material if conter	nts changed during year of record): ?					
	a. Name of material						
	b. CAS number if single chemical	c. SC Code for standing / breathing loss					
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C					
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons					
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only					
	j. Oxygenate name – gasoline only	_					
B. 1.	Notes and Attachments Notes: please include in the space below any ac your submission.	dditional information that will help DEP understand					
	O Attack manufacture (Charles to a book of the	monto to this fame. For attack we do that are					
	 Attachments:	ments to this form. For attachments that cannot be nts in notes above and deliver them to DEP with a					

paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
34
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Cor	mplete one AP-4	for EACH organic m	aterial storage tar	ık.		
Important: When filling	A.	A. Equipment Description					
out forms on the computer, use only the	1.	Facility identifiers:					
tab key to		CLEAN HARBO	ORS OF BRAINTRE	Ε			
move your cursor – do		a. Facility name					
not use the return key.		b. DEP Account nu	ımher			90564 acility AQ identifier – SSEIS ID number	
tab		b. DEI Account no	misci		0.16	admity Ag Identifier Goelo ID Humber	
	2.	Emission unit i	dentifiers:				
return		AG TANK F8-	1,500 GAL -NOT	USED 2006- SO	LVEN	NT	
		a. Facility's choice	of emission unit name -				
		34		- 19	34	ED	
_		b. Facility's emission	on unit number / code – e	edit as needed	C. DI	EP emissions unit # - SSEIS point #	
How to combine units ?		d. Combined Units	– enter number of indivi	dual units			
unito :	3.	Emission unit in	nstallation and deco	mmission dates:			
		1/1/1987					
?			- estimate if unknown (n	nm/dd/yyyy)	b. D	ecommission date (mm/dd/yyyy) – if applicable	
How to delete a unit ?						plete only if the unit was shut down permanently eplaced since the last report.	
?	4.	Emission unit r	eplacement:				
		a. Is this unit re	eplacing another em	ission unit?			
		✓ no					
		b. DEP's Emission	n Unit Number and facility	y unit name			
?	5.	Unit descriptions:					
		a. Description:	✓ above ground	below grour	nd		
		b. Roof type:	☐ floating roof ☑ fixed	internal roof	f	Specify other	
		9.5	5.33	1500		Specify officer	

6. Construction: \checkmark steel weld \square other weld \square rivet \square fiberglass \square gunite

e. Capacity - gallons

c. Height / Length – feet d. Diameter – feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
34
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

	Material stored (at start of year):							
	NONE							
	a. Name of material							
		40722098						
	b. CAS number if single chemical	c. SC Code for standing / breathing loss						
	ORGANIC CHEM.SPECIFY IN COMMNETS d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C						
2	52	0.0000						
<u> </u>	f. Temperature – typical storage temp. in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)						
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only						
	j. Oxygenate name – gasoline only							
8.	New material stored (enter new material if conten	its changed during year of record): 🥐						
	a. Name of material							
	b. CAS number if single chemical	c. SC Code for standing / breathing loss						
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C						
	f. Temperature – typical storage temp. in ^o Fahrenheit	g. Annual throughput in gallons						
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only						
	j. Oxygenate name – gasoline only							
В.	Notes and Attachments							
1.	Notes: please include in the space below any additional information that will help DEP understand							
	varia aribinianian							
	your submission.							
	your submission.							
	your submission.							
	your submission.							
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	your submission.							
	your submission.							
	your submission.							

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention - Air Quality

Emission Unit - Organic Material Storage

2006 Year of record 32 DEP EU# (old Point #) 1190564 Facility AQ identifier

Complete one AP-4	for EACH o	rganic material	storage tank.
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Important: A. Equipment Description When filling out forms on the computer, 1. Facility identifiers: use only the tab key to CLEAN HARBORS OF BRAINTREE move your a. Facility name cursor - do 34839 1190564 not use the return key. b. DEP Account number c. Facility AQ identifier - SSEIS ID number Emission unit identifiers: AG TANK F6- 2,000 GAL -NOT UESD 2006- SOLVENT a. Facility's choice of emission unit name - edit as needed 32 32 b. Facility's emission unit number / code - edit as needed c. DEP emissions unit # - SSEIS point # d. Combined Units - enter number of individual units combine units? Emission unit installation and decommission dates: 1/1/1083

a unit?

1/1/1000
a. Installation date - e

estimate if unknown (mm/dd/yyyy)

b. Decommission date (mm/dd/yyyy) - if applicable

Complete only if the unit was shut down permanently or replaced since the last report.

? 4.	Emission unit replacement: a. Is this unit replacing another emission unit?				
	☑ no	yes – enter DEP's emissions unit number for the unit being replaced below:			
	b. DEP's Em	ission Unit Number and facility unit name			

? 5.	Unit descriptions:						
	a. Description:	✓ above ground	☐ belo	ow ground			
	b. Roof type:	☐ floating roof ☑ fixed	inte	rnal roof er:			
	12.13	5.33		2000	Specify other		
	c Height / Length -	- feet d Diameter – f	eet	e Canacity -	gallons		

6	Construction:	✓ steel weld	Other weld	☐ rivet	fiberglass	aunite

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
32
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):					
	NONE					
	a. Name of material					
		40722098				
	b. CAS number if single chemical	c. SC Code for standing / breathing loss				
	ORGANIC CHEM.SPECIFY IN COMMNETS					
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
(?	52	0				
	f. Temperature – typical storage temp. in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)				
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only				
	j. Oxygenate name – gasoline only					
8.	New material stored (enter new material if conter	nts changed during year of record):				
	a. Name of material					
	b. CAS number if single chemical	c. SC Code for standing / breathing loss				
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons				
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only				
	j. Oxygenate name – gasoline only					
В.	Notes and Attachments					
1.	Notes : please include in the space below any additional information that will help DEP understand your submission.					
	2. Attachments: Check here to submit attach	ments to this form. For attachments that cannot be				

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

Year of record
31
DEP EU# (old Point #)
1190564
Facility AQ identifier

important:
When filling
out forms on
the computer,
use only the
tab key to
move your
cursor – do
not use the
return key.
-

	mplete one AP-4 for EACH organic material storage to Equipment Description	ank.
1.	Facility identifiers: CLEAN HARBORS OF BRAINTREE	
	a. Facility name 34839	1190564
	b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
2.	Emission unit identifiers: AG TANK F5- 2,000 GAL -NOT UESD 2006- S0	OLVENT
	a. Facility's choice of emission unit name – edit as needed	04
	b. Facility's emission unit number / code – edit as needed	31 c. DEP emissions unit # – SSEIS point #
		·
	d. Combined Units – enter number of individual units	



3. Emission unit installation and decommission dates:

?
How to delete
a unit ?

a. Installation date – estimate if unknown (mm/dd/yyyy)

b. Decommission date (mm/dd/yyyy) - if applicable

Complete only if the unit was shut down permanently or replaced since the last report.

eiete	
9 4	Fm

Emission unit replacement:

a. Is this unit replacing another emission unit?

b. DEP's Emission Unit Number and facility unit name

? 5.	Unit descriptions:
	5 ·

a. Description: 🗹 above ground 🗌 below ground

Specify other 12.16 5.33 2000

c. Height / Length – feet d. Diameter – feet e. Capacity – gallons

6. Construction: ✓ steel weld ☐ other weld ☐ rivet ☐ fiberglass ☐ gunite

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
31
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):					
	NONE					
	a. Name of material					
		40722098				
	b. CAS number if single chemical	c. SC Code for standing / breathing loss				
	ORGANIC CHEM.SPECIFY IN COMMNETS	3 · · ·				
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
9	52	0				
·	f. Temperature – typical storage temp. in *Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)				
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only				
	j. Oxygenate name – gasoline only	-				
8.	New material stored (enter new material if conter	nts changed during year of record):				
	a. Hamo of maiona.					
	b. CAS number if single chemical	c. SC Code for standing / breathing loss				
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
	f. Temperature – typical storage temp. in ^o Fahrenheit	g. Annual throughput in gallons				
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only				
	j. Oxygenate name – gasoline only					
В.	Notes and Attachments					
1.	Notes : please include in the space below any additional information that will help DEP understand your submission.					
	2. Attachments: Check here to submit attach	ments to this form. For attachments that cannot be				

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
30
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Coi	mplete one AP-4 for EACH organic material storage tar	nk.
Important: When filling out forms on	A.	Equipment Description	
the computer, use only the tab key to move your	1.	Facility identifiers: ? CLEAN HARBORS OF BRAINTREE	
cursor – do		a. Facility name 34839	1190564
not use the return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
	2.	Emission unit identifiers:	
return		AG TANK F4- 2,000 GAL -NOT USED 2006	
		a. Facility's choice of emission unit name – edit as needed	20
		b. Facility's emission unit number / code – edit as needed	30 c. DEP emissions unit # – SSEIS point #
How to combine units ?		d. Combined Units – enter number of individual units	
	3.	Emission unit installation and decommission dates:	
		1/1/1983	
How to delete		a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicableComplete only if the unit was shut down permanently
a unit ?			or replaced since the last report.
?	4.	Emission unit replacement:	
		a. Is this unit replacing another emission unit?	
		✓ no yes – enter DEP's emissions unit nu	mber for the unit being replaced below:
		b. DEP's Emission Unit Number and facility unit name	
?	5.	Unit descriptions:	
		a. Description: 🗹 above ground 🗌 below ground	nd
		b. Roof type:	
		12.16 5.33 2000	Specify other
			city – gallons

✓ steel weld □ other weld □ rivet □ fiberglass □ gunite

6. Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
30
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):				
	NONE				
	a. Name of material				
	75092	40706020			
	b. CAS number if single chemical	c. SC Code for standing / breathing loss			
	METHYLENE CHLORIDE-WORKING LOSS	c. So code for standing / breathing loss			
		e. Vapor pressure in PSI at 25° C			
4	d. SC Code description – filled by eDEP				
(f)	f. Temperature – typical storage temp. in Fahrenheit	0.0000			
	T. Temperature – typical storage temp. In Fanrenneit	g. Annual throughput in gallons (enter 0 if not used)			
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only			
	j. Oxygenate name – gasoline only				
8.	New material stored (enter new material if contents a. Name of material	its changed during year of record):			
	a. Name of material				
	b. CAS number if single chemical	c. SC Code for standing / breathing loss			
	b. CAS number if single chemical	c. So code for standing / breathing loss			
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C			
	u. So code description – lined by eDEF	e. Vapor pressure in F31 at 25° C			
	f. Temperature – typical storage temp. in ^o Fahrenheit	g. Annual throughput in gallons			
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only			
	j. Oxygenate name – gasoline only				
В.	Notes and Attachments				
1.	Notes : please include in the space below any add your submission.	ditional information that will help DEP understand			
:	2. Attachments: Check here to submit attachr	ments to this form. For attachments that cannot be			

