

Massachusetts Department of Environmental Protection

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Transaction ID: 188259

Document: Toxics Use Reduction Act (TURA) Reporting

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Form S Cover Sheet

2007	
Reporting	Year
CLEAN	HARBORS ENVI
Facility Na	me
34839	

DEP Facility ID Number

Section 1: General Information

Important:

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





Facility Name and Addres	SS:
--------------------------	-----

CL	EAN HARBORS ENVIRONMENTAL SERVICES	SINC	
a. N	Name		
1 H	HILL AVE		
b. S	Street Address		
BR	RAINTREE	MA	021840000
c. C	City	d. State	e. Zip Code
	e you making a trade secret claim for any informa orm S(s)? Yes	tion submitted in this COV	/ER SHEET and/or
g. If Y	YES, attach a statement substantiating the claim. T	his copy is: Sanitized	Unsanitized
	all chemicals only used to treat wastewater? Yees, then there are no production units associated		
04	2507498	02184CLNHR385QU	
i Ta	axpayer Identification Number	i Toxics Release Inventory (TF	RI) Identification Number

Section 2: Certification Statement

(Federal Employer Identification Number or FEIN)

I hereby certify that I have reviewed this and all attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and information in these documents are accurate based on measurements and/or reasonable estimates using data available to the preparers of these documents. I am aware that there are significant penalties for willful or intentional submission of false or incomplete information. I agree on behalf of the filing facility to remit the required Toxics Use Fee (as determined on the Fee Worksheet form) to the Commonwealth of Massachusetts, as required by 301 CMR 40.03. I further certify that the information contained within this filing, as it pertains to TURA billing, is true and correct.

David S. Medina	06/27/2008
a. Authorized Signature	b. Date (MM/DD/YYYY)
DAVID S. MEDINA	06/26/2008
c. First Name (Print)	d. Last Name (Print)
FACILITY COMPLIANCE MANAG	medinad@cleanharbors.com
e. Position/Title	f. Email Address

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Section 3: Chemicals Previously Reported That Are Not Reportable This Year

In this section, you may provide information on any chemical reported last year that is not subject to reporting this year. If you substituted a non-listed chemical for a TURA chemical, you may identify the substitution.

The codes to explain why the chemical is not reportable are: [1] Chemical Below Threshold But > 0; [2] No Chemical Use in Reporting Year; [3] Chemical Substitution; [4] Chemical Eliminated (No Substitution); [5] Decline in Business; [6] Other (Explain below in the additional comments section); [7] Chemical no longer reportable under TURA. Check all the codes, up to four, that apply.

	[,]	F F - 7 -
a.1	a.1 CAS # of chemical not reportable (if applicable) a.2 Chemical Name	
	a3. Explanation of why the chemical Is [1] [2] [3] [4] [5] [6] not reportable (check codes):	[7]
a.4	a.4	
h 1	b.1 b.2	
D. 1 L	CAS # of chemical not reportable (if applicable) Chemical Name	
ı	not reportable (check codes):	[7]
b.4	b.4 CAS # of chemical substituted for TURA chemical Chemical Name	
c 1	c.1 c.2	
0.1	CAS # of chemical not reportable (if applicable) Chemical Name	
Г	c.3 Explanation of why the chemical Is [1] [2] [3] [4] [5] [6]	[7]
c.4 [C.4 CAS # of chemical substituted for TURA chemical Chemical Name	
d.1		
	CAS # of chemical not reportable (if applicable) Chemical Name	
	d.3 Explanation of why the chemical Is not reportable (check codes):	[7]
d.4	d.4 CAS # of chemical substituted for TURA chemical Chemical Name	
e.1	e.1 e.2	
	CAS # of chemical not reportable (if applicable) Chemical Name	
	e.3 Explanation of why the chemical Is [1] [2] [3] [4] [5] [6] not reportable (check codes):	[7]
e.4	e.4e.4e.4e.5 CAS # of chemical substituted for TURA chemical Chemical Name	
f.	f. Do you have more chemicals not subject to reporting this year? Yes No	

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Section 4: Facility-Wide Listing of Production Units

A PRODUCTION UNIT is best thought of as the combination of the process (or activities) used to produce a product or service and the product or service. In this section, please identify the PRODUCTION UNITS at the facility, then use the production unit number to report on chemical use in the Form S.

				ial change in a PROI be given a new, uniqu			reviou	s reporting year, the			
a. Production Unit #	b.	Describe the Proces	ss:								
Is this production unit IN USE for the reporting year of this submittal?	SOLVENT RECOVERY										
	c. Describe the Product:										
Yes V No		RECLAIMED HALOGENATED SOLVENTS. TRICHLOROETHYLENE, METHYLENE CHLORIDE, 1-1-1 TRICHLOROETHANE, AND TETRACHLOROETHYLENE.									
	Enter	up to four (4) siv_dia	it ΝΔΙα	CS Codes that best o	loscrih	ne the Product from t	hie Dr	aduction Unit:			
!		up to lour (+) six-dig			icsci it	De the Froduct hom	1113 1 10				
		2211									
	d.	NAICS Code	е	. NAICS Code		f. NAICS Code		g. NAICS Code			
	i. Er ch	area dollar title dollar the production plemicals as an input	hour Infor	escription for the units kilowatt le le rmation For This Pros codes to identify the ut or throughput. (See and instructions on whether	ngth oduct e procesthe r	N/A number ion Unit ess steps that involveporting guidance de	e TUR	A-reportable nt for the list of			
	1.	DD-02	2.		3.		4.				
		Process Code	1	Process Code		Process Code		Process Code			
	5.	Process Code	6.	Process Code	7.	Process Code	8.	Process Code			
	9.	Process Code	10.	Process Code	11.	Process Code	12.	Process Code			
	10	110000 0000	14		15	1100000 0000	16	1100000 0000			
	13.	Process Code	¹ 14. 1	Process Code	15.	Process Code	[∣] 16.	Process Code			
	17.	Process Code	18.	Process Code	19.	Process Code	20.	Process Code			
	04				00		04				
	21.	Process Code	22.	Process Code	23.	Process Code	24.	Process Code			