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention – Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
29
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Cor	mplete one AP-4 for EACH organic material storage tan	k.
Important: When filling out forms on	A.	Equipment Description	
the computer, use only the tab key to move your cursor – do not use the return key.	1.	Facility identifiers: CLEAN HARBORS OF BRAINTREE a. Facility name 34839 b. DEP Account number	1190564 c. Facility AQ identifier – SSEIS ID number
return	2.	Emission unit identifiers: AG TANK F3-/SS 2,000 GAL -NOT USED 2006- a. Facility's choice of emission unit name – edit as needed	
How to		b. Facility's emission unit number / code – edit as needed d. Combined Units – enter number of individual units	29 c. DEP emissions unit # – SSEIS point #
units ?	3.	Emission unit installation and decommission dates: 1/1/1983	
How to delete a unit ?		a. Installation date – estimate if unknown (mm/dd/yyyy)	 b. Decommission date (mm/dd/yyyy) – if applicable Complete only if the unit was shut down permanently or replaced since the last report.
?	4.	Emission unit replacement:	
		a. Is this unit replacing another emission unit?	
		✓ no	mber for the unit being replaced below:
		b. DEP's Emission Unit Number and facility unit name	
?	5.	Unit descriptions:	
		a. Description: 🗹 above ground 🗌 below groun	d
		b. Roof type:	Specify other
		12.13 5.33 2000	epoonly outor
		c. Height / Length – feet d. Diameter – feet e. Capaci	ty – gallons

 $lue{}$ steel weld $\ \square$ other weld $\ \square$ rivet $\ \square$ fiberglass $\ \square$ gunite

6. Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
29
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

Material stored (at s	start of year):						
NONE							
a. Name of material		_					
		40706022					
b. CAS number if single of	chemical	c. SC Code for standing / breathing loss					
	LENE-WORKING LOSS						
d. SC Code description – 52	- filled by eDEP	e. Vapor pressure in PSI at 25° C					
	storage temp. in °Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)					
h. RVP – gasoline only	h. RVP – gasoline only i. Total oxygen percent – gasoline only						
j. Oxygenate name – gas	soline only	_					
New material stored	I (enter new material if conte	ents changed during year of record):					
a. Name of material							
b. CAS number if single of	chemical	c. SC Code for standing / breathing loss					
d. SC Code description -	- filled by eDEP	e. Vapor pressure in PSI at 25° C					
f. Temperature – typical s	storage temp. in *Fanrenneit	g. Annual throughput in gallons					
f. Temperature – typical s h. RVP – gasoline only	storage temp. In ⊶anrenneit	i. Total oxygen percent – gasoline only					
h. RVP – gasoline only j. Oxygenate name – gas Notes and At	soline only tachments	i. Total oxygen percent – gasoline only					
h. RVP – gasoline only j. Oxygenate name – gas Notes and Att Notes: please include	soline only tachments	i. Total oxygen percent – gasoline only					
h. RVP – gasoline only j. Oxygenate name – gas Notes and Att Notes: please include	soline only tachments	i. Total oxygen percent – gasoline only					
h. RVP – gasoline only j. Oxygenate name – gas Notes and Att Notes: please include	soline only tachments	i. Total oxygen percent – gasoline only					
h. RVP – gasoline only j. Oxygenate name – gas Notes and Att Notes: please include	soline only tachments	i. Total oxygen percent – gasoline only					
h. RVP – gasoline only j. Oxygenate name – gas Notes and Att Notes: please include	soline only tachments	i. Total oxygen percent – gasoline only					
h. RVP – gasoline only j. Oxygenate name – gas Notes and Att Notes: please include	soline only tachments	i. Total oxygen percent – gasoline only					
j. Oxygenate name – gas Notes and Att Notes: please include	soline only tachments						
h. RVP – gasoline only j. Oxygenate name – gas Notes and Att Notes: please include	soline only tachments	i. Total oxygen percent – gasoline only					
h. RVP – gasoline only j. Oxygenate name – gas Notes and Att Notes: please include	soline only tachments	i. Total oxygen percent – gasoline only					
h. RVP – gasoline only j. Oxygenate name – gas Notes and Att Notes: please include	soline only tachments	i. Total oxygen percent – gasoline only					
h. RVP – gasoline only j. Oxygenate name – gas Notes and Att Notes: please include	soline only tachments	i. Total oxygen percent – gasoline only					
h. RVP – gasoline only j. Oxygenate name – gas Notes and Att Notes: please include	soline only tachments	i. Total oxygen percent – gasoline only					

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Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
28
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Coi	mplete one AP-4 for EACH organic material storage ta	nk.
Important: When filling out forms on	A.	Equipment Description	
the computer,	1.	Facility identifiers:	
use only the tab key to		CLEAN HARBORS OF BRAINTREE	
move your cursor – do		a. Facility name	
not use the		34839	1190564
return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
	2.	Emission unit identifiers:	
return		AG TANK F2- 2,000 GAL -NOT USED 2006	
		a. Facility's choice of emission unit name – edit as needed	
		28	28
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #
?		d. Combined Units – enter number of individual units	
combine			
units?	_	Envisaine weit installation and decomposition dates	
	3.	Emission unit installation and decommission dates	
		1/1/1984	- December 1 de la constitución
How to gelete		a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
a unit ?			Complete only if the unit was shut down permanently or replaced since the last report.
?	4.	Emission unit replacement:	
		a. Is this unit replacing another emission unit?	
		✓ no	umber for the unit being replaced below:
		b. DEP's Emission Unit Number and facility unit name	
?	5.	Unit descriptions:	
		a. Description: 🗹 above ground 🗌 below ground	ind
		b. Roof type:	of

6. Construction: \checkmark steel weld \square other weld \square rivet \square fiberglass \square gunite

2000

e. Capacity - gallons

5.33

d. Diameter - feet

12.16

c. Height / Length – feet

Specify other

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
28
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):					
	NONE					
	a. Name of material					
	79016	40722010				
	b. CAS number if single chemical	c. SC Code for standing / breathing loss				
	1,1,1-TRICHLOROETHYLENE-WITH LOSS					
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
(?)	52	0				
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)				
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only				
	j. Oxygenate name – gasoline only					
8.	New material stored (enter new material if conten	ts changed during year of record): ?				
	a. Name of material					
	b. CAS number if single chemical	c. SC Code for standing / breathing loss				
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons				
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only				
	j. Oxygenate name – gasoline only					
В.	Notes and Attachments					
1.	Notes : please include in the space below any additional information that will help DEP understand					
	your submission.					
	2 Attachments: Check here to submit attachn	conte to this form. For attachments that cannot ha				

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
27
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Coi	mplete one AP-4 for EACH organic material storage tar	ık.
Important: When filling out forms on	A.	Equipment Description	
the computer, use only the	1.	Facility identifiers:	
tab key to		CLEAN HARBORS OF BRAINTREE	
move your cursor – do		a. Facility name	
not use the return key.		b. DEP Account number	1190564 c. Facility AQ identifier – SSEIS ID number
tab lab		b. DEF Account number	C. Facility Act Identifier – 33E13 ID Humber
	2.	Emission unit identifiers:	
return		AG TANK F1- 2,000 GAL -NOT USED 2006-	
		a. Facility's choice of emission unit name – edit as needed	
		b Facility's emission unit number / code edit or peeded	27 c. DEP emissions unit # – SSEIS point #
		b. Facility's emission unit number / code – edit as needed	C. DEF emissions unit # - 33E13 point #
How to combine		d. Combined Units – enter number of individual units	
units ?	2	Encipain with installation and decomposition datase	
	3.	Emission unit installation and decommission dates:	
2		1/1/1983 a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
How to delete a unit ?			Complete only if the unit was shut down permanently or replaced since the last report.
?	4.	Emission unit replacement:	
		a. Is this unit replacing another emission unit?	
		✓ no yes – enter DEP's emissions unit nu	mber for the unit being replaced below:
		b. DEP's Emission Unit Number and facility unit name	
?	5.	Unit descriptions:	
		a. Description: 🗹 above ground 🗌 below ground	nd
		b. Roof type:	Specify other
		12.16 5.33 2000	
		c. Height / Length – feet d. Diameter – feet e. Capac	ity – gallons

✓ steel weld □ other weld □ rivet □ fiberglass □ gunite

6. Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
27
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):						
	NONE						
	a. Name of material	7					
		40706024					
	b. CAS number if single chemical TRICHLOROETHYLENE-WORKING LOSS	c. SC Code for standing / breathing loss					
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C					
7	52	0					
	f. Temperature – typical storage temp. in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)					
?	n. RVP – gasoline only i. Total oxygen percent – gasoline only						
	j. Oxygenate name – gasoline only	_					
3.	New material stored (enter new material if conte	ents changed during year of record):					
	a. Name of material						
	b. CAS number if single chemical	c. SC Code for standing / breathing loss					
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C					
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons					
	f. Temperature – typical storage temp. in °Fahrenheit h. RVP – gasoline only	g. Annual throughput in gallons i. Total oxygen percent – gasoline only					
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments						
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any actions and the space below any actions are specified in the space below.	i. Total oxygen percent – gasoline only					
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any actions and the space below any actions are specified in the space below.	i. Total oxygen percent – gasoline only					
B.	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any actions and the space below any actions are specified in the space below.	i. Total oxygen percent – gasoline only					
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any actions and the space below any actions are specified in the space below.	i. Total oxygen percent – gasoline only					
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any actions and the space below any actions are specified in the space below.	i. Total oxygen percent – gasoline only					
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any actions and the space below any actions are specified in the space below.	i. Total oxygen percent – gasoline only					
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any actions and the space below any actions are specified in the space below.	i. Total oxygen percent – gasoline only					
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any actions and the space below any actions are specified in the space below.	i. Total oxygen percent – gasoline only					
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any actions and the space below any actions are specified in the space below.	i. Total oxygen percent – gasoline only					
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any actions and the space below any actions are specified in the space below.	i. Total oxygen percent – gasoline only					
	h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any actions and the space below any actions are specified in the space below.	i. Total oxygen percent – gasoline only					

paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
26
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Cor	mplete one AP-4 for EACH organic material storage tar	nk.
Important: When filling out forms on	Α.	Equipment Description	
the computer,	1.	Facility identifiers:	
use only the tab key to		CLEAN HARBORS OF BRAINTREE	
move your		a. Facility name	
cursor – do not use the		34839	1190564
return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
	2.	Emission unit identifiers:	
return		AG TANK A25- 1,000 GAL -NOT USED 2006- PC	CB
		a. Facility's choice of emission unit name – edit as needed	
		26	26
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #
?		d. Combined Units – enter number of individual units	
How to combine units ?			
	3.	Emission unit installation and decommission dates:	
		1/1/1987	
?		a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
How to delete a unit?			Complete only if the unit was shut down permanently or replaced since the last report.
?	4.	Emission unit replacement:	
		a. Is this unit replacing another emission unit?	
		✓ no	mber for the unit being replaced below:
		b. DEP's Emission Unit Number and facility unit name	
?	5.	Unit descriptions:	
		a. Description: 🗹 above ground 🗌 below groun	nd
		b. Roof type:	f

6. Construction: ✓ steel weld ☐ other weld ☐ rivet ☐ fiberglass ☐ gunite

other:

1000

e. Capacity - gallons

Specify other

✓ fixed

c. Height / Length – feet

4.

d. Diameter - feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
26
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):					
	NONE					
	a. Name of material					
		40708498				
	b. CAS number if single chemical	c. SC Code for standing / breathing loss				
	SPECIFY PHENOL:WORKING LOSS d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
?	52	0				
<u> </u>	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)				
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only				
	j. Oxygenate name – gasoline only	=				
8.	New material stored (enter new material if conte	nts changed during year of record):				
	a. Name of material					
	b. CAS number if single chemical	c. SC Code for standing / breathing loss				
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons				
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only				
	j. Oxygenate name – gasoline only	_				
В.	Notes and Attachments					
1.	Notes: please include in the space below any additional information that will help DEP understand					
	your submission.					
	2 Attachments: Check hard to submit attach	oments to this form. For attachments that cannot be				

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
25
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Coi	mplete one AP-4 for EACH organic material storage tar	nk.
Important: When filling out forms on	A.	Equipment Description	
the computer,	1.	Facility identifiers:	
use only the tab key to		CLEAN HARBORS OF BRAINTREE	
move your cursor – do		a. Facility name	
not use the		34839	1190564
return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
—	2.	Emission unit identifiers:	
return		AG TANK A24- 2,400 GAL - PCB	
		a. Facility's choice of emission unit name – edit as needed	
		25	25
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #
How to combine units ?		d. Combined Units – enter number of individual units	
	3.	Emission unit installation and decommission dates:	
		1/1/1983	
?		a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
How to delete a unit ?			Complete only if the unit was shut down permanently or replaced since the last report.
?	4.	Emission unit replacement:	
_		a. Is this unit replacing another emission unit?	
		✓ no yes – enter DEP's emissions unit nu	mber for the unit being replaced below:
		b. DEP's Emission Unit Number and facility unit name	
?	5.	Unit descriptions:	
		a. Description: 🗹 above ground 🗌 below groun	nd
		b. Roof type: ☐ floating roof ☐ internal roof ☐ type: ☐ fixed ☐ other:	
		10.5 7 2400	Specify other
		·	eity – gallons

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
25
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):					
	OIL WITH POLYCHLORINATED BIPHENYLS					
	a. Name of material					
		40708498				
	b. CAS number if single chemical	c. SC Code for standing / breathing loss				
	SPECIFY PHENOL:WORKING LOSS					
?	d. SC Code description – filled by eDEP 52	e. Vapor pressure in PSI at 25° C 6294.0000				
	f. Temperature – typical storage temp. in *Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)				
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only				
	j. Oxygenate name – gasoline only	_				
8.	New material stored (enter new material if conte	ents changed during year of record):				
	a. Name of material					
	b. CAS number if single chemical	c. SC Code for standing / breathing loss				
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons				
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only				
	j. Oxygenate name – gasoline only	_				
В.	Notes and Attachments					
1.	1. Notes : please include in the space below any additional information that will help DEP underst your submission.					
	2 Attachments: Check here to submit attach	hments to this form. For attachments that cannot he				

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention – Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
24
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Co	mplete one AP-4 for EACH organic material storag	ge tank	C.		
Important: When filling out forms on	Α.	Equipment Description				
the computer,	1.	Facility identifiers: 7				
use only the tab key to		CLEAN HARBORS OF BRAINTREE				
move your cursor – do		a. Facility name				
not use the		34839		1190564		
return key.		b. DEP Account number		c. Facility AQ identifier – SSEIS ID number		
	2.	Emission unit identifiers:				
return		AG TANK A23- 2,400 GAL - PCB				
		a. Facility's choice of emission unit name – edit as needed				
		24		24		
		b. Facility's emission unit number / code – edit as needed		c. DEP emissions unit # - SSEIS point #		
How to combine units ?		d. Combined Units – enter number of individual units	<u>-</u>			
uiiito :	3.	Emission unit installation and decommission da	ates:			
_		1/1/1983				
?		a. Installation date – estimate if unknown (mm/dd/yyyy)		b. Decommission date (mm/dd/yyyy) – if applicable		
How to delete a unit ?				Complete only if the unit was shut down permanently or replaced since the last report.		
<u>2</u>	4.	Emission unit replacement:				
<u></u>		a. Is this unit replacing another emission unit?				
		✓ no yes – enter DEP's emissions ur	nit nun	nber for the unit being replaced below:		
		b. DEP's Emission Unit Number and facility unit name				
?	5.	Unit descriptions:				
		a. Description: 🗹 above ground 🗌 below	ground	d		
		b. Roof type:	l roof			
		E into		Specify other		
			100			
		c. Height / Length – feet d. Diameter – feet e.	Capacit	y – gallons		

 $lue{}$ steel weld $\ \square$ other weld $\ \square$ rivet $\ \square$ fiberglass $\ \square$ gunite

6. Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
24
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

	Material stored (at start of year):						
	OIL WITH POLYCHLORINATED BIPHENYLS						
a. I	Name of material	40708498					
b. (CAS number if single chemical	c. SC Code for standing / breathing loss					
	PECIFY PHENOL:WORKING LOSS						
d. 5 52	SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C 6963.0000					
	- Femperature – typical storage temp. in Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)					
h. I	RVP – gasoline only	i. Total oxygen percent – gasoline only					
j. C	Dxygenate name – gasoline only	-					
	ew material stored (enter new material if conte	nts changed during year of record): ?					
b. (CAS number if single chemical	c. SC Code for standing / breathing loss					
d. \$	SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C					
f T	emperature – typical storage temp. in ^o Fahrenheit	g. Annual throughput in gallons					
1. 1		g. / timuda timodgriput in ganono					
	RVP – gasoline only	i. Total oxygen percent – gasoline only					
h. l	RVP – gasoline only Dxygenate name – gasoline only						
j. C N N	Oxygenate name – gasoline only otes and Attachments	i. Total oxygen percent – gasoline only					
j. C N N	Oxygenate name – gasoline only otes and Attachments otes: please include in the space below any ac						
j. C N	Oxygenate name – gasoline only otes and Attachments otes: please include in the space below any ac	i. Total oxygen percent – gasoline only					
j. C N N	Oxygenate name – gasoline only otes and Attachments otes: please include in the space below any ac	i. Total oxygen percent – gasoline only					
j. C J. N	Oxygenate name – gasoline only otes and Attachments otes: please include in the space below any ac	i. Total oxygen percent – gasoline only					
j. C J. N	Oxygenate name – gasoline only otes and Attachments otes: please include in the space below any ac	i. Total oxygen percent – gasoline only					
j. C J. N	Oxygenate name – gasoline only otes and Attachments otes: please include in the space below any ac	i. Total oxygen percent – gasoline only					
j. C J. N	Oxygenate name – gasoline only otes and Attachments otes: please include in the space below any ac	i. Total oxygen percent – gasoline only					
j. C J. N	Oxygenate name – gasoline only otes and Attachments otes: please include in the space below any ac	i. Total oxygen percent – gasoline only					
j. C J. N	Oxygenate name – gasoline only otes and Attachments otes: please include in the space below any ac	i. Total oxygen percent – gasoline only					

paper copy of this form.

help

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
23
DEP EU# (old Point #)
1190564
Facility AQ identifier

Important:
When filling
out forms on
the computer,
use only the
tab key to
move your
cursor – do
not use the
return key.
tah
return /

combine units?

a unit?

		·					
Col	mplete one AP-4 for EACH organic material storage tal	nk.					
A.	Equipment Description						
1	Facility identifiers						
1.	Facility identifiers:						
	a. Facility name						
	34839	1190564					
	b. DEP Account number	c. Facility AQ identifier – SSEIS ID number					
2.	Emission unit identifiers:						
	AG TANK A22- 2,400 GAL -PCB						
	a. Facility's choice of emission unit name – edit as needed						
	23	23					
	b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #					
	d. Combined Units – enter number of individual units						
3.	Emission unit installation and decommission dates:						
	1/1/1983						
	a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable					
		Complete only if the unit was shut down permanently or replaced since the last report.					
) 4.	Emission unit replacement:						
a. Is this unit replacing another emission unit?							
	Una DED's amissions unit no						
	✓ no	mber for the unit being replaced below:					
	b DED's Fasicaina Hait Number and fasility with a sec						
	b. DEP's Emission Unit Number and facility unit name						
5.	Unit descriptions:						
,							
	a. Description: above ground below ground below ground	nd					
	b. Roof type:	f					
	internal room in the man room internal room	· 					
	10.5	Specify other					
		bity – gallons					
	o. Holgan, Longan root a. Diamotor root 6. Oapat	nty ganorio					

✓ steel weld □ other weld □ rivet □ fiberglass □ gunite

6. Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
23
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

OIL WITH POLYCHLORINATED BIPHENYLS a. Name of material	40708498
	10100100
	10100100
b. CAS number if single chemical SPECIFY PHENOL:WORKING LOSS	c. SC Code for standing / breathing loss
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C ?
f. Temperature – typical storage temp. in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)
h. RVP – gasoline only	i. Total oxygen percent – gasoline only
j. Oxygenate name – gasoline only	
New material stored (enter new material if contents	changed during year of record):
a. Name of material	
b. CAS number if single chemical	c. SC Code for standing / breathing loss
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C
f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons
h. RVP – gasoline only	i. Total oxygen percent – gasoline only
j. Oxygenate name – gasoline only	
3. Notes and Attachments	
Notes: please include in the space below any additi	onal information that will help DEP understand
your submission.	