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Section 4: Facility-Wide Listing of Production Units (continued)

List the TURA-reportable chemicals associated with this production unit. If a chemical is associated with ALL the process steps entered in i. above, check ALL. If a chemical is associated with some but not all of the process steps, check the numbers that correspond to the process codes entered in i. above (i.e. box 1 below corresponds to the process code entered in i.1).

abov		•	•		the proce		•	•	ess coue	es entere	a In I.
j. Produc	tion Unit	Number:	- 1	od. Unit #							
k. TURA	Chemica	al	CA	\S #			Ch	emical Nar	ne		
Check "A	All" or the	number	s that cor	respond	to the pro	ocess co	des ente	red in i.			AII.
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.
13.	14.	15.	16.	17.	18.	19.	20.	21.	22.	23.	24.
ı. TURA (Chemica	I	CA	\S #			C	hemical Na	ıme		
Check "A	All" or the	number	s that cor	respond	to the pro	ocess co	des ente	red in i.			AII.
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.
13.	14.	15.	16.	17.	18.	19.	20.	21.	22.	23.	24.
m. TURA	Chemic	al	CA	S#				hemical Na	ıme		
					to the pro	ocess co			ime		All.
					to the pro	ocess co			10	11.	All
Check "A	All" or the	number	s that cor	respond	_	_	des ente	red in i.		11 23	
Check "A	All" or the	numbers	s that cor	respond 5.	6.	7.	des ente	red in i.	10.	_	12.
Check "A	2 14	3 15	4.	respond 5.	6.	7.	8	red in i.	10	_	12.
Check "A 1. 13. n. TURA	All" or the 2. 14. Chemica	3 15	s that cor	5.	6.	7 19	8	9 21	10	_	12.
Check "A 1. 13. n. TURA	All" or the 2. 14. Chemica	3 15	s that cor	5.	6	7 19	8	9 21	10	_	12.
Check "A 1.	All" or the 2. 14. Chemica All" or the	3 15	s that cor	5.	6	7.	8. 20. Codes enter	9. 21. hemical Nared in i.	10	23.	12.



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Section 4: Facility-Wide Listing of Production Units

A PRODUCTION UNIT is best thought of as the combination of the process (or activities) used to produce a product or service and the product or service. In this section, please identify the PRODUCTION UNITS at the facility, then use the production unit number to report on chemical use in the Form S.

							reviou	is reporting year, the			
2				pe given a new, uniq	ue nun	nber.					
. Production Unit #	b.	b. Describe the Process:									
s this production init IN USE for ne reporting ear of this ubmittal?	STA	ABILIZATION OF LE	EAD								
Yes No	C.	Describe the Produc	ct:								
Z res No	DE	DECHARACTERIZED WASTE.									
Į.	Enter	nter up to four (4) six-digit NAICS Codes that best describe the Product from this Production Unit:									
		2211 NAICS Code		e. NAICS Code		f. NAICS Code		g. NAICS Code			
	_	h. Check the appropriate description for the unit of product: area dollar hours kilowatt length N/A number volume weight									
ı	Produ	roduction Process Step Information For This Production Unit									
i	ch	emicals as an input,	outp	ut or throughput. (Se	e the r	ess steps that involveporting guidance dogiven code needs to	cume	nt for the list of			
	4	GG-01	_]		4				
	1.	Process Code	2.	Process Code	」 3. 1	Process Code	4.	Process Code			
	5.	Process Code	6.	Process Code] 7. 1	Process Code	8.	Process Code			
	9.	Process Code	10.	Process Code] 11. 1	Process Code	12.	Process Code			
	13.	Process Code	14.	Process Code] 15. 1	Process Code	16.	Process Code			
	17.	Process Code	18.	Process Code] 19.	Process Code	20.	Process Code			
	21.	Process Code	22.	Process Code	23.	Process Code	24.	Process Code			



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Section 4: Facility-Wide Listing of Production Units (continued)

List the TURA-reportable chemicals associated with this production unit. If a chemical is associated with ALL the process steps entered in i. above, check ALL. If a chemical is associated with some but not all of the process steps, check the numbers that correspond to the process codes entered in i. above (i.e. box 1 below corresponds to the process code entered in i.1)

	above (i.e. box 1 below corresponds to the process code entered in i.1).										
j. Production Unit Number: 2 Prod. Unit #											
,			FIC	0a. Unit #				AD CO	MPOUNE	ns.	
k. TURA Chemical CAS #								emical Na			
Check "All" or the numbers that correspond to the p					to the pro	ocess co	des entei	ed in i.			All.
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.
13.	14.	15.	16.	17.	18.	19.	20.	21.	22.	23.	24.
			[<u></u>								
ı. TURA	Chemica	I		36363 S#				OLYCHI nemical Na		ED BIPH	IENYLS
Check "A	All" or the	number	s that cor		to the pro	ocess co					AII.
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.
13.	14.	15.	16.	17.	18.	19.	20.	21.	22.	23.	24.
m. TURA	Chemic	al	CA	S#			CI	nemical Na	ıme		
Check "A	All" or the	number	s that cor	respond	to the pro	ocess co	des enter	red in i.			AII.
									_		
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.
1	2	3. <u> </u>	4. <u> </u>	5 17	6	7. 1 9. 1	8	9	22.	23.	12
							_				
13.	14.	15.					_				
	14.	15.	16.				20.		22.		
13	14. The Chemica	15	16.	17	18.	19.	20. CI	21	22.		
13	14. The Chemica	15	16. CA	17	18.	19.	20. CI	21	22.		24.
n. TURA	14.	15	16. CA	17. The state of t	18. The to the pro-	19. ocess co	20. CI	21	22	23.	24.