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
18
DEP EU# (old Point #)
1190564
Facility AQ identifier

Important: When filling	Α.
out forms on	
the computer,	4
use only the	١.
tab key to	
move your	
cursor – do	
not use the	
return key.	
tab	
return	2.

combine units?

a unit?

Со	mplete one AP-4 for EACH organic material storage tal	nk.					
A.	Equipment Description						
1.	Facility identifiers: ? CLEAN HARBORS OF BRAINTREE						
	a. Facility name	4400504					
	b. DEP Account number	1190564					
	b. DEP Account number	c. Facility AQ identifier – SSEIS ID number					
2.	Emission unit identifiers:						
	AG TANK A17B- 500 GAL -EMPTY 2005	-					
	a. Facility's choice of emission unit name – edit as needed						
	18	18					
	b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #					
	d. Combined Units – enter number of individual units						
	d. Combined Offits – effet flumber of individual drifts						
	1/1/1983 a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable Complete only if the unit was shut down permanently or replaced since the last report.					
4.	Emission unit replacement:						
,	a. Is this unit replacing another emission unit?						
	✓ no	mber for the unit being replaced below:					
	b. DEP's Emission Unit Number and facility unit name						
5.	Unit descriptions:						
	a. Description: 🗾 above ground 🔲 below ground	nd					
	b. Roof type:						
	6.5 4.90 700	Specify other					
	6.5 4.83 700						

e. Capacity - gallons

d. Diameter - feet

c. Height / Length - feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
18
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year): NONE							
	a. Name of material							
	h 000 marker "c'arle de reisel	40799998						
	b. CAS number if single chemical MISC.CHEMICAL STORAGE	c. SC Code for standing / breathing loss						
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C						
?	52	0						
<u> </u>	f. Temperature – typical storage temp. in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)						
?	h. RVP – gasoline only i. Total oxygen percent – gasoline only							
	j. Oxygenate name – gasoline only	_						
8.	New material stored (enter new material if conte	ents changed during year of record): ?						
	a. Name of material							
	b. CAS number if single chemical	c. SC Code for standing / breathing loss						
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C g. Annual throughput in gallons						
	f. Temperature – typical storage temp. in ^o Fahrenheit							
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only						
	. Oxygenate name – gasoline only							
В.	Notes and Attachments							
1.	Notes : please include in the space below any a your submission.	dditional information that will help DEP understand						
	2. Attachments: Check here to submit attack	hments to this form. For attachments that cannot be						

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
16
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Complete one AP-4 for EACH organic material storage tank.						
Important: When filling	Α.	A. Equipment Description					
out forms on the computer, use only the tab key to	1.	Facility identifiers: ? CLEAN HARBORS OF BRAINTREE					
move your cursor – do		a. Facility name 34839	1190564				
not use the return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number				
tab							
X	2.	Emission unit identifiers:					
return		AG TANK A11- 5,000 GAL WASTE STREAM A-2	21				
		a. Facility's choice of emission unit name – edit as needed 16	16				
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # – SSEIS point #				
			·				
How to combine units ?		d. Combined Units – enter number of individual units					
	3.	Emission unit installation and decommission dates:					
		1/1/1984					
How to delete a unit?		a. Installation date – estimate if unknown (mm/dd/yyyy)	 b. Decommission date (mm/dd/yyyy) – if applicable Complete only if the unit was shut down permanently or replaced since the last report. 				
<u></u>	4.	Emission unit replacement:					
		a. Is this unit replacing another emission unit?					
		✓ no	umber for the unit being replaced below:				
		b. DEP's Emission Unit Number and facility unit name					
?	5.	Unit descriptions:					
	-	a. Description: 🗹 above ground 🗌 below grou	nd				
		b. Roof type:	ıf				

6. Construction: ✓ steel weld ☐ other weld ☐ rivet ☐ fiberglass ☐ gunite

5200

e. Capacity - gallons

8.16

c. Height / Length – feet d. Diameter – feet

Specify other

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
16
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):						
	EMPTY						
	a. Name of material						
		40799998					
	b. CAS number if single chemical	c. SC Code for standing / breathing loss					
	MISC.CHEMICAL STORAGE						
?	d. SC Code description – filled by eDEP 52	e. Vapor pressure in PSI at 25° C 0.0000					
	f. Temperature – typical storage temp. in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)					
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only					
	j. Oxygenate name – gasoline only	-					
8.	New material stored (enter new material if conter	nts changed during year of record): 🥐					
	a. Name of material						
	b. CAS number if single chemical	c. SC Code for standing / breathing loss					
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C					
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons					
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only					
	j. Oxygenate name – gasoline only	-					
В.	Notes and Attachments						
1.		dditional information that will help DEP understand					
	your submission.						
	2 Attachments: Check here to submit attach	monto to this form. For attachments that against he					

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention - Air Quality

Emission Unit - Organic Material Storage

2006 Year of record 15 DEP EU# (old Point #) 1190564 Facility AQ identifier

Complete one AP-4 for EACH organic material storage	tanl	K
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	COI	ilpiete one Ai -4	ioi LACIT organic in	ateriai storage tail	IIV.	
Important: When filling out forms on	A.	A. Equipment Description				
the computer, 1. Facility identifiers:						
tab key to CLEAN HARBORS OF BRAINTREE						
move your cursor – do		a. Facility name				
not use the		34839			1190564	
return key.		b. DEP Account nu	mber		c. Facility AQ identifier – SSEIS ID number	
tab						
	2.	Emission unit id	dentifiers:			
return		AG TANK A10-	9,800 GAL WAS	TE STREAM A-2	1	
			of emission unit name –			
		15			15	
		b. Facility's emission	on unit number / code – e	edit as needed	c. DEP emissions unit # - SSEIS point #	
2		d. Combined Units – enter number of individual units				
How to		d. Combined Onlis	– enter number of individ	uuai uniis		
combine						
units?	3.	Emission unit in	nstallation and deco	mmission dates:		
	Э.		istaliation and deco	illillission dates.		
		1/1/1987	actimate if unknown (n	om/dd/\\nan/\	h Decommission data (mm/dd/www) if applicable	
How to delete		a. Ilistallation date	 estimate if unknown (n 	пписалуууу)	b. Decommission date (mm/dd/yyyy) – if applicable	
a unit?					Complete only if the unit was shut down permanently or replaced since the last report.	
<u>?</u>	4.	Emission unit re	eplacement:			
		a. Is this unit replacing another emission unit?				
		✓ no	yes – enter DEP's	emissions unit nu	mber for the unit being replaced below:	
		b. DEP's Emission	Unit Number and facility	y unit name		
<u></u>	5.	Unit description	is:			
•						
		a. Description:	✓ above ground	☐ below groun	nd	
			_	_		
		b. Roof type:	floating roof	internal roof		
			✓ fixed	other:	Specify other	
		14.66	11.5	9800	-F-2017 20110.	

	6.	Construction:	✓ steel weld	other weld	☐ rivet	☐ fiberglass	gunite
--	----	---------------	--------------	------------	---------	--------------	--------

e. Capacity - gallons

d. Diameter - feet

c. Height / Length - feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
15
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7. Material stored (at start of year):	
MIXED FLAMMABLE LIQUIDS	
a. Name of material	1070000
b CAS number if single shaming	4079998
b. CAS number if single chemical MISC.CHEMICAL STORAGE	c. SC Code for standing / breathing loss
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C
? 52	17346.0000
f. Temperature – typical storage temp. in Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)
h. RVP – gasoline only	i. Total oxygen percent – gasoline only
j. Oxygenate name – gasoline only	_
3. New material stored (enter new material if conte	ents changed during year of record):
a. Name of material	
b. CAS number if single chemical	c. SC Code for standing / breathing loss
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C
f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons
h. RVP – gasoline only	i. Total oxygen percent – gasoline only
j. Oxygenate name – gasoline only	_
B. Notes and Attachments	
	delition of information that will halp DED understand
 Notes: please include in the space below any a your submission. 	dditional information that will help DEP understand
, c.a	
2 Attachments: Check here to submit attack	hments to this form. For attachments that cannot he

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

help

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
14
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Coi	mplete one AP-4 for EACH organic material storage tar	ık.
Important: When filling out forms on	A.	Equipment Description	
the computer, use only the tab key to move your	1.	Facility identifiers: ? CLEAN HARBORS OF BRAINTREE	
cursor – do		a. Facility name 34839	1190564
not use the return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
tab			
	2.	Emission unit identifiers:	
return		AG TANK A9- 5,000 GAL WASTE STREAM B-40)
		a. Facility's choice of emission unit name – edit as needed	
		14	14
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #
How to combine units ?		d. Combined Units – enter number of individual units	
units :	3.	Emission unit installation and decommission dates:	
_	O.	1/1/1985	
?		a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
How to delete a unit ?			Complete only if the unit was shut down permanently or replaced since the last report.
?	4.	Emission unit replacement:	
•		a. Is this unit replacing another emission unit?	
		✓ no yes – enter DEP's emissions unit nu	mber for the unit being replaced below:
		b. DEP's Emission Unit Number and facility unit name	
	_		
?	5.	Unit descriptions:	
		a. Description: 🗹 above ground 🗌 below groun	nd
		b. Roof type: ☐ floating roof ☐ internal roof ☐ type: ☐ fixed ☐ other:	
		13 8.5 5000	Specify other
			eity – gallons

6. Construction: \checkmark steel weld \square other weld \square rivet \square fiberglass \square gunite

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
14
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):				
	HALOGENATED FUEL				
	a. Name of material				
		40799998			
	b. CAS number if single chemical	c. SC Code for standing / breathing loss			
	MISC.CHEMICAL STORAGE				
?	d. SC Code description – filled by eDEP 52	e. Vapor pressure in PSI at 25° C 206698.0000			
	f. Temperature – typical storage temp. in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)			
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only			
	j. Oxygenate name – gasoline only	_			
8.	New material stored (enter new material if conte	nts changed during year of record):			
	a. Name of material	a. Name of material			
	b. CAS number if single chemical	c. SC Code for standing / breathing loss			
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C			
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons			
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only			
	j. Oxygenate name – gasoline only	_			
B. 1.	Notes and Attachments Notes: please include in the space below any ac your submission.	dditional information that will help DEP understand			
	2 Attachments: Check here to submit attach	pmonto to this form. For attachments that games ha			
:		nments to this form. For attachments that cannot that in notes above and deliver them to DEP with a			

paper copy of this form.

Bureau of Waste Prevention – Air Quality

Emission Unit - Organic Material Storage

2006 Year of record 13 DEP EU# (old Point #) 1190564 Facility AQ identifier

Complete one AP-4	for EACH o	rganic material	storage tank
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Important:
When filling
out forms on
the compute
use only the
tab key to
move your
cursor – do
not use the
return key.

combine units?

a unit?

Co	mplete one AP-4 for EACH organic material storage tan	k.			
Α.	Equipment Description				
1.	Facility identifiers:				
	CLEAN HARBORS OF BRAINTREE				
	a. Facility name				
	34839	1190564			
	b. DEP Account number	c. Facility AQ identifier – SSEIS ID number			
2.	Emission unit identifiers:				
	AG TANK A8- 5,000 GAL WASTE STREAM A-22				
	a. Facility's choice of emission unit name – edit as needed				
	13	13			
	b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #			
	d. Combined Units – enter number of individual units				
3.	Emission unit installation and decommission dates:				
•	1/1/1987				
	a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable			
		Complete only if the unit was shut down permanently or replaced since the last report.			
4.	Emission unit replacement:				
	a. Is this unit replacing another emission unit?				
	✓ no				
	b. DEP's Emission Unit Number and facility unit name				



Unit descriptions: a. Description: 🗹 above ground below ground b. Roof type: floating roof internal roof fixed other: Specify other 13 8.5 5000 d. Diameter - feet e. Capacity - gallons c. Height / Length - feet

✓ steel weld ☐ other weld ☐ rivet ☐ fiberglass ☐ gunite

6. Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
13
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year): LEAN WATER FOR INCINERATION				
	a. Name of material				
		40799998			
	b. CAS number if single chemical	c. SC Code for standing / breathing loss			
	MISC.CHEMICAL STORAGE				
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C			
(?	52	227585.0000			
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)			
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only			
	j. Oxygenate name – gasoline only	_			
8.	New material stored (enter new material if conte	ents changed during year of record):			
	a. Name of material				
	b. CAS number if single chemical	c. SC Code for standing / breathing loss			
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C			
	f. Temperature – typical storage temp. in ^o Fahrenheit	g. Annual throughput in gallons			
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only			
	j. Oxygenate name – gasoline only	_			
В.	Notes and Attachments				
1.	Notes : please include in the space below any a your submission.	dditional information that will help DEP understand			
	2. Attachments: Check here to submit attacl	hments to this form. For attachments that cannot be			

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

Bureau of Waste Prevention - Air Quality

Emission Unit - Organic Material Storage

2006 Year of record 12 DEP EU# (old Point #) 1190564 Facility AQ identifier

Complete one AP-4 for EACH organic material storage to
--

Important: When filling out forms on	A.	Equipment Description	
the computer, use only the	1.	Facility identifiers:	
tab key to		CLEAN HARBORS OF BRAINTREE	
move your cursor – do		a. Facility name	1100564
not use the return key.		b. DEP Account number	1190564 c. Facility AQ identifier – SSEIS ID number
tab			·
	2.	Emission unit identifiers:	
return		AG TANK A7- 9,000 GAL WASTE STREAM A-40)
		a. Facility's choice of emission unit name – edit as needed	
		b. Facility's emission unit number / code – edit as needed	12 c. DEP emissions unit # – SSEIS point #
		b. Facility's emission unit number / code – edit as needed	C. DET GHIISSIONS WHILE # — SOCIO POINT #
?		d. Combined Units – enter number of individual units	
How to combine			
units?	_		
	3.	Emission unit installation and decommission dates:	
2		1/1/1987 a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
How to delete a unit?		a. Installation date – estimate il diffinown (minidu/yyyy)	Complete only if the unit was shut down permanently or replaced since the last report.
6	4.	Emission unit replacement:	
U			
		a. Is this unit replacing another emission unit?	
		✓ no yes – enter DEP's emissions unit nu	mber for the unit being replaced below:
		b. DEP's Emission Unit Number and facility unit name	
	\ -		
?	5.	Unit descriptions:	
		a. Description: 🗹 above ground 🗌 below ground	nd
		b. Roof type:	f
		fixed other:	2 7 1
		14.66 10.5 9000	Specify other
			city – gallons

✓ steel weld □ other weld □ rivet □ fiberglass □ gunite

6. Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

Year of record
12
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):						
	HALOGENATED FUEL						
	a. Name of material						
		40722098					
	b. CAS number if single chemical	c. SC Code for standing / breathing loss					
	ORGANIC CHEM.SPECIFY IN COMMNETS						
?	d. SC Code description – filled by eDEP 52	e. Vapor pressure in PSI at 25° C ?					
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)					
?	h. RVP – gasoline only	i. Total oxygen percent – gasoline only					
	j. Oxygenate name – gasoline only						
8.	New material stored (enter new material if conten	ts changed during year of record):					
	a. Name of material						
	b. CAS number if single chemical	c. SC Code for standing / breathing loss					
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C					
	f. Temperature – typical storage temp. in ^o Fahrenheit	g. Annual throughput in gallons					
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only					
	j. Oxygenate name – gasoline only						
В.	Notes and Attachments						
1.	Notes : please include in the space below any add your submission.	ditional information that will help DEP understand					
	your submission.						
	2 Attachments: Check here to submit attach	ments to this form. For attachments that cannot be					

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

for SC Code help

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
11
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Coi	mplete one AP-4	for EACH organic m	aterial storage tan	k.
Important: When filling out forms on	A.	Equipmen	t Description		
the computer,	1.	Facility identifie	ers: 🧑		
use only the tab key to		•	ORS OF BRAINTRE	ΕE	
move your cursor – do		a. Facility name			
not use the		34839			1190564
return key.		b. DEP Account nu	ımber		c. Facility AQ identifier – SSEIS ID number
tab					
T X	2.	Emission unit i	dentifiers:		
return			9,000 GAL WAST		
		a. Facility's choice11	of emission unit name -	edit as needed	4.4
			on unit number / code – e	edit as needed	c. DEP emissions unit # - SSEIS point #
		b. r domey o orrinoon	on and named 7 dodo	sait as mosasa	e. Ber emissione unit // Coero pont //
		d. Combined Units	– enter number of indivi	dual units	
How to combine units ?					
	3.	Emission unit in	nstallation and deco	mmission dates:	
		1/1/1985			
		a. Installation date	- estimate if unknown (n	nm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
How to delete a unit ?					Complete only if the unit was shut down permanently or replaced since the last report.
?	4.	Emission unit r	eplacement:		
		a. Is this unit re	eplacing another em	ission unit?	
		v no □	yes – enter DEP's	emissions unit nur	mber for the unit being replaced below:
		b. DEP's Emission	n Unit Number and facility	y unit name	
?	5.	Unit description	ns:		
		a. Description:	✓ above ground	below groun	d
		b. Roof type:	☐ floating roof ☑ fixed	internal roof other:	Specify other
		14.66	10.5	9000	Specify officer

6. Construction: ✓ steel weld ☐ other weld ☐ rivet ☐ fiberglass ☐ gunite

e. Capacity - gallons

c. Height / Length – feet d. Diameter – feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
11
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):						
	OIL & WATER						
	a. Name of material	_					
		40799998					
	b. CAS number if single chemical	c. SC Code for standing / breathing loss					
	MISC.CHEMICAL STORAGE						
?	d. SC Code description – filled by eDEP 52	e. Vapor pressure in PSI at 25° C 249855.0000					
	f. Temperature – typical storage temp. in [°] Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)					
2	h. RVP – gasoline only i. Total oxygen percent – gasoline only						
	j. Oxygenate name – gasoline only	_					
8.	New material stored (enter new material if conte	ents changed during year of record):					
	a. Name of material						
	b. CAS number if single chemical	c. SC Code for standing / breathing loss					
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C					
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons					
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only					
	j. Oxygenate name – gasoline only	_					
B. 1.	Notes and Attachments Notes: please include in the space below any acyour submission.	dditional information that will help DEP understand					
	2 Attachments: Check here to submit attach	amonto to this form. For attachments that against he					
:		nments to this form. For attachments that cannot that in notes above and deliver them to DEP with a					

paper copy of this form.

for SC Code help

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
10
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Coi	Complete one AP-4 for EACH organic material storage tank.				
Important: When filling out forms on	A.	Equipmen	t Description	ı		
the computer,	1.	Facility identifie	ers: 🕜			
use only the tab key to		CLEAN HARBO	ORS OF BRAINTRE	ΞE		
move your cursor – do		a. Facility name				
not use the		34839			1190564	
return key.		b. DEP Account nu	ımber		c. Facility AQ identifier – SSEIS ID number	
	2.	Emission unit i	dentifiers:			
return		AG TANK A5-	5,200 GAL WAST	TE STREAM A-22	2	
			of emission unit name –			
		10			10	
		b. Facility's emission	on unit number / code – e	edit as needed	c. DEP emissions unit # - SSEIS point #	
Plow to combine units ?		d. Combined Units	– enter number of indivi	dual units		
uiiits :	3.	Emission unit i	nstallation and deco	mmission dates:		
		1/1/1986				
2			 estimate if unknown (n 	mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable	
How to delete a unit?			·	,,,,,	Complete only if the unit was shut down permanently or replaced since the last report.	
?	4.	Emission unit r	eplacement:			
		a. Is this unit re	placing another em	ission unit?		
		v no □	yes – enter DEP's o	emissions unit nu	umber for the unit being replaced below:	
		b. DEP's Emission	n Unit Number and facility	y unit name		
?	5.	Unit description	ns:			
		a. Description:	✓ above ground	below grour	nd	
		b. Roof type:	☐ floating roof ☑ fixed	☐ internal roof ☐ other:		
		10.5	10.5	5200	Specify other	