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2007
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Facility Name
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Section 4: Facility-Wide Listing of Production Units

A PRODUCTION UNIT is best thought of as the combination of the process (or activities) used to produce a product or service and the product or service. In this section, please identify the PRODUCTION UNITS at the facility, then use the production unit number to report on chemical use in the Form S.

		there has been a sul RODUCTION UNIT i					previou	is reporting year, the				
Production Unit #		Describe the Proces			,							
s this production nit IN USE for ne reporting ear of this	STORAGE, HANDLING AND TRANSFER OF WASTE											
ubmittal?	C.	c. Describe the Product:										
✓ Yes No	PO	POUNDS OF WASTE STORED										
E	56	up to four (4) six-dig 2211 NAICS Code		CS Codes that best	describ	the Product from	this Pro	oduction Unit: g. NAICS Code				
P i.	Produ Er ch		hour nfo roces outpu	s codes to identify that or throughput. (Se	ength roduct he procee the r	N/A number numbe	lve TUF docume	RA-reportable nt for the list of				
	1.	GG-04 Process Code] 2.	Process Code	3.	Process Code	4.	Process Code				
	5.	Process Code	6.	Process Code	<u> </u>	Process Code	⊿ 8.	Process Code				
	9.	Process Code	10.	Process Code	11.	Process Code	12.	Process Code				
	13.	Process Code	14.	Process Code	15.	Process Code	16.	Process Code				
	17.	Process Code	18.	Process Code	19.	Process Code	20.	Process Code				
	21.	Process Code	22.	Process Code	23.	Process Code	24.	Process Code				



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2007
Reporting Year
CLEAN HARBORS ENVI
Facility Name
34839
DEP Facility ID Number

Section 4: Facility-Wide Listing of Production Units (continued)

List the TURA-reportable chemicals associated with this production unit. If a chemical is associated with ALL the process steps entered in i. above, check ALL. If a chemical is associated with some but not all of the process steps, check the numbers that correspond to the process codes entered in i. above (i.e. box 1 below corresponds to the process code entered in i.1).

	/e (i.e. bo	ox 1 belo	w correst	oonds to	the proce	ess code	entered i	in i.1).				
j. Production Unit Number: 3 Prod. Unit #												
,			FIC	1040				POLYCYCLIC AROMATIC COMPO				
k. TURA Chemical				\S #				Chemical Name				
Check "A	All" or the	number	s that cor	respond	to the pr	e process codes entered in i. All.						
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	
13.	14.	15.	16.	17.	18.	19.	20.	21.	22.	23.	24.	
			[<u>.</u>					-1 WAIII				
ı. TURA	Chemica	I		36363 \S#				OLYCHI hemical Na		ED BIPF	IENYLS	
Chook "	All" or the	numbor			to the pr						A11 [2]	
Check A	All Of the	number	s that cor	respond	to the pr	ocess co	des ente	rea III I.			All. 🗸	
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	
13.	14.	15.	16.	17.	18.	19.	20.	21.	22.	23.	24.	
TUDA	Chamia	o.l	10	26			L	EAD CO	MPOUNI	DS		
m. TURA	Chemic	al) 26 \S#				EAD CO hemical Na		DS		
				S#	to the pr	ocess co		hemical Na		DS	All.	
			CA	S#	to the pr	ocess co		hemical Na		11. <u> </u>	All. 🗸	
Check "A	All" or the	number	CA s that cor	respond			des ente	hemical Na red in i.	ime			
Check "A	All" or the	number	S that cor	respond	6.	7.	des ente	nemical Na	10	11.	12.	
1 13	All" or the 2 14	3 15	S that cor	respond 5 17	6.	7.	des ente	hemical Na red in i. 9 21	10 22	11.	12.	
Check "A 1. 13. n. TURA	All" or the 2. 14. Chemica	number 3 15	S that cor	respond 5.	6	7 19	des ente	hemical Na red in i. 9 21 hemical Na	10 22	11.	12.	
Check "A 1. 13. n. TURA	All" or the 2. 14. Chemica	number 3 15	S that cor	respond 5.	6	7 19	des ente	hemical Na red in i. 9 21 hemical Na	10 22	11.	12.	
Check "A 1. 13. n. TURA	All" or the 2. 14. Chemica	number 3 15	S that cor	respond 5.	6	7 19	des ente	hemical Na red in i. 9 21 hemical Na	10 22	11.	12.	
Check "A 1. 13. n. TURA Check "A	All" or the 2. 14. Chemica All" or the	al number	s that cor 4. 16. CA S that cor	5. 17. 18#	6	7.	des ente 8. 20. C des ente	hemical Na red in i. 9 21 hemical Na red in i.	10	11 23	12.	

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Important:

forms on the computer, use

When filling out

only the tab key

to move your cursor - do not

use the return

f.