6. Construction: ✓ steel weld ☐ other weld ☐ rivet ☐ fiberglass ☐ gunite

e. Capacity - gallons

d. Diameter - feet

c. Height / Length – feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2006
Year of record
10
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7. Material stored (at start of year):						
LEAN WATER FOR INCINERATION	I FAN WATER FOR INCINERATION					
a. Name of material						
an rame of material	40799998					
b. CAS number if single chemical	c. SC Code for standing / breathing loss					
MISC.CHEMICAL STORAGE	o. Co Couche diamang, broaming loop					
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C					
252	0.0000					
f. Temperature – typical storage temp. in Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)					
1. Temperature typical storage temp. III Tamerinet	g. Annual unougriput in gailons (enter o il not useu)					
h. RVP – gasoline only	i. Total oxygen percent – gasoline only					
j. Oxygenate name – gasoline only						
8. New material stored (enter new material if con	ntents changed during year of record):					
a. Name of material						
b. CAS number if single chemical	c. SC Code for standing / breathing loss					
b. CAS humber if single chemical	c. So code for standing / breathing loss					
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C					
u. 30 Code description – filled by eDEF	e. Vapor pressure in FSI at 25° C					
f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons					
h. RVP – gasoline only	i. Total oxygen percent – gasoline only					
j. Oxygenate name – gasoline only						
B. Notes and Attachments						
 Notes: please include in the space below any your submission. 	additional information that will help DEP understand					
,						
2. Attachments: Check here to submit atta	achments to this form. For attachments that cannot be					

sent electronically, please list all such attachments in notes above and deliver them to DEP with a

paper copy of this form.

for SC Code help

Massachusetts Department of Environmental Protection Bureau of Waste Prevention – Air Quality

BWP AQ AP-STACK

Physical Vertical Stacks

2006
Year of record
9
DEP Stack #
1190564
Facility AQ identifier

Manual Common of the computer, use only the tab key to move your cursor' of not use the return like. 1. Facility identifiers: CLEAN HARBORS OF BRAINTREE		Complete one AP-STACK form for EACH physical stack at the facility					
the computer tab key to move your cursor - do not use the return key. LEAN HARBORS OF BRAINTREE a Facility anne 34839 1190564 c. AQ identifier - SSEIS ID number 2 Stack identifiers: 2 Stack identifiers: 1 STACK-2 FURNACES LENNOX a Facility's stack number - edit as needed 9 D. Facility's stack number - edit as needed 15 D. Facility's stack number - edit as needed 16 D. Facility's stack number - edit as needed 17 D. Facility's stack number - edit as needed 18 D. Facility's stack number - edit as needed 19 D. Facility's stac	When filling	A.	•				
tab key to move your cursor - do not use the return key. 2. Stack identifiers: 3. Type: a. vertical vertical with rain cap/sleeve b. Combined stacks - enter number of individual stacks: 4. Dimensions: 5. Gas exit velocity: 5. Gas exit velocity: 6. Exit temperature: 7. Stack liner material: 8. Decommission date – if applicable: 8. Decommission units Associated with Stack – eDEP Only 8. Decommission units Associated with Stack – eDEP Only 8. Decommission units associated with this stack. This list is for information only – no data entry is required; make any changes on the forms for each emission unit (i.e., AP1, AP2, or AP3). Note: this list does not reflect changes you have made on-line, but not yet submitted. 8. Decommission unit to this stack, enter the stack of No. on the form for the emission unit (i.e., AP1, AP2, or AP3). Note: this list does not reflect changes you have made on-line, but not yet submitted. 8. Decommission unit to this stack, enter the stack of No. on the form for the emission unit (i.e., AP1, AP2, or AP3). Note: this list does not reflect changes you have made on-line, but not yet submitted. 8. Decommission unit to this stack. 9	the computer,	1.	Facility identifiers:		1101		
a. Facility name 34839 b. DEP Account number 2. Stack identifiers: 1 STACK-2 FURNACES LENNOX a. Facility's stack name - edit as needed 9 b. Facility's stack name - edit as needed 9 b. Facility's stack name - edit as needed 9 c. DEP stack # - old SSEIS stack # 3. Type: a. vertical vertical with rain cap/sleeve b. Combined stacks - enter number of individual stacks: 4. Dimensions: 28 5. Gas exit velocity: 15 5. Gas exit velocity: 15 6. Exit temperature: 15 6. Exit temperature: 16 7. Stack liner material: 17 8. Decommission date - if applicable: 18 8. Decommission Units Associated with Stack - eDEP Only 38 89 80 80 80 80 80 80 80 80 80 80 80 80 80			CLEAN HARBORS O	F BRAINTREE			
sey. Stack identifiers:							
2. Stack identifiers: 1 STACK-2 FURNACES LENNOX a. Facility's choice of stack name - edit as needed 9 b. Facility's stack number - edit as needed 9 c. DEP stack # - old SSEIS stack # 3. Type: a. vertical vertical with rain cap/sleeve b. Combined stacks - enter number of individual stacks: 4. Dimensions: 28 Height in feet 15 Gas exit velocity:			•		1190564		
1 STACK-2 FURNACES LENNOX a. Facility's choice of stack name – edit as needed 9 b. Facility's stack number – edit as needed 9 c. DEP stack # – old SSEIS stack # 3. Type: a. vertical vertical with rain cap/sleeve b. Combined stacks – enter number of individual stacks: 4. Dimensions: 28 4. Dimensions: 5. Gas exit velocity: 6. Exit temperature: 7. Stack liner material: metal brick refractory other: 8. Decommission date – if applicable: 8. Decommission date – if applicable: 8. Decommission Units Associated with Stack – eDEP Only Below is a list of the emission unit sassociated with his stack. This list is for information only – no data entry is required; make any changes on the forms for each emission unit (i.e., AP1, AP2, or AP3). Note: to this stack, enter the Stack Id No. on the form for the emission unit (i.e., AP1, AP2, Texp.) 1. Stack line material: EUMPACES SR 20Q5-140/154 0.246 MMBTU/HR 1. STACK-2 FURNACES SR 20Q5-140/154 0.246 MMBTU/HR 2. Decombined stacks – enter number of individual stacks: 9 0.60 Diameter in feet 15 15 High end - feet per second (0.1 – 500) 200 High end - feet per second (0.1 – 500) 200 High end - "Fahrenheit (50 – 1800) Figh end - feet per second (0.1 – 500) 200 High end - "Fahrenheit (50 – 1800) Figh end - feet per second (0.1 – 500) 200 High end - feet per second (0.1 – 500) 200 High end - "Fahrenheit (50 – 1800) Figh end - feet per second (0.1 – 500) 200 High end - feet per second (0.1 – 500) 200 High end - feet per second (0.1 – 500) 200 High end - "Fahrenheit (50 – 1800) Figh end - feet per second (0.1 – 500) 200 High end - feet per second (0.1 – 500) 200 High end - feet per second (0.1 – 500) 200 High end - feet per second (0.1 – 500) 200 High end - "Fahrenheit (50 – 1800) Figh end - feet per second (0.1 – 500) 200 High end - "Fahrenheit (50 – 1800) Figh end - feet per second (0.1 – 500) 200 High end - "Fahrenheit (50 – 1800) Figh end - feet per second (0.1 – 500) 200 High end - feet per second (0.1 – 500) 200 High end - feet per sec	_		b. DEP Account number		c. AQ identifie	er – SSEIS ID number	
a. Facility's choice of stack name - edit as needed 9 b. Facility's stack number - edit as needed 9 c. DEP stack # - old SSEIS stack # 3. Type: a. vertical vertical with rain cap/sleeve b. Combined stacks - enter number of individual stacks: 4. Dimensions: 4. Dimensions: 4. Dimensions: 5. Gas exit velocity: 6. Exit temperature: 7. Stack liner material: metal brick refractory other: 8. Decommission date - if applicable: 8. Decommission Units Associated with Stack - eDEP Only Below is a list of the emission unit sassociated with his stack. This list is for information only - no data entry is required; make any changes on the forms for each emission unit (i.e., AP1, AP2, or AP3). Note: this stack, enter the Stack Id No. on the form for the emission unit (i.e., AP1, AP2, or AP3).	tab	2.	Stack identifiers:				
b. Facility's stack number – edit as needed 3. Type: a. vertical vertical with rain cap/sleeve b. Combined stacks – enter number of individual stacks: 4. Dimensions: 4. Dimensions: 4. Dimensions: 5. Gas exit velocity: 6. Exit temperature: 7. Stack liner material: metal brick refractory they as a list of the emission unit to this stack, enter the Stack id No. on the form for the emission unit (i.e., AP1, the stack is a stack, enter the Stack id No. on the form for the emission unit (i.e., AP1, the stack is a stack, enter the Stack id No. on the form for the emission unit (i.e., AP1, the stack is a stack, enter the Stack id No. on the form for the emission unit (i.e., AP1, the stack is a stack, enter the Stack id No. on the form for the emission unit (i.e., AP1, the stack is the stack is a stack, enter the Stack id No. on the form for the emission unit (i.e., AP1, the stack is the emission unit (i.e., AP1, the stack is the stack is the stack is the stack is the emission unit (i.e., AP1, the stack is the st	1		1 STACK-2 FURNACI	ÉS LENNOX			
b. Facility's stack number – edit as needed c. DEP stack # − old SSEIS stack # 3. Type: a. ✓ vertical wertical wertical with rain cap/sleeve b. Combined stacks – enter number of individual stacks: 4. Dimensions: 28 Height in feet 15 Low end - feet per second (0.1 – 500) 200 Low end - °Fahrenheit (50 – 1800) 7. Stack liner material: ✓ metal ☐ brick refractory ☐ other: B. Emission Units Associated with Stack — eDEP Only Below is a list of the emission unit to this stack, enter the Stack id No. on the form for the emission unit (i.e., AP1, the stack was permanent) removed in the form for the emission unit (i.e., AP1, the stack was permanent) removed in the stack was permanent only − no data can be considered with this stack. This list is for information only − no data can be considered with this stack. This list is for information only − no data can be considered with this stack. This list is for information only − no data can be considered with this stack. This list is for information only − no data can be considered with this stack. This list is for information only − no data can be considered with this stack. This list is for information only − no data can be considered with this stack. This list is for information only − no data can be considered with this stack. This list is for information only − no data can be considered with this stack. This list is for information only − no data can be considered with this stack. This list is for information only − no data can be considered with this stack. This list is for information only − no data can be considered with this stack. This list is for information only − no data can be considered with this stack. This list is for information only − no data can be considered with this stack. This list is for information only − no data can be considered with this stack. This list is for information only − no data can be considered with this stack. This list is for information only − no data can be considered with this stack. This list is for information only − no dat	Total A		a. Facility's choice of stack r	name – edit as needed			
3. Type: a. vertical vertical with rain cap/sleeve b. Combined stacks – enter number of individual stacks: 4. Dimensions: 4. Dimensions: 5. Gas exit velocity: 6. Exit temperature: 7. Stack liner material: metal brick refractory other: 8. Decommission date – if applicable: 8. Decommission Units Associated with Stack – eDEP Only Below is a list of the emission unit to this stack, enter the stack Id No. on the form for the emission unit to this stack, enter the stack Id No. on the form for the emission unit to this stack, enter the stack Id No. on the form for the emission unit (i.e., AP1, AP1, AP1, applicable) 4. Dimensions: 28 Height in feet 15 Low end - feet per second (0.1 – 500) 200 Low end - Fahrenheit (50 – 1800) High end - feet per second (0.1 – 500) 200 High end - Fahrenheit (50 – 1800) High end - Feet per second (0.1 – 500) 200 High end - Feet per second (0.1 – 500)	Tetarii				9		
What to end id data is unknown or unavailable? 4. Dimensions: 5. Gas exit velocity: 6. Exit temperature: 7. Stack liner material: 8. Decommission date – if applicable: 8. Decommission Units Associated with Stack – eDEP Only Below is a list of the emission unit to this stack, enter the stack (d No. on the form for the emission unit to this stack, enter the stack (d No. on the form for the emission unit (i.e., AP1, AP2, or AP3). 4. Dimensions: 28 Height in feet 15 Low end - feet per second (0.1 – 500) 200 High end - Fahrenheit (50 – 1800) Pescribe Other 8. Decommission date – if applicable: (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed B. Emission Units Associated with Stack – eDEP Only Below is a list of the emission units associated with this stack. This list is for information only – no data entry is required; make any changes on the forms for each emission unit (i.e., AP1, AP2, or AP3). Note: this list does not reflect changes you have made on-line, but not yet submitted. EU#64-2 LENNOX FURNACES SR 20Q5-140/154 0.246 MMBTU/HR EU#64-2 LENNOX FURNACES SR 20Q5-140/154 0.246 MMBTU/HR			b. Facility's stack number –	edit as needed	c. DEP stack	# - old SSEIS stack #	
What to end id data is unknown or unavailable? 4. Dimensions: 5. Gas exit velocity: 6. Exit temperature: 7. Stack liner material: 8. Decommission date – if applicable: 8. Decommission Units Associated with Stack – eDEP Only Below is a list of the emission unit to this stack, enter the stack (d No. on the form for the emission unit to this stack, enter the stack (d No. on the form for the emission unit (i.e., AP1, AP2, or AP3). 4. Dimensions: 28 Height in feet 15 Low end - feet per second (0.1 – 500) 200 High end - Fahrenheit (50 – 1800) Pescribe Other 8. Decommission date – if applicable: (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed B. Emission Units Associated with Stack – eDEP Only Below is a list of the emission units associated with this stack. This list is for information only – no data entry is required; make any changes on the forms for each emission unit (i.e., AP1, AP2, or AP3). Note: this list does not reflect changes you have made on-line, but not yet submitted. EU#64-2 LENNOX FURNACES SR 20Q5-140/154 0.246 MMBTU/HR EU#64-2 LENNOX FURNACES SR 20Q5-140/154 0.246 MMBTU/HR		3.	Type: a. ✓ vertical □ v	rertical with rain cap/sleeve	b. Combined stacks	– enter number of individual stacks:	
4. Dimensions: Height in feet 15 Low end - feet per second (0.1 – 500) 200 High end - ⁰ Fahrenheit (50 – 1800) To stack liner material: Note: The wind of the emission unit to this stack, enter the Stack Id No. on the form for the emission unit to this stack, enter the Stack Id No. on the form for the emission unit to this stack, enter the Stack Id No. on the form for the emission unit (i.e., AP1, AP1, applicable) 4. Dimensions: Height in feet 15 Low end - feet per second (0.1 – 500) 200 High end - ⁰ Fahrenheit (50 – 1800) To wend - feet per second (0.1 – 500) 200 High end - ⁰ Fahrenheit (50 – 1800) High end - ⁰ Fahrenheit (50 – 1800) To wend - feet per second (0.1 – 500) Describe Other 8. Decommission date – if applicable: (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed Below is a list of the emission units associated with this stack. This list is for information only – no data entry is required; make any changes on the forms for each emission unit (i.e., AP1, AP2, or AP3). Note: this list does not reflect changes you have made on-line, but not yet submitted. EU#64-2 LENNOX FURNACES SR 20Q5-140/154 0.246 MMBTU/HR	_			28			
What to be if data is unknown or unavailable? 5. Gas exit velocity: 6. Exit temperature: 7. Stack liner material: 8. Decommission date – if applicable: 8. Decommission Units Associated with Stack – eDEP Only Below is a list of the emission units associated with his stack. This list is for information only – no data entry is required; make any changes on the forms for each emission unit to this stack, enter the Stack Id No. on the form for the emission unit (i.e., AP1, AP1, AP1, AP1, AP1, AP1, AP1, AP1	2	4.	Dimensions:				
Sunknown or unavailable ?	What to wif data			_			
6. Exit temperature: 200		5.	Gas exit velocity:		cond (0.1 – 500)	<u> </u>	
7. Stack liner material: metal brick refractory other: Describe Other	diavallable :	^	Fuit to man a mature.	200		200	
B. Emission Units Associated with Stack — eDEP Only Below is a list of the emission units associated with this stack. This list is for information only — no data entry is required; make any changes on the forms for each emission unit (i.e., AP1, AP2, or AP3). Note: this list does not reflect changes you have made on-line, but not yet submitted. Important: To assign an emission unit to this stack, enter the Stack Id No. on the form for the emission unit (i.e., AP1, AP2, or AP3).		6.	Exit temperature:	Low end - ⁰ Fahrenheit	(50 – 1800)	High end - ⁰ Fahrenheit (50 – 1800)	
8. Decommission date – if applicable: (mm/dd/yyyy) Complete only if the stack was permanently removed B. Emission Units Associated with Stack – eDEP Only Below is a list of the emission units associated with this stack. This list is for information only – no data entry is required; make any changes on the forms for each emission unit (i.e., AP1, AP2, or AP3). Note: this list does not reflect changes you have made on-line, but not yet submitted. Important: To assign an emission unit to this stack, enter the Stack Id No. on the form for the emission unit (i.e., AP1, (i.e., AP1, ap2)). The stack is the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyyy) Complete only if the stack was permanently removed (mm/dd/yyy) Complete only if the stack was permanently removed (mm/dd/yyy) Complete only if the		7. Stack liner material: ✓ metal ☐ brick refractory ☐ other:					
B. Emission Units Associated with Stack – eDEP Only Below is a list of the emission units associated with this stack. This list is for information only – no data entry is required; make any changes on the forms for each emission unit (i.e., AP1, AP2, or AP3). Note: this list does not reflect changes you have made on-line, but not yet submitted. Important: To assign an emission unit to this stack, enter the Stack Id No. on the form for the emission unit (i.e., AP1, AP2, or AP3).					Describe Oth	er	
B. Emission Units Associated with Stack – eDEP Only Below is a list of the emission units associated with this stack. This list is for information only – no data entry is required; make any changes on the forms for each emission unit (i.e., AP1, AP2, or AP3). Note: this list does not reflect changes you have made on-line, but not yet submitted. Important: To assign an emission unit to this stack, enter the Stack Id No. on the form for the emission unit (i.e., AP1, AP2, or AP3).		ρ	Decommission date –	if applicable: —			
Below is a list of the emission units associated with this stack. This list is for information only – no data entry is required; make any changes on the forms for each emission unit (i.e., AP1, AP2, or AP3). Note: this list does not reflect changes you have made on-line, but not yet submitted. Important: To assign an emission unit to this stack, enter the Stack Id No. on the form for the emission unit (i.e., AP1,		0.	Decommission date –	п аррпсавіе. (r	nm/dd/yyyy)	only if the stack was permanently removed	
entry is required; make any changes on the forms for each emission unit (i.e., AP1, AP2, or AP3). Note: this list does not reflect changes you have made on-line, but not yet submitted. Important: To assign an emission unit to this stack, enter the Stack Id No. on the form for the emission unit (i.e., AP1,		B. Emission Units Associated with Stack – eDEP Only					
To assign an emission unit to this stack, enter the Stack Id No. on the form for the emission unit (i.e., AP1,		entry is required; make any changes on the forms for each emission unit (i.e., AP1, AP2, or AP3). Note:					
emission unit to this stack, enter the Stack Id No. on the form for the emission unit (i.e., AP1,			EU#64-2 LENNO	X FURNACES SF	R 20Q5-140/154	1 0.246 MMBTU/HR	
enter the Stack Id No. on the form for the emission unit (i.e., AP1,	emission unit						
on the form for the emission unit (i.e., AP1,	enter the						
emission unit (i.e., AP1,	on the form						
(i.e., AP1,							

Bureau of Waste Prevention - Air Quality

Year of record WP AQ AP-STACK DEP Stack # 1190564 Emission Unit - Fuel Utilization Equipment Facility AQ identifier

2006

C. Notes and Attachments

1. Notes: please include any additional information that will help DEP understand your submission.

2. Attachments:

Bureau of Waste Prevention - Air Quality

VP AQ AP-STACK

Physical Vertical Stacks

2006
Year of record
7
DEP Stack #
1190564
Facility AQ identifier

important.
When filling
out forms on
the computer,
use only the
tab key to
move your
cursor - do no
use the return
kev



2.

7.

8. Decommission date – if applicable:

?
What to if data
is unknown or
unavailable?

navai	iable ?	
	\bigcirc	

How to delete a stack?

return	
	3.
?	4.
What to sif data is unknown or unavailable?	5.
	6.