Massachusetts Department of Environmental Protection **Bureau of Waste Prevention**

Toxics Use Report - Form S

Chemical Use Facility-Wide and by Production Units

2007 Reporting Year **CLEAN HARBORS ENVIR** Facility Name 34839

DEP Facility ID Number

POLYCHLORINATED BIPH Chemical Name

Section 1: Facility-Wide Use of Listed Chemical

1336363 POLYCHLORINATED BIPHENYLS a. MA DEP CAS # b. Chemical Name (Dioxin should be in grams, decimal points may be used)

Facility-wide use of chemical identified in a. Enter the total amount (in POUNDS, except for dioxin) for each applicable category. **NOTE:** 'Generated as byproduct' (item f.) means all waste containing the listed chemical before the waste is handled, transferred, treated, recycled or released. Please refer to the reporting instructions before completing this section.

0	0
c. Manufactured	d. Processed
74845	74845
e. Otherwise Used	f. Generated As Byproduct
0	h. Check here to input Form R or A information
g. Shipped In Or As Product	to MassDEP

Section 2: Materials Balance

✓ No

Yes*

When the amounts reported in c, d and e in Section 1 are added together, the sum will in many cases equal the sum of f and q. In other words, lines c, d and e will often form a "materials balance." If lines c, d and e are not in approximate balance, you must use this section to explain why. Indicate all the reasons that apply by entering the number of pounds on the appropriate line below (e.g., 4,000 Chemical was held in inventory).

a. Chemical Was Recycled On Site	b. Chemical Was Consumed Or Transformed
c. Chemical Was Held In Inventory	d. Chemical Is A Compound
e. Other	
Did anything non-routine occur at your facility reported?	during the reporting year that affected the data

*If your answer is Yes, you may explain in Section 4.m on Page 3.

Se	ction 3: Chemicals Used in Waste Treatment Units
а.	Is this chemical used to treat waste or control pollution?
	Yes No* *If your answer is No, please skip ahead to Section 4.
٥.	Please enter the amount of the chemical (in pounds) used to treat waste or control pollution.
	Pounds
C.	Did the use of this chemical for waste treatment or pollution control increase or decrease by 10 percent or more compared with the previous reporting year?

If your answer is Yes, you may explain in Section 4.m on Page 3. c.1 Yes **✓** No Are there more chemicals to report? (Use ONLY if ALL chemicals are used c.2 Yes ✓ No

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to treat waste or control pollution).



Toxics Use Report - Form S Chemical Use Facility-Wide and by Production Units

2007
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CLEAN HARBORS ENVIR
Facility Name
34839
DEP Facility ID Number
POLYCHLORINATED BIPH

Chemical Name

	Se	ection 4: Toxics Use by Production Unit		
002 a. Production Unit #	b.	Quantity of Chemical Code:		
Use		✓ 1. ≤ 5,000 lbs.	10,000 lbs.	3. > 10,000 lbs. ≤ 100,000 lbs.
		4. > 100,000 lbs. ≤ 500,000 lbs5. > 500,000	lbs.	
	C.	Did the use of this chemical in this production unit incompared with the previous reporting year and/or did		
		✓ Yes No* *If your answer is No, skip a	head to g. below	v.
		Process code(s) where most significant changes occurred (up to three in descending order) Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique C (up to three per	
		GG-01	80	
		d.1. 2.	3a.	3b. 3c.
		e.1. 2.	3a.	3b. 3c.
		f.1. 2.	3a.	3b. 3c.
Byproduct	g.	Was byproduct generated for this chemical less than ☐ Yes* ✓ No *If your answer is Yes, skip a	•	·
	h.	Did the byproduct generated for this chemical in this percent or more compared with the previous reporting reduction?		
		Yes No* *If your answer is No, s	skip ahead to m	. on Page 3.
		Process code(s) where most significant changes occurred (up to three in descending order) Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique C (up to three per	
		i.1. 2.	3a.	3b. 3c.
		j.1. 2.	3a.	3b. 3c.
		k.1. 2.	3a.	3b. 3c.
	l.	Are there more production units that use this chemica	al?	✓ Yes

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Toxics Use Report - Form S

Chemical Use Facility-Wide and by Production Units

^	^	^	-
,			1
_	u	u	

Reporting Year

CLEAN HARBORS ENVIR

Facility Name

34839

DEP Facility ID Number

POLYCHLORINATED BIPH

Chemical Name

Section 4: Toxics Use by Production Unit (continued)

m. You may add any comments or explanations regarding chemical use and/or byproduct generated in this production unit, chemical use in waste treatment (from Section 3), and non-routine occurrences at your facility (from Section 2).

PCBS RECEIVED INTO PLANT FROM GENERATOR, SOLIDIFIED ON SITE, AND 4683 POUNDS SENT TO CLEAN HARBORS DEER PARK, LAPORTE, TX FOR INCINERATION. 4 M. PCBS RECEIVED INTO PLANT FROM GENERATOR AND 70,162 POUNDS SENT FOR LANDFILL DISPOSAL.

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Toxics Use Report - Form S Chemical Use Facility-Wide and by Production Units

2007	
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CLEAN	HARBORS ENVIR
Facility Na	ame
34839	
DEP Facil	ity ID Number
POLYC	HLORINATED BIPH

Chemical Name

	Se	ection 4: Toxics Use by P	roduction Unit			
003 a. Production Unit #	b.	Quantity of Chemical Code:				
Jse		☐ 1. ≤ 5,000 lbs.	2. > 5,000 ≤ °	10,000 lbs.	☑ 3. > 10,000 lbs	. ≤ 100,000 lbs.
		4. > 100,000 lbs. ≤ 500,00	0 lbs. 5. > 500,000	lbs.		
	C.	Did the use of this chemical in compared with the previous re				
		✓ Yes No* *If yo	ur answer is No, skip ah	nead to g. be	elow.	
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique (up to three	e Code(s) per process code)	
		GG-04	I	80		
		d.1.	2.	3a.	3b.	3c.
		e.1.	2.	3a.	3b.	3c.
		f.1.	2.	3a.	3b.	3c.
3yproduct -	g.	Was byproduct generated for the Yes* ✓ No *If you	ur answer is Yes, skip a			or ant:
	h.	Did the byproduct generated for percent or more compared with reduction? Yes No*		year and/or	did you implement	
		☐ 162 ► NO	ii your answer is ivo, s	nip aneau io	iii. Oii Fage 3.	
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique (up to three	e Code(s) per process code)	
		i.1.	2.	3a.	3b.	3c.
		j.1.	2.	3a.	3b.	3c.
		L 1	2.	20		20
		k.1.	۷.	3a.	3b.	3c.
	I.	Are there more production unit	ts that use this chemical	l?	Yes	✓ No



Important: When filling out forms on the computer, use

only the tab key to move your

cursor - do not

use the return

f.

Massachusetts Department of Environmental Protection **Bureau of Waste Prevention**

Toxics Use Report - Form S

Chemical Use Facility-Wide and by Production Units

2007 Reporting Year **CLEAN HARBORS ENVIR** Facility Name 34839

DEP Facility ID Number POLYCYCLIC AROMATIC

Chemical Name

Section 1: Facility-Wide Use of Listed Chemical

7	ection 1.1 acmity-wide ose of Listed Chemical				
	1040	POLYCYCLIC AROMATIC COMPOUNDS			
	a. MA DEP CAS #	b. Chemical Name (Dioxin should be in grams, decimal points may be used)			

Facility-wide use of chemical identified in a. Enter the total amount (in POUNDS, except for dioxin) for each applicable category. **NOTE:** 'Generated as byproduct' (item f.) means all waste containing the listed chemical before the waste is handled, transferred, treated, recycled or released. Please refer to the reporting instructions before completing this section.

0	346
c. Manufactured	d. Processed
0	0
e. Otherwise Used	f. Generated As Byproduct
346	h. Check here to input Form R or A information
g. Shipped In Or As Product	to MassDEP
ction 2: Materials Balance	
•	nd e in Section 1 are added together, the sum will in many cases

Se

equal the sum of f and g. In other words, lines c, d and e will often form a "materials balance." If lines c, d and e are not in approximate balance, you must use this section to explain why. Indicate all the reasons that apply by entering the number of pounds on the appropriate line below (e.g., 4,000 Chemical was held in inventory).

a. Chemical Was Recycled On Site	b. Chemical Was Consumed Or Transformed
c. Chemical Was Held In Inventory	d. Chemical Is A Compound
e. Other	•
Did anything non-routine occur at your facility reported?	during the reporting year that affected the data
Yes* No *If your answer is Yes	s, you may explain in Section 4.m on Page 3.

Se	ction 3: Chemicals Used in Waste Treatment Units
a.	Is this chemical used to treat waste or control pollution?
	Yes No* *If your answer is No, please skip ahead to Section 4.
b.	Please enter the amount of the chemical (in pounds) used to treat waste or control pollution.
	Pounds
C.	Did the use of this chemical for waste treatment or pollution control increase or decrease by 10 percent or more compared with the previous reporting year?
	c.1 Yes* No *If your answer is Yes, you may explain in Section 4.m on Page 3.

c.2 Yes ✓ No to treat waste or control pollution).

Are there more chemicals to report? (Use ONLY if ALL chemicals are used



Toxics Use Report - Form S Chemical Use Facility-Wide and by Production Units

2007	
Reporting	
CLEAN	HARBORS ENVIR
Facility Na	ame
34839	
DEP Facil	ity ID Number
POLYC'	YCLIC AROMATIC

Chemical Name

	Se	ection 4: Toxics Use by P	roduction Unit			
3 n. Production Unit #	b.	Quantity of Chemical Code:				
Jse		✓ 1. ≤ 5,000 lbs.	_ 2. > 5,000 ≤	10,000 lbs.	3. > 10,000 lbs	s. ≤ 100,000 lbs.
		4. > 100,000 lbs. ≤ 500,00	0 lbs. 5. > 500,000	lbs.		
	C.	Did the use of this chemical in compared with the previous re				
		✓ Yes	ur answer is No, skip ah	nead to g. belov	W .	
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique C (up to three per		
		GG-04	D	80		
		d.1.	2.	3a.	3b.	3c.
		e.1.	2.	3a.	3b.	3c.
		f.1.	2.	3a.	3b.	3c.
3yproduct	J	Was byproduct generated for ☐Yes* ✓ No *If yo	ur answer is Yes, skip a			
	h.	Did the byproduct generated for percent or more compared with reduction?				
		☐ Yes ✓ No*	*If your answer is No, s	kip ahead to m	. on Page 3.	
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique C (up to three per	` '	
		i.1.	2.	3a.	3b.	3c.
		j.1.	2.	3a.	3b.	3c.
		k.1.	2.	3a.	3b.	3c.
		N. I.	۷.	ou.	JJ.	5 0.
						_
	I.	Are there more production unit	ts that use this chemica	l?	✓ Yes	☐ No



Toxics Use Report - Form S

Chemical Use Facility-Wide and by Production Units

^	^	^	-
,			1
_	u	u	1

Reporting Year

CLEAN HARBORS ENVIR

Facility Name

34839

DEP Facility ID Number

POLYCYCLIC AROMATIC

Chemical Name

Section 4: Toxics Use by Production Unit (continued)

m. You may add any comments or explanations regarding chemical use and/or byproduct generated in this production unit, chemical use in waste treatment (from Section 3), and non-routine occurrences at your facility (from Section 2).

346 POUNDS PACS IN OIL SENT TO CLEAN HARBORS ENVIRONMENTAL SERVICES, INC. FOR RECLAIM -SENT BACK INTO COMMERCE.

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Important: When filling out forms on the computer, use

only the tab key

c.2 Yes

✓ No

to move your cursor - do not use the return

Massachusetts Department of Environmental Protection **Bureau of Waste Prevention**

Toxics Use Report - Form S

Chemical Use Facility-Wide and by Production Units

2007 Reporting Year **CLEAN HARBORS ENVIR** Facility Name 34839 **DEP Facility ID Number**

LEAD COMPOUNDS

Chemical Name

Section 1: Facility-Wide Use of Listed Chemical

ection 1.1 acmity-vide 03e of Listed Offennical		
1026	LEAD COMPOUNDS	
a. MA DEP CAS #	b. Chemical Name (Dioxin should be in grams, decimal points may be used)	

Facility-wide use of chemical identified in a. Enter the total amount (in POUNDS, except for dioxin) for each applicable category. NOTE: 'Generated as byproduct' (item f.) means all waste containing

0	0
c. Manufactured	d. Processed
180376	180376
e. Otherwise Used	f. Generated As Byproduct
g. Shipped In Or As Product	h. Check here to input Form R or A information to MassDEP
equal the sum of f and g. In other word	e in Section 1 are added together, the sum will in many cases s, lines c, d and e will often form a "materials balance." If
	balance, you must use this section to explain why. Indicate all number of pounds on the appropriate line below (e.g., 4,000
the reasons that apply by entering the n Chemical was held in inventory).	
the reasons that apply by entering the n	number of pounds on the appropriate line below (e.g., 4,000
the reasons that apply by entering the n Chemical was held in inventory).	number of pounds on the appropriate line below (e.g., 4,000
the reasons that apply by entering the n Chemical was held in inventory). a. Chemical Was Recycled On Site	b. Chemical Was Consumed Or Transformed
the reasons that apply by entering the n Chemical was held in inventory). a. Chemical Was Recycled On Site c. Chemical Was Held In Inventory e. Other	b. Chemical Was Consumed Or Transformed

Se	ection 3: Chemicals Used in Waste Treatment Units
a.	Is this chemical used to treat waste or control pollution?
	Yes No* *If your answer is No, please skip ahead to Section 4.
b.	Please enter the amount of the chemical (in pounds) used to treat waste or control pollution.
	Pounds
C.	Did the use of this chemical for waste treatment or pollution control increase or decrease by 10 percent or more compared with the previous reporting year?
	c.1 Yes* No *If your answer is Yes, you may explain in Section 4.m on Page 3.

Are there more chemicals to report? (Use ONLY if ALL chemicals are used

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to treat waste or control pollution).



Toxics Use Report - Form S Chemical Use Facility-Wide and by Production Units

2007	
Reporting	Year
CLEAN	HARBORS ENVIR
Facility Na	ame
34839	
DEP Facil	ity ID Number
LEADC	COMPOUNDS

Chemical Name

	Se	ction 4: Toxics Use by Pi	roduction Unit			
2 a. Production Unit #	b.	Quantity of Chemical Code:				
Use		✓ 1. ≤ 5,000 lbs.	_ 2. > 5,000 ≤ 1	0,000 lbs.	3. > 10,000 lbs. ≤	≤ 100,000 lbs.
		4. > 100,000 lbs. ≤ 500,000	0 lbs.	bs.		
	C.	Did the use of this chemical in compared with the previous rep				
		✓ Yes	ır answer is No, skip ah	ead to g. below.		
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique Co- (up to three per pr		
		GG-01	I	80		
		d.1.	2.	3a.	3b.	3c.
		e.1.	2.	3a.	3b.	3c.
		f.1.	2.	3a.	3b.	3c.
Byproduct	g.	Was byproduct generated for the state of th	ır answer is Yes, skip al	•	·	i unit:
	h.	Did the byproduct generated for percent or more compared with reduction?				
		Yes No*	If your answer is No, sk	cip ahead to m. o	on Page 3.	
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique Co (up to three per pr		
		i.1.	2.	3a.	3b.	3c.
		j.1.	2.	3a.	3b.	3c.
		k.1.	2.	3a.	3b.	3c.
			- -		30.	33.
	l.	Are there more production units	s that use this chemical	?	✓ Yes	□No



Toxics Use Report - Form S

Chemical Use Facility-Wide and by Production Units

2007
Reporting Year
CLEAN HARBORS ENVIR
Facility Name
34839
DEP Facility ID Number

LEAD COMPOUNDS

Chemical Name

Section 4: Toxics Use by Production Unit (continued)

m. You may add any comments or explanations regarding chemical use and/or byproduct generated in this production unit, chemical use in waste treatment (from Section 3), and non-routine occurrences at your facility (from Section 2).

LEAD COMPOUNDS RECEIVED INTO PLANT FROM GENERATOR ARE STABILIZED ON SITE, AND 3153 POUNDS SENT TO CWM CHEMICAL SERVICES LLC, MODEL CITY, NY FOR LANDFILL DISPOSAL. SECTION 4 M LEAD COMPOUNDS RECEIVED INTO PLANT AND 177,224 POUNDS SHIPPED OFF SITE FOR LANDFILL DISPOSAL WITHOUT ANY ON SITE STABILIZATION.

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Toxics Use Report - Form S Chemical Use Facility-Wide and by Production Units

2007
Reporting Year
CLEAN HARBORS ENVIR
Facility Name
34839
DEP Facility ID Number
LEAD COMPOUNDS

Chemical Name

	Se	ction 4: Toxics Use by P	roduction Unit			
003 a. Production Unit #	b.	Quantity of Chemical Code:				
Use		1. ≤ 5,000 lbs.	2. > 5,000 ≤ 1	10,000 lbs.	3. > 10,000 lbs. ≤ 10	00,000 lbs.
		✓ 4. > 100,000 lbs. ≤ 500,000	0 lbs.	bs.		
	C.	Did the use of this chemical in compared with the previous re				ore
		✓ Yes	ur answer is No, skip ah	ead to g. bel	OW.	
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique (up to three p	Code(s) er process code)	
		GG-04	I	80		
		d.1.	2.	3a.	3b. 3c).
		e.1.	2.	3a.	3b. 3c	Э.
		f.1.	2.	За.	3b. 3d	D.
		☐Yes* ✓ No *If you	ur answer is Yes, skip a	head to m. or	n Page 3.	
	h.	Did the byproduct generated for percent or more compared with reduction?	n the previous reporting	year and/or o	did you implement toxics	
		Yes V No*	*If your answer is No, sl	kip ahead to i	m. on Page 3.	
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique (up to three p	Code(s) er process code)	
		i.1.	2.	3a.	3b. 3c	C.
		j.1.	2.	3a.	3b. 3d).
		k.1.	2.	3a.	3b. 3d	D
	I.	Are there more production unit	s that use this chemical	?	✓ Yes	No



Toxics Use Fee Worksheet

2007
Reporting Year
CLEAN HARBORS ENVI

Facility Name

34839

DEP Facility ID Number

Maximum Fee

Important:

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





CLEAN HARBORS ENVIRONMENTAL SERVICES INC				
a. Facility Name				
1 HILL AVE				
b. Facility Site Address				
BRAINTREE	MA	021840000		
c. City	d. State	e. Zip Code		

The amount of your fee depends on the number of "full time employee equivalents" (2,000 work hours per year) at your facility, and the number of toxic substances for which reporting is required (i.e., the number of Form Ss you submit).

Use the following schedule to determine your fee for the **2007** reporting year.

Full Time Employee Equivalents

	" I dil Tillo Employee Equivalente	D 400100	maximum 1 00	
	≥ 10 and < 50≥ 50 and < 100≥ 100 and < 500	\$1,850 \$2,775 \$4,625	\$5,550 \$7,400 \$14,800	
	<u>></u> 500	\$9,250	\$31,450	
Detern	nine your base fee by referring to the 2nd co	lumn above.	1850 f.	_
Enter a	of Form Ss you are filing:		g.	3
Multipl	y LINE g by \$1,100.		3300 h.	D
Add LI	NE f and LINE h.		5150 i.	0
	he amount from LINE i or from the 3rd colur num Fee) WHICHEVER IS LESS	nn of the schedule	515 0	D

Base Fee

Your fee is the amount entered in LINE j. DO NOT SEND YOUR PAYMENT with your toxics use report. DEP will send a bill in the amount owed after receipt of your report. **Payment is DUE 30** days after your receipt of the billing document.



Plan Summary Submittal Selection Form

2007	
Planning `	Year
CLEAN	HARBORS EN
Facility Na	ame
34839	

DEP Facility ID Number

I certify under penalty of law that to the best of my knowledge and belief the following is true:

Select either	1, 2 (a-e) , 3 (a-c) or 4 <u>a</u>	s allowed per 3	310 CMR 50.40, 50.80 and 50.90.	
1 This fa	cility is submitting an En	vironmental M	anagement Systems Progress Report.	
asset(s	s): CT 1 or MORE] Energy] Water Materials that contribute	e to solid waste e TURA list use	ed below threshold amounts	
and repleas SELE 3a	eported at the facility have e select this option as we can be a select this option as we can be a select this facility has no except a selection of the can be a selected as a selected	re either been ell as 3b, and in eptions to Toxicated or reduced all Name, Meth	on Plan Summary Form(s). (If all chemicals used eliminated or reduced below reporting thresholds, ndicate the chemicals below). cs Use Reduction planning requirements. below threshold the following chemicals – nod, and Steps taken. (below)	
_	duction Plan Summary	-	4	
1 CAS#	2 Chemical Name	3 Method* E R	4 By taking the following steps:	
3b.a.1	3b.a.2		3b.a.4	
3b.b.1	3b.b.2	E R	3b.b.4	
3b.c.1	3b.c.2	E R	3b.c.4	
3b.d.1	3b.d.2	E R	3b.d.4	
3b.e.1	3b.e.2	E R	3b.e.4	
3b.f.1	3b.f.2		3b.f.4	
If filing on p	have additional chemica aper, please attach an ac	dditonal sheet	.— . <u> </u>	
4 This fa	icility is scheduled to clos	se:	Date (mm/dd/yyyy)	
I am aware tha	t there are penalties for s	submitting false	e information, including possible fines.	
	•		06/27/2008	
a Signature of	Senior Management Official		b Date (mm/dd/yyyy)	
DAVID S. M	-		MEDINAD@CLEANHARBORS.COM	
c Print Name of Senior Management Official			d E-Mail Address	



TURAPS339

Massachusetts Department of Environmental ProtectionBureau of Waste Prevention – Toxics Use Reduction Act

Plan Summary Form A separate form for each covered toxic is required.

N

2007
Planning Year
CLEAN HARBORS ENVI
Facility Name
34839
MassDEP Facility ID Number

Plan Summary Form • Page 1 of 1

Α.	Facil	lity-Wid	de Data
----	-------	----------	---------

mportant: When filling out orms on the computer, use only the tab key	POLYCYCLIC AROMATIC COMPOUNDS A.1 Chemical Name 1040 A.2 CAS #							
o move your cursor - do not use the return cey.	Two Year Projected Changes (Total lbs.): Use							
tab	A.3 Use							
return	Byproduct A.4 Byproduct Yes – skip to Section C. No – go to Section B.							
	B. Options Considered & Selected to Implement							
	Options Considered							
	PACS ARE PRESENT IN WASTE OIL RECEIVED BY CHBI, WHICH ARE REPACKAGED AND TRANSFERRED OFF SITE FOR RECOVERY. PACS TRANSFERRED OFF-SITE FOR RECOVERY CANNOT BE REDUCED, DUE TO THE NATURE OF THE WAS PROCESSING, TRANSPORTING, AND DISPOSAL BUSINESS. THERE ARE NO KNOW WAYS TO REDUCE PACS SINCE THEY							
	B.2 Options Selected to Implement							
	N/A							
Section C is ptional.	Additional Information							
	You may use the following section to provide more information about your TUR Plans and/or progress.							



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

key.

Massachusetts Department of Environmental ProtectionBureau of Waste Prevention – Toxics Use Reduction Act

Plan Summary Form

A separate form for each covered toxic is required.

2007	
Planning Year	•
CLEAN HA	RBORS ENVI
Facility Name	
34839	

MassDEP Facility ID Number

A. Facility-Wide Data

LEAD COMPOUNDS	
A.1 Chemical Name	
1026	
A.2 CAS #	
	Two Year Projected Changes (Total lbs.):
	0
Use	A.3 Use
Byproduct	0
Бургочист	A.4 Byproduct
A.5 Is this chemical used only in wastewater treatment?	Yes – skip to Section C. No – go to Section B

B. Options Considered & Selected to Implement

B.1 Options Considered

THE MEETING DISCUSSED PREVIOUS TUR PLAN GOALS AND OBJECTIVES, AND WAYS TO REDUCE TOXICS BASED ON CURRENT PRACTICES AT CHBI. THE AMOUNT OF LEAD BEING STABILIZED BY CHBI IS DEPENDENT ON THE AMOUNT OF SOLIDS, SOILS, SLURRIES RECEIVED BY CHBI THAT REQUIRE STABILIZATION PRIOR TO OFF-SITE DISPOSAL. THIS IS

B.2 Options Selected to Implement

N	N/A			

Section C is optional.

C. Additional Information

You may use the following section to provide more information about your TUR Plans and/or progress.

OTHER DISCUSSIONS WAS EVALUATION DIFFERENT BINDING AND ABSORBENT AGENTS USED IN THE STABILIZATION PROCESSES. WHERE THERE MAY BE A COST SAVINGS AVAILABLE, CHANGING AGENTS WOULD NOT REDUCE THE TOTAL AMOUNT OF LEAD HANDLED. IT WAS DETERMINED THAT AS LONG AS CHBI CAREFULLY REVIEWS THE MSDS'S OF ALL THE BINDING AND ABSORBING MATERIAL TO GUARANTEE ADDITIONAL TOXICS ARE NOT INADVERTENTLY ADDED TO THE MATERIAL, THERE ARE LIMITED OPTIONS AVAILABLE TO REDUCE THE TOXICS PROCESSED OR OTHERWISE USED AT THE CHBI FACILITY.





TUR Plan Summary

2007

Planning Year

CLEAN HARBORS ENVIR

Facility Name

34839

DEP Facility ID Number

A. Planner Certification

Based on my independent professional judgment as a Toxics Use Reduction Planner, I certify under penalty of law that the following is true:

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





- (a) I have examined and am familiar with this Toxics Use Reduction Plan;
- (b) the Plan satisfies the requirements of 310 CMR 50.40; and
- (c) the Plan demonstrates a good faith and reasonable effort to identify and evaluate toxics use reduction options.

STUART68

- 1. Signature of Toxics Use Reduction Planner
- 2. Date (mm/dd/yyyy)

STUART PEARSON

3. Print Name of Toxics Use Reduction Planner

SCPEARSON@MACTEC.COM

4. E-Mail Address

5. TUR Planner I.D. Number

B. Management Certification

I certify under penalty of law that the following is true:

- (a) I have personally examined and am familiar with this Toxics Use Reduction Plan;
- (b) I am satisfied that any supporting documentation used in the development of the Plan exists and is consistent with the Plan;
- (c) based on my inquiry of those individuals immediately responsible for the development of this Plan, I believe that the information in the Plan and any supporting documentation used in the development of the Plan is true, accurate, and complete;
- (d) the Plan, to the best of my knowledge and belief, meets the requirements of 310 CMR 50.40; and
- (e) I am aware that there are penalties for submitting false information, including possible fines and imprisonment.

David S. Medina

1. Signature of Senior Management Official

06/27/2008

2. Date (mm/dd/yyyy)

DAVID S. MEDINA

3. Print Name of Senior Management Official

MEDINAD@CLEANHARBORS.COM

4. E-Mail Address