Stack Descript	tion	
•		How to report combined units/stacks: see 3b below
Facility identifiers:		
CLEAN HARBORS C	OF BRAINTREE	
a. Facility name		
34839	119	90564
b. DEP Account number	c. A	Q identifier – SSEIS ID number
Stack identifiers:		
	TOR (2)- CUMMINS & CATERPIL	LAR
a. Facility's choice of stack		
7	7	
b. Facility's stack number -	edit as needed c. D	EP stack # - old SSEIS stack #
Type: a. ✓ vertical ☐	vertical with rain cap/sleeve b. Combine	d stacks – enter number of individual stacks:
Dimensions	12	0.80
Dimensions:	Height in feet	Diameter in feet
Can avit valanitu	32	32
Gas exit velocity:	Low end - feet per second (0.1 - 500	High end - feet per second (0.1 – 500)
	1150	1150
Exit temperature:	1130	High end - ⁰ Fahrenheit (50 – 1800)

Describe Other

(mm/dd/yyyy) Complete only if the stack was permanently removed

B. Emission Units Associated with Stack – eDEP Only

Below is a list of the emission units associated with this stack. This list is for information only – no data entry is required; make any changes on the forms for each emission unit (i.e., AP1, AP2, or AP3). Note: this list does not reflect changes you have made on-line, but not yet submitted.

important:
To assign an
emission unit
to this stack,
enter the
Stack Id No.
on the form
for the
emission unit
(i.e., AP1,
AP2, or AP3).

	EU#50-GENERATOR #2-CUMMINS #NT855G2 #2 DIESEL
_	EU#55-GENERATOR #1-CATERPILLAR 558.5 KW #2 OIL-0.3%S
•	
-	
-	

Bureau of Waste Prevention - Air Quality

Year of record WP AQ AP-STACK DEP Stack # 1190564 Emission Unit - Fuel Utilization Equipment Facility AQ identifier

2006

C. Notes and Attachments

1. Notes: please include any additional information that will help DEP understand your submission.

2. Attachments:

Bureau of Waste Prevention - Air Quality

WP AQ AP-STACK

Physical Vertical Stacks

2006
Year of record
5
DEP Stack #
1190564
Facility AQ identifier

Important:
When filling
out forms on
the computer,
use only the
tab key to
move your
cursor - do no
use the return
kov









a stack?

	Col	implete one AP-51 ACK for	m for EACH physic	al Stack at the facility		
Important: When filling	A.	Stack Description				
out forms on the computer,		E 224 1 1 22		Ho	ow to report combined units/stacks: see 3b below	
use only the	1.	Facility identifiers:				
tab key to		CLEAN HARBORS OF	BRAINTREE			
move your cursor - do not		a. Facility name				
use the return		34839		1190564		
key.		b. DEP Account number		c. AQ identif	ier – SSEIS ID number	
tab	2.		INEO NOT HOED	IN 0000		
		2 DRUM CRUSHING L		IN 2006		
return		a. Facility's choice of stack na	ame – edit as needed	_		
		5	dit on nonded	<u>5</u>		
		b. Facility's stack number – ed	uit as needed	C. DEP Stack	K# - OID SSEIS STACK#	
	3.	Type: a. 🗸 vertical 🗌 ve	rtical with rain cap/sleev	e b. Combined stacks	- enter number of individual stacks:	
			54		1.30	
	4.	Dimensions:	Height in feet		Diameter in feet	
hat to sif data	_		54		54	
unknown or available ?	5.	Gas exit velocity:	Low end - feet per s	second (0.1 – 500)	High end - feet per second (0.1 – 500)	
avallable :	_		60		60	
	6.	Exit temperature:	Low end - ⁰Fahrenh	neit (50 – 1800)	High end - ⁰ Fahrenheit (50 – 1800)	
	7.	Stack liner material:	☑ metal ☐ brick r	efractory		
				Describe Otl	ner	
	8.	Decommission date – if	applicable.	-		
How to delete	0.	2000 millionion dato	application.	(mm/dd/yyyy) Complete	only if the stack was permanently removed	

B. Emission Units Associated with Stack - eDEP Only

Below is a list of the emission units associated with this stack. This list is for information only – no data entry is required; make any changes on the forms for each emission unit (i.e., AP1, AP2, or AP3). Note: this list does not reflect changes you have made on-line, but not yet submitted.

Important:
To assign an
emission unit
to this stack,
enter the
Stack Id No.
on the form
for the
emission unit
(i.e., AP1,
AP2 or AP3)

EU#5-2 DRUM CRUSHING LINES
EU#61-REPACKAGING SOLVENTS

Bureau of Waste Prevention - Air Quality

Year of record WP AQ AP-STACK DEP Stack # 1190564 Emission Unit - Fuel Utilization Equipment Facility AQ identifier

2006

C. Notes and Attachments

1. Notes: please include any additional information that will help DEP understand your submission.

2. Attachments:

Massachusetts Department of Environmental Protection Bureau of Waste Prevention – Air Quality

BWP AQ AP-STACK

Physical Vertical Stacks

2006
Year of record
4
DEP Stack #
1190564
Facility AQ identifier

	Co	mplete one AP-STACK fo	orm for EACH physi	ical stack at the facili	ty	
Important: When filling out forms on	A. Stack Description How to report combined units/stacks.					
the computer, use only the	1.	Facility identifiers:			Tell to report combined armay datable. See of below	
tab key to		CLEAN HARBORS O	F BRAINTREE			
move your cursor - do not		a. Facility name				
use the return		34839		119056	4	
key.		b. DEP Account number		c. AQ ider	tifier – SSEIS ID number	
tab	2.	Stack identifiers: ?				
		THREE DISTILLATIO		SED 2006		
return		a. Facility's choice of stack r	name – edit as needed			
1990		4		4		
		b. Facility's stack number –	edit as needed	c. DEP sta	ack # - old SSEIS stack #	
	3.	Type: a. ✓ vertical □ v	vertical with rain cap/sle	eve b. Combined stac	ks – enter number of individual stacks:	
_			70		2	
2	4.	Dimensions:	Height in feet		Diameter in feet	
What to if data			15		15	
is unknown or unavailable?	5.	Gas exit velocity:	Low end - feet pe	r second (0.1 – 500)	High end - feet per second (0.1 – 500)	
diavanable .	^	Fuit to an another	70		70	
	6.	Exit temperature:	Low end - ⁰ Fahrer	nheit (50 – 1800)	High end - ⁰ Fahrenheit (50 – 1800)	
	7. Stack liner material: ✓ metal ☐ brick refractory ☐ other:					
				Describe (Other	
	0	Decommission date – if applicable: (mm/dd/yyyy) Co				
How to delete a stack?	8.			(mm/dd/yyyy) Comple	te only if the stack was permanently removed	
	В.	Emission Units	Associated	with Stack -	eDEP Only	
	Below is a list of the emission units associated with this stack. This list is for information only – no data entry is required; make any changes on the forms for each emission unit (i.e., AP1, AP2, or AP3). Note: this list does not reflect changes you have made on-line, but not yet submitted.					
Important:		EU#4-THREE DIS	STILLATION U	NITS- 780 GAL	/HR NOT USED 05	
To assign an emission unit to this stack,						
enter the Stack Id No.						
on the form for the emission unit						
(i.e., AP1, AP2, or AP3).						

Bu

E

Bureau of Waste Prevention – Air Qualit	V	4 DEP Stack # 1190564		
•	•			
BWP AQ AP-STA	CK			
-				
Emission Unit – Fuel Utilization Equip	oment	Facility AQ identifier		

C. Notes and Attachments

1. **Notes:** please include any additional information that will help DEP understand your submission.

2. Attachments:

Check here to submit attachments to this form (e.g., calculations). For eDEP on-line filers, this will
create a new step on your Current Submittals Page where you will attach electronic files to your
submittal. For attachments that cannot be sent electronically, please list all such attachments
below and deliver them to DEP with a paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-STACK

Physical Vertical Stacks

2006
Year of record
3
DEP Stack #
1190564
Facility AQ identifier

	Complete one AP-STACK form for EACH physical stack at the facility						
Important: When filling	A.	A. Stack Description					
out forms on the computer,	1.	Facility identifiers:		ŀ	How to report combined units/stacks: see 3b below		
use only the tab key to		CLEAN HARBORS OF	BRAINTREE				
move your cursor - do not		a. Facility name					
use the return		34839		1190564	1190564		
key.	2.	b. DEP Account number		c. AQ iden	c. AQ identifier – SSEIS ID number		
tab		Stack identifiers:					
1		1 STACK BOILER #1-	CLEAVER BROOK	(S- #2 OIL			
		a. Facility's choice of stack na	me – edit as needed				
return		3		3			
		b. Facility's stack number – ed	dit as needed	c. DEP sta	ack # - old SSEIS stack #		
	3.	Type: a. ✓ vertical ver	rtical with rain cap/sleeve	b. Combined stac	ks – enter number of individual stacks:		
	1	Dimensional	35		1		
	4.	Dimensions:	Height in feet		Diameter in feet		
is unknown or	_	Gas exit velocity:	47		47		
unavailable ?	5.	Gas exit velocity.	Low end - feet per se	econd (0.1 - 500)	High end - feet per second (0.1 – 500)		
	6.	Exit temperature:	450		450		
		Exit temperature.	Low end - °Fahrenhe	eit (50 – 1800)	High end - ⁰ Fahrenheit (50 – 1800)		
	7.	Stack liner material:	:				
How to delete a stack?				Describe C	Other		
	8.	. Decommission date – if applicable: (mm/dd/yyyy) Complete only if the stack was permanently					
	В.	Emission Units	Associated w	/ith Stack – (eDEP Only		
	ent		changes on the form	ns for each emissi	is list is for information only – no data ion unit (i.e., AP1, AP2, or AP3). Note: yet submitted.		

Important:

To assign an emission unit to this stack, enter the Stack Id No. on the form for the emission unit (i.e., AP1, AP2, or AP3).

	on and or you make	,,	
EU#3-BOILER	#1-CLEAVER	BROOKS-#4(NOT	USED) #2 OIL 0.3%S

Bureau of Waste Prevention - Air Quality

Year of record WP AQ AP-STACK DEP Stack # 1190564 Emission Unit - Fuel Utilization Equipment Facility AQ identifier

2006

C. Notes and Attachments

1. Notes: please include any additional information that will help DEP understand your submission.

2. Attachments: