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Username: PODLISNY

Transaction ID: 302947

Document: AQ Source Registration Package

Size of File: 4960.37K

Status of Transaction: Submitted

Date and Time Created: 3/30/2023:3:20:24 PM

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Bureau of Waste Prevention - Air Quality

Source Registration Overview

Create or Amend a Source Registration Forms Package

2009	

Year of Record

1190564

Facility AQ identifier



A. Create a Source Registration Package

 Select existing or new face 	cility:
---	---------

Existing Facilities: To create a complete package for 2009 check box.

check if you added emission units or

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



2. Validate this form:



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

stacks since your last report.

B. Amend a Source Registration

- 1. If you need to correct or add to a previously submitted Source Registration for 2009 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: 57 Emission Units (points) and 8 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).





		?	?	?	?
	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	2008
	BOILER #1-CLEAVER BROOKS- #2 OIL 0.3 PERCENTSULFUR	3	3	AP-1	2008
/	GENERATOR #2-CUMMINS #NT855G2 #2 DIESEL	50	50	AP-1	2008
/	GENERATOR #1-CATERPILLAR 558.5 KW #2 OIL-0.3 PERS	55	55	AP-1	2008
/	2 LENNOX FURNACES SR 20Q5-140/154 0.246 MMBTU/HR	64	64	AP-1	2008
~	THREE DISTILLATION UNITS 710 GAL/HR NOT USED 2008	4	4	AP-2	2008
	2 DRUM CRUSHING LINES	5	5	AP-2	2008
	REPACKAGING SOLVENTS NOT USED IN 2008 BEING CLOSED	61	61	AP-2	2008
/	STACK 1 POINT 1 SEGMENT	1	1	AP-3	2008
	AG TANK A1-9,800 GAL NOT USED IN 2008	6	6	AP-4	2008
/	AG TANK A2-9,800 GAL WASTE STREAM A-21	7	7	AP-4	2008
~	AG TANK A3-9,800 GAL NOT USED IN 2008	8	8	AP-4	2008
/	AG TANK A4- 5,200 GAL WASTE STREAM A-22	9	9	AP-4	2008

Additional units (if any) listed on following pages



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	Emission unit name (from prior submittals)	Facility's ID#	DEP#	AP form	Last update
✓	AG TANK A5- 5,200 GAL OUT OF SERVICE IN 2008	10	10	AP-4	2008
\checkmark	AG TANK A6- 9,000 GAL WASTE STREAM A-23	11	11	AP-4	2008
~	AG TANK A7- 9,000 GAL WASTE STREAM A-23	12	12	AP-4	2008
	AG TANK A8- 5,000 GAL TANK NOT USED IN 2008	13	13	AP-4	2008
/	AG TANK A9- 5,000 GAL WASTE STREAM A21	14	14	AP-4	2008
/	AG TANK A10- 9,800 GAL NOT USED IN 2008	15	15	AP-4	2008
/	AG TANK A11- 5,000 GAL NOT USED IN 2008	16	16	AP-4	2008
~	AG TANK A17B- 750 GAL NOT USED IN 2008	18	18	AP-4	2008
~	AG TANK A22- 2,400 GAL -PCB	23	23	AP-4	2008
~	AG TANK A23- 2,400 GAL - PCB	24	24	AP-4	2008
~	AG TANK A24- 2,400 GAL - PCB	25	25	AP-4	2008
~	AG TANK A25- 1,000 GAL -NOT USED 2008- PCB	26	26	AP-4	2008
/	AG TANK F1- 2,000 GAL -NOT USED 2008-	27	27	AP-4	2008
/	AG TANK F2- 2,000 GAL -NOT USED 2008	28	28	AP-4	2008
~	AG TANK F3-/SS 2,000 GAL -NOT USED 2008	29	29	AP-4	2008
~	AG TANK F4- 2,000 GAL -NOT USED 2008	30	30	AP-4	2008
~	AG TANK F5- 2,000 GAL -NOT UESD 2008- SOLVENT	31	31	AP-4	2008
~	AG TANK F6- 2,000 GAL -NOT UESD 2008- SOLVENT	32	32	AP-4	2008
~	AG TANK F8- 1,500 GAL -NOT USED 2008- SOLVENT	34	34	AP-4	2008
~	AG TANK P1- 3,000 GAL - NOT USED 2008	35	35	AP-4	2008
~	AG TANK P2- 3,000 GAL -NOT USED 2008-	36	36	AP-4	2008
~	AG TANK P3- 3,000 GAL -NOT USED 2008	37	37	AP-4	2008
\checkmark	AG TANK P4- 3,000 GAL -NOT USED 2008	38	38	AP-4	2008
~	AG TANK P5- 3,000 GAL -NOT USED 2008	39	39	AP-4	2008
~	AG TANK P6- 3,000 GAL -NOT USED 2008	40	40	AP-4	2008
~	AG TANK P7- 3,000 GAL -NOT USED 2008	41	41	AP-4	2008
~	AG TANK P8- 3,000 GAL -NOT USED 2008	42	42	AP-4	2008
~	AG TANK P9- 3,000 GAL -NOT USED 2008	43	43	AP-4	2008
✓	AG TANK P10- 3,000 GAL -NOT USED 2008	44	44	AP-4	2008
~	AG TANK P11- 3,000 GAL -NOT USED 2008	45	45	AP-4	2008
~	AG TANK P12- 3,000 GAL -NOT USED 2008	46	46	AP-4	2008
\checkmark	AG TANK P13- 2400 GAL -NOT USED 2008	47	47	AP-4	2008
	404-100-				



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Source Registration Overview Create or Amend a Source Registration Forms Package

	Emission unit name	Facility's ID#	DEP#	AP form	ast date
/	AG TANK P14- 2400 GAL -NOT USED 2008	48	48	AP-4 20	800
	AG TANK A13- 4,000 GAL #2 DIESEL -LOW SULF	51	51	AP-4 20	800
/	AG TANK A12- 6,300 GAL FUEL OIL # 2	52	52	AP-4 20	800
	AG TANK B1- POLYOLEFIN WASTEWATER NO VOCS	53	53	AP-4 20	800
	AG TANK B2- POLYOLEFIN TANK WASTEWATER NO VOCS	54	54	AP-4 20	800
	AG TANK B3- POLYOLEFIN TANKS WASTEWATER NO VOCS	56	56	AP-4 20	800
	AG TANK B4- POLYOLEFIN H WASTEWATER NO VOCS	57	57	AP-4 20	800
	AG TANK B5- POLYHLEFIN H TANKS WASTEWATER NO VOCS	58	58	AP-4 20	800
	AG TANK B6- POLYOLEFIN H TANKS WASTEWATER NO VOCS	59	59	AP-4 20	800
	AG TANK B7- POLYOLEFIN H TANKS WASTEWATER NO VOCS	60	60	AP-4 20	800
	AG TANK B8- POLYOLEFIN H TANKS WASTEWATER NO VOCS	62	62	AP-4 20	800
	AG TANK B9 POLYOLEFIN H TANKS WASTEWATER NO VOCS	63	63	AP-4 20	800
/	STACK #1- INCINERATOR #1-VENT-O-MATIC- NA 2007	1	1	AP-STAC 20	800
	STACK #2- BOILER #2- HURST #30- #2 OIL 0.3 PER. S	2	2	AP-STAC 20	800
	1 STACK BOILER #1-CLEAVER BROOKS- #2 OIL	3	3	AP-STAC 20	800
	THREE DISTILLATION UNITS- NOT USED 2008	4	4	AP-STAC 20	800
	2 DRUM CRUSHING LINES-	5	5	AP-STAC 20	800
	1 STACK GENERATOR (2)- CUMMINS AND CATERPILLAR	7	7	AP-STAC 20	800
	1 STACK-2 FURNACES LENNOX	9	9	AP-STAC 20	800
/	CUT OFF ROOM 2008	10	10	AP-STAC 20	800



BWP AQ AP-SR

Source Registration

2009 Year of Record 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.





. Facility Information						
Facility - the site or works at which the	regulated 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	021840000				
d. City/Town 7813807100	e. State 781380719 3	f. Zip Code				
g. Facility Phone Number	h. Facility Fax					
McParathan -						
Mailing address: ☐ same address as fact 1 HILL AVE	cility address					
a. Facility Mailing Address / PO Box Line 1						
h Facility Mailing Addraga / DO Pay Line 2						
b. Facility Mailing Address / PO Box Line 2 BRAINTREE	MA	021840000				
c. City/Town	d. State	e. Zip Code				
Facility type – check one: ☐ Utility Private ☐ Tribal ☐ Fe	ederal 🗌 State 🔲 Loc	cal Government				
ORIS Facility Code - for large electrical only:	utilities ORIS Facility C	Code				
ID numbers:						
34839	1190564					
a. DEP Account number / FMF Facility #		dentifier – SSEIS ID number				
Location (check box to enter either UTN	M OR Lat/Long) :					
a. UTM coordinates] b. Latitude/Longitude				
	42.130570	70.5804				
c. UTMHorizontal - meters d. UTM Vertical	- meters f. Latitude 42.9	⁰ - 41.2 ⁰ g. Longitude – West 73.5 ⁰ - 69.8 ⁰				

a. UTM coordinates	b. Latitud	e/Longitude
	42.130570	70.5804
c. UTMHorizontal - meters d. UTM Vertical - meters	f. Latitude 42.9 ⁰ - 41.2 ⁰	g. Longitude – West
		73.5° - 69.8°
e. UTM Zone Valid Ranges:		Enter positive values only.



Bureau of Waste Prevention - Air Quality

BWP AQ AP-SR

Source Registration

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Α.	Facility Inform	nation (cont.)			
7.	North American Indu	stry Classification Syst	em (NAICS) 6 digits:		
	562211				
	a.	b.	C.	d.	
8.	Facility description (needed):	what is being produced	I and how it is being p	oroduced at this facility – upda	te as
	CLEAN HARBORS (AT THIS FACILITY.	OF BRAINTREE INC. I	S A HAZARDOUS W	/ASTE TSDF. NO PRODUCT	ION
	L				
Ω	Facility's normal hou	re of appration:			
9.	Facility's normal hou	•		04.7.50	
9.	Facility's normal hou 06:00 AM a. Start time	rs of operation:		nuous - 24 x 7 x 52	
€.	06:00 AM	06:30 PM b. End Time	c. Contir ☑ M ☑ T ☑		
).	06:00 AM a. Start time	06:30 PM b. End Time	<u> </u>		
	06:00 AM a. Start time	b. End Time facility open?	<u> </u>		
	o6:00 AM a. Start time d. Which days is the	b. End Time facility open?	<u> </u>		
10.	o6:00 AM a. Start time d. Which days is the	b. End Time facility open?	— «	W ₽T ₽F □S	
10.	o6:00 AM a. Start time d. Which days is the Number of employee Facility Owner:	o6:30 PM b. End Time facility open? S es: 21	M V T V	W ☑ T ☑ F ☐ S	
10.	o6:00 AM a. Start time d. Which days is the Number of employee Facility Owner: Please contact your CLEAN HARBORS	o6:30 PM b. End Time facility open? S es: 21 □ same address as facility r DEP Regional Office if OF BRAINTREE INC	M V T V	W ☑ T ☑ F ☐ S	
	o6:00 AM a. Start time d. Which days is the Number of employee Facility Owner: Please contact your	o6:30 PM b. End Time facility open? S es: 21 □ same address as facility r DEP Regional Office if OF BRAINTREE INC	M V T V	W ☑ T ☑ F ☐ S	



c. Mailing Address Line 2

BRAINTREE

d. City/Town

MA e. State 021840000

f. Zip Code

USA

g. Country

7813807100h. Owner Phone Number

Extension

7813807193

j. Owner Fax Number

medinad@cleanharbors.com

k. Owner E-mail Address

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





Source Registration

2009 Year of Record 1190564 Facility AQ identifier

Α.	Facility Information (cont.)					
12.		ess as facility addre				
	same address as facility mailing address					
	GERALD	PODLISN				
	a. Facility Contact First Name 1 HILL AVE	Contact Las	t Name			
	b. Mailing Address Line 1					
	2ag / taa. 000 <u>=</u> 0 .					
	c. Mailing Address Line 2					
	BRAINTREE	MA	021840000			
	d. City/Town	e. State	f. Zip Code			
	USA		gerald@cleanharbors.com			
	g. Country 7813807134	h. E-mail Ad	aress 8807193			
	i. Phone Number j. Extens		Number			
2						
ა.	<u>-</u>	same as racility con same address as fa	tact name and address			
	GERALD	PODLISN				
	a. Air emissions contact First Name	Air emission	s contact Last Name			
	1 HILL AVE					
	b. Mailing Address Line 1					
	c. Mailing Address Line 2					
	BRAINTREE	MA	021840000			
	d. City/Town USA	e. State	f. Zip Code gerald@cleanharbors.com			
	g. Country	h. E-mail Ad	-			
	7813807134		8807193			
	i. Phone Number j. Extens		Number			
	Preparer					
	Identification information for preparer of this sul	bmittal: 🗾 🗹	same as facility air emissions contact name and address			
			same as facility contact name and address			
			same address as facility address			
	GERALD	PODLISN	Υ			
	a. Preparer First Name	Preparer Las				
	1 HILL AVE					
	b. Mailing Address Line 1					
	c. Mailing Address Line 2					
	BRAINTREE	MA	021840000			
	d. City/Town	e. State	f. Zip Code			
	USA		gerald@cleanharbors.com			
	g. Country	h. E-mail Ad				
	7813807134		8807193			
	i. Phone Number j. Extens	sion k. Fax	Number			



Bureau of Waste Prevention - Air Quality

BWP AQ AP-SR

Source Registration

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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:

Gerald Podlisny

Signature of Responsible Official 5/3/2010

Date

eDEP enters these fields automatically on submission.

Responsible official – complete all fields below:

GERALD

a. Print First Name

PODLISNY

b. Print Last Name

FACILITY COMPLIANCE MANAGER

c. Title

7813807134

d. Phone Number

podlisny.gerald@cleanharbors.com

e. E-mail Address





Emission Unit - Fuel Utilization Equipment

2009 Year of record 64 DEP EU# (old Point #) 1190564

Facility AQ identifier

Important: When filling out forms the comp use only tab key to move you cursor - d use the re





out forms on the computer, use only the tab key to	1.	Facility identifiers: CLEAN HARBORS OF BRAINTREE			
move your cursor - do not		a. Facility name			
use the return		34839	1190564		
key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number		
tab	2.	Emission unit identifiers:			
		2 LENNOX FURNACES SR 20Q5-140/154 0.246	MMBTU/HR		
return		a. Facility's choice of emission unit name – edit as needed	64		
		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	ovals ? ☑ 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)		6/1/1994			
		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 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:			
		☐ 1. Monthly ☐ 2. Quarterly ☐ 3. Semi-annu	al 🗹 4. Annual 🗹 5. RES		
		(include Operating Permit and Plan Approval reports, but not ex	ceedance 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

2009 Year of record 64 DEP EU# (old Point #) 1190564 Facility AQ identifier

A. Equipment Description (cont.)

?	9.	Equipment	: (?)	EPA Unit T	ype Code (eDEP	only): FURNAC	CE
How to report on combined units?		a. Type: [boiler 🔽	furnace	engine c	other:	
	2			– nergency ge	•		ner" equipment type
		LENNOX				SR20Q5-140)
		b. Manufactu	rer			c. Model numbe	
		0.1230				1	
/hat to do		d. Max input r	rating MMBtu/h	hr (enter "0" if r	not applicable)	e. Number of bu	rners (enter "0" if not applicable)
f data unknown or		f. Type of b	ourner – che	eck one:	☐ rotary	mech. atc	omizer steam atomizer
ot available?					air atomize	er 🗌 traveling	grate
					other:		
					<u> </u>	"other" burner ty	уре
		BECKETT				AFG	
		g. Burner mar 6/1/1995	nufacturer			h. Burner model	number
		i. Burner insta	allation date (r	mm/dd/yyyy)			
			•	,			
<u> </u>	10.	Hours of op 24	peration for	the emissio	n unit: a. ∐ 7	check if continu	iously operated – 24 x 7 x 52 21
<u> </u>		b. Number of	hours per day	,	c. Number of days	per week	d. Number of weeks per year
		e Percent	of total ann	ual operatio	n that occurs in e	each calendar o	marter:
		49.0	0.0	0	51.0	·	-Q3+Q4 must = 100%,
		Q1	Q2	Q3	Q4		was not operated for any quarter
	11.	Ozone sea	ison operati	ion schedule	e – May 1 through	n September 30):
		0	oon operan	ion concadic	0 0	. Coptombol co	0
			son hours per	day	b. Ozone season d	lavs per week	c. Weeks operated in ozone season
		a. 020110 30a	oon nours per	day	b. 020110 3003011 0	ayo per week	o. Weeks operated in ozone season
	12.	Emission re	elease poin	ıt – select or	ne: 🕖 🛭 🖪	ngines click here fo	r instructions:
							•
			ck Release			Physical Stacks	
		fugitiv		norizontal ve		vertical stac	
				downward fa nt less than 1	•	vertical with	rain cap/sleeve
		vertica	ai Stack/vei		TOIL		
		If Non-Stac	k release poin	nt, skip to quest	ion 14.		
	13.	1 1 1 21 1					
				•	applicable) – pic	ck from the list b	pelow:
		9 1 STACI	K-2 FURNA	CES LENN	IOX		
		9 1 STACI	K-2 FURNA k identifier from	ACES LENN m STACK form	NOX – to change stack na	ame use STACK for	



Massachusetts Department of Environmental Protection

Bureau of Waste Prevention - Air Quality

Emission Unit - Fuel Utilization Equipment

A. Equipment Description (cont.)

2009 Year of record 64 DEP EU# (old Point #) 1190564 Facility AQ identifier

		\ /		
?	14. Is there a pollution control device	Is there a pollution control device on this emissions unit?		
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)	
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.)

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

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64
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1190564
Facility AO identifier

		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 ?	(mm/dd/yyyy) (mm/dd/yyyyy) ☐ yes ☐ no ☐ yes ☐ no	(mm/dd/yyyy) (mm/dd/yyyy) ☐ yes ☐ no ☐ yes ☐ no	(mm/dd/yyyy) (mm/dd/yyyy) 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

2009 Year of record 64 DEP EU# (old Point #) 1190564 Facility AQ identifier

B. Fuels and Emissions

		- /0	FURNACES #1(2)-LENNOX SR 20Q5 #2 OIL-
	1.	Fuel Name / Characteristics:	Fuel name
How does eDEF nandle multiple fuels?		Number of fuels for this unit (previous records): 1	1
			DEP Fuel #
	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.
		? When to NOT check this box ?	be removed from the drift in the next report cycle.
		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
			☐ 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:
			FUEL NO 2
			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):	Percent by weight
Note for e: Enter the Maximum Fuel Rate at which the unit can burn fuel (its absolute uncontrolled		e. Maximum hourly fuel rate for all firing burners:	O.0022 Amount 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 no - skip to question 2
normal		g. DEP approval number for restrictions:	EXEMPT
operation rate nor any restricted			Most recent for this fuel
(allowable) rate.		h. Annual use restriction (amount or hours):	19.2720 1000 GALLONS
		For this fuel	Quantity Units 0.0022 1000 GALLONS
		 Short term use restriction (amount or hours): For this fuel 	Quantity Units
			Per: ☐ month ☐ week ☐ day 🗹 hour
			, _
			CAUTION: check your amount vs.units 6.3880 1000 GALLONS
	2.	Annual usage:	a. Amount – year of record b. Units
		Enter "0" if not used in the year of record	7.9222 1000 GALLONS
		·	c. Total annual usage for prior year of record – eDEP only



Read

First

Massachusetts Department of Environmental Protection

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:

Bureau of Waste Prevention - Air Quality

Emission Unit - Fuel Utilization Equipment

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

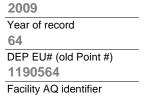
short term:

or regulation:

Short term period (or MMBtu):

Basis - DEP approval number

B. Fuels and Emissions (cont.)



☐ NO2

0.0792

0.0639

0.1927

1000 GALLONS

Tons

Tons

Tons

20

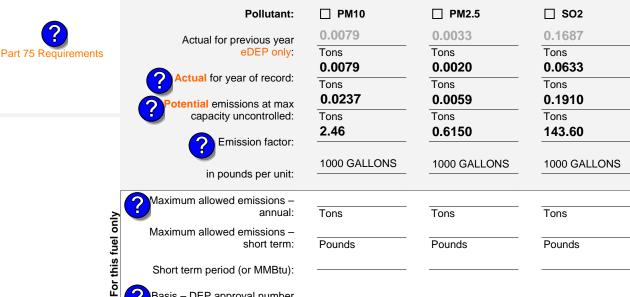
1.1

Tons

.091

Pounds **MONTH**

Pounds



Pounds

other:

EXEMPT

	Pollutant:	□ со	□ voc	□ NH3	specify
Actual for previous year eDEP only:		0.0198 Tons	0.0013 Tons	0.0032 Tons	Tons
	Actual for year of record:	0.0160 Tons	0.0024 Tons	0.0026 Tons	Tons
Potential emissions at max capacity uncontrolled:		0.0482 Tons	0.0073 Tons	0.0077 Tons	Tons
	Emission factor:	5	0.76	0.80	
	in pounds per unit:	1000 GALLONS	1000 GALLONS	1000 GALLONS	
uly	Maximum allowed emissions – annual:	Tons	Tons	Tons	Tons
tuel o	Maximum allowed emissions – short term:	Pounds	Pounds	Pounds	Pounds
For this fuel only	Short term period (or MMBtu):				
	Basis – DEP approval number or regulation:				

Pounds



Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

В.	Fuels	and	Emissions	(cont.)
				()

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Facility AQ identifier

٦.	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	

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.



2009 Year of record 55 DEP EU# (old Point #) 1190564

Important: When filling out forms on the compute use only the tab key to move your cursor - do r use the retui







		nission Unit – Fuel Utilization Equipment	Facility AQ identifier			
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		a. Facility name	4400504			
use the return key.		b. DEP Account number	1190564 c. Facility AQ identifier – SSEIS ID number			
	2		o. I domey he recreated to the financial			
tab	۷.	Emission unit identifiers:	UL O O DEDO			
		GENERATOR #1-CATERPILLAR 558.5 KW #2 O a. Facility's choice of emission unit name – edit as needed	IIL-0.3 PERS			
return		55	55			
		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 Appr	ovals? ☐ yes 🗹 no			
	5.	. If exempt from Plan Approval, indicate reason why (e.g., cite a specific DEP regulation):				
		Reason for exemption				
How to delete						
a unit?	6.	Emission unit installation date and decommission	date:			
(click ?-icon)		5/4/1989 a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable			
6	7		Complete only if the unit was shutdown permanently or			
U	<i>'</i> .	Emission unit replacement:	replaced since the last report.			
		a. Is this unit replacing another emission unit?				
		✓ 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 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	al 🗹 4. Annual 🗹 5. RES			
		(include Operating Permit and Plan Approval reports, but not ex				
		c. Is this unit subject to (check all that apply):				
		☐ NESHAP ☐ NSPS ☐ MACT				



Emission Unit - Fuel Utilization Equipment

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1190564
Facility AO identifier

A. Equipment Description (cont.)

?	9.	Equipmer	nt: 😯	EPA Unit T	ype Code (eDEP	only): RECIPRO	OCATIN	G IC ENGINE
How to report on combined		a. Type:	☐ boiler ☐	furnace	✓ engine □ ot			
units ?	2	If engine,	is this an en	nergency ge	enerator? yes	Describe "oth no	ner" equipm	nent type
		CATERP	ILLAR			 3412DIT		
		b. Manufac				c. Model numbe	r	
2		5.3480				1		"2" !
What to do		d. Max inpu	t rating MMBtu/I	hr (enter "0" if r	not applicable)	e. Number of bu	rners (ente	r "0" if not applicable)
f data Inknown or		f. Type of	burner – che	eck one:	☐ rotary	✓ mech. ato	mizer	steam atomizer
not available?					air atomizer	traveling o	grate	☐ hand fired
					other:			
					_	"other" burner ty	ре	
		CATERP				N/A		
		g. Burner m 6/1/1989	anufacturer			h. Burner model	number	
			stallation date (r	mm/dd/yyyy)				
	10.	Hours of	operation for	the emissio	n unit: a. 🗌 c	heck if continu	ously op	erated – 24 x 7 x 52
6		1			1		12	
U		b. Number of	of hours per day	/	1 c. Number of days p	er week	d. Nu	ımber of weeks per year
		e. Percen	it of total ann	nual operatio	n that occurs in ea	ach calendar q	uarter:	
		50.0	14.0	7.0	29.0	Sum of Q1+Q2+	·Q3+Q4 mı	ust = 100%,
		Q1	Q2	Q3	Q4	or 0% if the unit	was not op	erated for any quarter
	11.	Ozone se	ason operati	ion schedule	e – May 1 through	September 30	:	
		1	•		1	•	2	
		a. Ozone se	eason hours per	day	b. Ozone season da	ys per week	c. We	eks operated in ozone season
	12.	Emission	release poin	nt – select or	ne: 🥎 Eng	gines click here for	rinstruction	ns: (?)
		Non-Sta	ack Release	Points:	F	Physical Stacks	S:	
		☐ fugit		horizontal ve	_	vertical stac		
				downward fa		vertical with		/sleeve
		verti	cal stack/ver	nt less than 1	10ft			
		If Non-Sta	ack release poir	nt, skip to quest	ion 14.			
	13.	Link this u	unit to a phys	sical stack (if	applicable) – pick	from the list b	elow:	
		7 1 STA	CK GENEF	RATOR (2)-	CUMMINS AND C	ATERPILLAR		
		Facility's sta	ack identifier from	m STACK form	- to change stack nar	ne use STACK for	m	
		If the stack	for this unit is no	ot lietad cava a	and exit this form now	and complete a ne	w Stack for	m hefore completing to this form



a control?

Do not leave blank if unknown write 'unknown' or estimate

Leave f, g, h blank if not

applicable.

Massachusetts Department of Environmental Protection

Bureau of Waste Prevention - Air Quality

e. Installation date (mm/dd/yyyy)

f. DEP approval # (most recent)

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

h. Decommission date (mm/dd/yyyy)

Emission Unit - Fuel Utilization Equipment

A. Equipment Description (cont.)

2009 Year of record 55 DEP EU# (old Point #) 1190564 Facility AQ identifier

Installation date (mm/dd/yyyy)

DEP approval # (most recent)

DEP approval date (mm/dd/yyyy)

Decommission date (mm/dd/yyyy)

	\ /	
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
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
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

Installation date (mm/dd/yyyy)

DEP approval # (most recent)

DEP approval date (mm/dd/yyyy)

Decommission date (mm/dd/yyyy)

<u>(</u>	i. Percent overall efficie	ency - enter for all pollutants that the	device was designed to control:
PM 10		0/ O # #	
PM 2.5	% Overall eff.	% Overall eff.	% Overall eff.
F IVI 2.5	% Overall eff.	% Overall eff.	% Overall eff.
SO2			
	% Overall eff.	% Overall eff.	% Overall eff.
CO	% Overall eff.	% Overall eff.	% Overall eff.
VOC	70 Overall ell.	% Overall ell.	% Overall ell.
700	% Overall eff.	% Overall eff.	% Overall eff.
NO2			
NILIO	% Overall eff.	% Overall eff.	% Overall eff.
NH3	% Overall eff.	% Overall eff.	% Overall eff.
НОС	,	70 0 10 0 10	,
	% Overall eff.	% Overall eff.	% Overall eff.
HYC	0/ 0	0/ 0	0/ O
Hg	% Overall eff.	% Overall eff.	% Overall eff.
rig	% Overall eff.	% Overall eff.	% Overall eff.
Pb			
	% Overall eff.	% Overall eff.	% Overall eff.
Other	% Overall eff.	% Overall eff.	% Overall eff.
	70 Overall ell.	% Overall ell.	70 Overall ell.
	Specify "Other"	Specify "Other"	Specify "Other"



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

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

2009

How to delete a monitor?	yes – answer a t	hrough I 🗹 no – skip to s	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)
	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

2009 Year of record 55 DEP EU# (old Point #) 1190564 Facility AQ identifier

B. Fuels and Emissions

	1.	Fuel Name / Characteristics: Number of fuels for this unit (previous records): 1	GENERATOR #1-CATERPILLAR 558.5 KW # Fuel name 1 DEP Fuel #
dow does eDEI andle 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). When to NOT check this box ?	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 cleck this box ?	
		a. Source Classification Code (SCC) (see instructions):	20200102 SC Code (call DEP if SC code will not validate) IC ENGINE- RECIP- DIESEL
		b. Type of fuel – check one:	SCC Code Description – filled by eDEP no.2 no.4 no.6
		Note: The option to have eDEP calculate your emissions is not available if your fuel type is "other".	✓ diesel ☐ coal ☐ natural gas ☐ jet fuel ☐ other - describe:
		c. Sulfur content for oils and coal $(0 - 2.2)$:	Describe "other" fuel .0401 Percent by weight
		d. Ash content for oils and coal (0 -10):	0
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 0.0380 1000 GALLONS Amount Units per hour Enter "0" if unit decommissioned prior to this Year of Record.
uncontrolled design capacity). Do not enter the normal operation rate nor any restricted		f. Do you have fuel or usage restrictions? g. DEP approval number for restrictions:	yes no - skip to question 2 MBR-89-COM-31 Most recent for this fuel
(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	24 HOUR Quantity Units Per: ☐ month ☐ week ✓ day ☐ hour
	2.		CAUTION: check your amount vs.units 0.5300
		Enter "0" if not used in the year of record	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.)

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

short term:

or regulation:

Short term period (or MMBtu):

Basis - DEP approval number

Pounds

MBR-89-COM-31

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



Part 75 Requirements

enter emissions for each specific pollutant. Click the "?" icon for information to help you decide how to use this feature: □ NO2 Pollutant: ☐ PM10 ☐ PM2.5 ☐ SO2 0.0132 0.0132 0.0037 0.1883 Actual for previous year Tons Tons Tons Tons eDEP only: 0.0113 0.0113 0.0105 0.1601 ctual for year of record: Tons Tons Tons Tons 7.0737 7.0737 6.6077 100.5298 otential emissions at max Tons Tons capacity uncontrolled: Tons Tons 42.50 42.50 39.70 604 Emission factor: 1000 GALLONS 1000 GALLONS 1000 GALLONS 1000 GALLONS in pounds per unit: 3.5 Maximum allowed emissions – annual: Tons Tons Tons Tons Maximum allowed emissions -

Pounds

MBR-89-COM-31

Pounds

MBR-89-COM-31

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

For this fuel only

other:

MBR-89-COM-31

Pounds

2009

Year of record

	Pollutant:	□ со	□ voc	□ NH3	specify
	Actual for previous year	0.0406	0.0145	0.0132	
	eDEP only	Tons	Tons	Tons	Tons
	Actual for year of record:	0.0345	0.0131	0.0008	
		Tons	Tons	Tons	Tons
	Potential emissions at max	21.6372	8.2055	0.4827	
capacity u	capacity uncontrolled:	Tons	Tons	Tons	Tons
	Emission factor:	130	49.30	2.90	
	in pounds per unit:	1000 GALLONS	1000 GALLONS	1000 GALLONS	
	Maximum allowed emissions –				
	annual:	Tons	Tons	Tons	Tons
	Maximum allowed emissions – short term:	Pounds	Pounds	Pounds	Pounds
	Short term period (or MMBtu):				
	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 a	nd Emissions	(cont)
D.	rueis ai	110 E11115510115	(COHL.)

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Facility AQ identifier

2.	1274	26.0002
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.



Emission Unit - Fuel Utilization Equipment

2009 Year of record 50 DEP EU# (old Point #) 1190564

Facility AQ identifier

Important: When filling out fo the c use o tab k move curso use





A. Equipment	Description
--------------	-------------

out forms on				
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	
tab	2.	Emission unit identifiers:		
		GENERATOR #2-CUMMINS #NT855G2 #2 DIESE	EL	
return		a. Facility's choice of emission unit name – edit as needed	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:		
	٠.	EXEMPT	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.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)		8/1/1999		
		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	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 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		



BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

2009
Year of record
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1190564
Facility AO identifier

A. Equipment Description (cont.)

9.	Equipment:		EPA Unit	Type Code (el	DEP c	only): RECIPROCATI	NG IC ENGINE
	a. Type:	l boiler 🗆] furnace	✓ engine	□ oth	ner	
	_		_	•		Describe "other" equip	pment type
?	if engine, is	this an em	nergency g	jenerator?	yes	⊻ no	
						125-DGEA	
		er				c. Model number	
		ating MMBtu/h	nr (enter "0" if	not applicable)	?	e. Number of burners (er	nter "0" if not applicable)
	f. Type of bu	urner – che	eck one:	notary		mech. atomizer	steam atomizer
				☐ air ato	mizer	☐ traveling grate	☐ hand fired
				□ otner.		"other" burner type	
	g. Burner manu	ufacturer				h. Burner model number	
	i. Burner install	lation date (m	nm/dd/vvvv)				
		`	,,,,,				
	1 b. Number of h	nours per day		1 c. Number of	-l	10	
	e. Percent c						Number of weeks per year
	e. Percent c			ion that occurs		ch calendar quarter:	
		of total annu	ual operati				must = 100%,
11.	20.0 Q1	of total annual 40.0	ual operati 10.0 Q3	ion that occurs 30.0 Q4	s in ea	Sum of Q1+Q2+Q3+Q4 or 0% if the unit was not	must = 100%,
11.	20.0 Q1	of total annual 40.0	ual operati 10.0 Q3	ion that occurs 30.0 Q4	s in ea	nch calendar quarter: Sum of Q1+Q2+Q3+Q4	must = 100%,
11.	20.0 Q1	of total annual 40.0 Q2 son operation	ual operati 10.0 Q3 on schedu	ion that occurs 30.0 Q4	s in ea	Sum of Q1+Q2+Q3+Q4 or 0% if the unit was not September 30:	must = 100%,
11.	20.0 Q1 Ozone seas	of total annual 40.0 Q2 son operation	ual operati 10.0 Q3 on schedu	ion that occurs $\frac{30.0}{Q4}$ le – May 1 thr	s in ea	Sum of Q1+Q2+Q3+Q4 or 0% if the unit was not September 30:	must = 100%, operated for any quarter
	20.0 Q1 Ozone seas	of total annual 40.0 Q2 son operations on hours per o	ual operati 10.0 Q3 on schedul	$\frac{30.0}{Q4}$ $= \frac{1}{b. Ozone sea}$	ough	Sum of Q1+Q2+Q3+Q4 or 0% if the unit was not September 30:	must = 100%, operated for any quarter Veeks operated in ozone season
	20.0 Q1 Ozone seas 1 a. Ozone seas Emission re	of total annual 40.0 Q2 son operations on hours per o	ual operati 10.0 Q3 on schedul day t – select o	$\frac{30.0}{Q4}$ $= \frac{1}{b. Ozone sea}$	s in ea	Sum of Q1+Q2+Q3+Q4 or 0% if the unit was not September 30: ys per week A c. V	must = 100%, operated for any quarter Veeks operated in ozone season
	20.0 Q1 Ozone seas 1 a. Ozone seas Emission re Non-Stacl fugitive engine	of total annual 40.0 Q2 son operations on hours per content of the Release Fig. 1. The	ual operati 10.0 Q3 on schedul day t – select of Points: porizontal voluments of	ion that occurs 30.0 Q4 Ile – May 1 thr 1 b. Ozone sea one: ?	ough son day	Sum of Q1+Q2+Q3+Q4 or 0% if the unit was not September 30: ys per week description:	must = 100%, operated for any quarter Veeks operated in ozone season ions:
	20.0 Q1 Ozone seas 1 a. Ozone seas Emission re Non-Stacl	of total annual 40.0 Q2 son operations on hours per of the Release point k Release Fermion hours per of the exh. exh. d	ual operati 10.0 Q3 on schedul day t – select of Points: porizontal velownward for the select than	ion that occurs 30.0 Q4 Ile – May 1 thr b. Ozone sea one: ? vent facing vent 10ft	ough son day	Sum of Q1+Q2+Q3+Q4 or 0% if the unit was not September 30: September 30: September 30: September 30: September 30: Varies click here for instruct shysical Stacks: Vertical stack	must = 100%, operated for any quarter Veeks operated in ozone season ions:
12.	20.0 Q1 Ozone sease 1 a. Ozone sease Emission re Non-Stack fugitive engine vertical	of total annual 40.0 Q2 son operations on hours per of the ease point where the ease point of the ease	ual operati 10.0 Q3 on schedul day t – select of the se	ion that occurs 30.0 Q4 Ile – May 1 thr 1 b. Ozone sea one: ? vent facing vent 10ft stion 14.	s in ear	Sum of Q1+Q2+Q3+Q4 or 0% if the unit was not September 30: September 30: September 30: September 30: September 30: Varies click here for instruct shysical Stacks: Vertical stack	must = 100%, operated for any quarter Veeks operated in ozone season ions:
12.	20.0 Q1 Ozone seas 1 a. Ozone seas Emission re Non-Stacl fugitive engine vertica If Non-Stack Link this unit 7 1 STACK	of total annual 40.0 Q2 son operations on hours per of the lease point with the lease point of the lease po	ual operati 10.0 Q3 on schedul day t – select of Points: flownward fit less than t, skip to questical stack (ion that occurs 30.0 Q4 Ile - May 1 thr 1 b. Ozone sea one: ? vent facing vent 10ft stion 14. (if applicable) - CUMMINS A	enger ough and son day	Sum of Q1+Q2+Q3+Q4 or 0% if the unit was not September 30: ys per week c. V ines click here for instruct chysical Stacks: vertical stack vertical with rain ca	must = 100%, operated for any quarter Veeks operated in ozone season ions:
	?	a. Type: If engine, is CUMMINGS b. Manufacture 1.6880 d. Max input ra f. Type of be g. Burner manual i. Burner instal	a. Type: boiler If engine, is this an em CUMMINGS b. Manufacturer 1.6880 d. Max input rating MMBtu/r f. Type of burner – che g. Burner manufacturer i. Burner installation date (n	a. Type: boiler furnace If engine, is this an emergency of CUMMINGS b. Manufacturer 1.6880 d. Max input rating MMBtu/hr (enter "0" if f. Type of burner – check one: g. Burner manufacturer i. Burner installation date (mm/dd/yyyy) 10. Hours of operation for the emission in the em	a. Type: boiler furnace engine If engine, is this an emergency generator? CUMMINGS b. Manufacturer 1.6880 d. Max input rating MMBtu/hr (enter "0" if not applicable) f. Type of burner – check one: rotary air ato other: g. Burner manufacturer i. Burner installation date (mm/dd/yyyy) 10. Hours of operation for the emission unit: a 1	a. Type: boiler furnace engine oth control of the engine, is this an emergency generator? yes CUMMINGS b. Manufacturer 1.6880 d. Max input rating MMBtu/hr (enter "0" if not applicable) f. Type of burner – check one: rotary air atomizer other: g. Burner manufacturer i. Burner installation date (mm/dd/yyyy)	a. Type: boiler furnace engine other: If engine, is this an emergency generator? yes on no CUMMINGS b. Manufacturer 1.6880 d. Max input rating MMBtu/hr (enter "0" if not applicable) f. Type of burner – check one: rotary mech. atomizer traveling grate other: g. Burner manufacturer i. Burner installation date (mm/dd/yyyyy) 10. Hours of operation for the emission unit: a. check if continuously of the continuously of



a control?

Do not leave blank if unknown write 'unknown' or estimate

Leave f, g, h blank if not applicable.

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Emission Unit - Fuel Utilization Equipment

A. Equipment Description (cont.)

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14. Is there a pollution control devi	ce on this emissions unit?	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
а. Туре	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) 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"



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Emission Unit - Fuel Utilization Equipment

A. Equipment Description (cont.)

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Facility AQ identifier

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

How to delete a monitor?	yes – answer a tl	nrough I 🗹 no – skip to se	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:c. Model number:	Describe "other"	Describe "other"	Describe "other"
	d. Monitor ID #: e. Installation date:	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.	f. DEP approval #: g. DEP approval date: h. Decommission date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
	i. Recorder ?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

2009 Year of record 50 DEP EU# (old Point #) 1190564 Facility AQ identifier

B. Fuels and Fmissions

		. I ucis and Emissions	
	1.	Fuel Name / Characteristics: Number of fuels for this unit (previous records): 1	GENERATOR #2-CUMMINS #NT855G2- #2 OI Fuel name 1 DEP Fuel #
low does eDEF andle 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):	20200102 SC Code (call DEP if SC code will not validate) IC ENGINE- RECIP- DIESEL
		b. Type of fuel – check one:	SCC Code Description – filled by eDEP no.2 no.4 no.6
		Note: The option to have eDEP calculate your emissions is not available if your fuel type is "other".	✓ diesel ☐ coal ☐ natural gas ☐ jet fuel ☐ other - describe:
		c. Sulfur content for oils and coal $(0 - 2.2)$:	Describe "other" fuel .138 Percent by weight
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 fuel (its absolute		e. Maximum hourly fuel rate for all firing burners:	0.01201000 GALLONSAmountUnits per hourEnter "0" if unit decommissioned prior to this Year of Record.
uncontrolled design capacity). Do not enter the normal operation rate nor any		f. Do you have fuel or usage restrictions? g. DEP approval number for restrictions:	yes no - skip to question 2 EXEMPT 7.02 Most recent for this fuel
restricted (allowable) rate.		h. Annual use restriction (amount or hours): For this fuel	300 HOUR Units
		Short term use restriction (amount or hours): For this fuel	Quantity DAY Units Per: □ month □ week
	2.	Annual usage: Enter "0" if not used in the year of record	CAUTION: check your amount vs.units 0.1200
			c. Total annual usage for prior year of record – eDEP only



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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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Pollutant:	□ PM10	☐ PM2.5	☐ SO2	□ NO2
Actual for previous year	0.0031	0.0037	0.0009	0.0435
eDEP only:	Tons	Tons	Tons	Tons
	0.0026	0.0026	0.0024	0.0362
Actual for year of record:	Tons	Tons	Tons	Tons
Potential emissions at max	2.2338	2.2338	2.0866	31.7462
capacity uncontrolled:	Tons	Tons	Tons	Tons
Emission factor:	42.50	42.50	39.70	604
in pounds per unit:	1000 GALLONS	1000 GALLONS	1000 GALLONS	1000 GALLONS
Maximum allowed emissions –				
annual:	Tons	Tons	Tons	Tons
Maximum allowed emissions – short term:	Pounds	Pounds	Pounds	Pounds
Short term period (or MMBtu):				
Basis – DEP approval number or regulation:	EXEMPT	EXEMPT	EXEMPT	EXEMPT

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	0.0094	0.0034	0.0037	
	eDEP only	Tons	Tons	Tons	Tons
	A storal factors of the cond	0.0078	0.0030	0.0002	
	Actual for year of record:	Tons	Tons	Tons	Tons
	Potential emissions at max	6.8328	2.5912	0.1524	
	capacity uncontrolled:	Tons	Tons	Tons	Tons
	Emission factor:	130	49.30	2.90	
	in pounds per unit:	1000 GALLONS	1000 GALLONS	1000 GALLONS	
	Maximum allowed emissions –				_
奆	annual:	Tons	Tons	Tons	Tons
For this fuel only	Maximum allowed emissions – short term:	Pounds	Pounds	Pounds	Pounds
this	Short term period (or MMBtu):				
Fo	Basis – DEP approval number or regulation:	EXEMPT	EXEMPT		



Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

В.	Fuels and	Emissions	(cont)
D.	i ucis allu		(COLIL.)

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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

2009 Year of record 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 no use the return





A. Equipment Description

out forms on 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:		
		BOILER #1-CLEAVER BROOKS- #2 OIL 0.3 PER	CENTSULFUR	
return		a. Facility's choice of emission unit name – edit as needed	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	
	3.	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)	
	4.	Is this unit exempt under 310 CMR 7.02 Plan Appr	rovals? 🗌 yes 🗹 no	
	5.	If exempt from Plan Approval, indicate reason why	(e.g., cite a specific DEP regulation):	
How to		Reason for exemption		
delete a unit?	6.	Emission unit installation date and decommission date:		
(click ?-icon)		9/1/1986		
		a. Installation date – estimate if unknown (mm/dd/yyyy)	 b. Decommission date (mm/dd/yyyy) – if applicable Complete only if the unit was shutdown permanently or 	
?	7.	Emission unit replacement:	replaced since the last report.	
		a. Is this unit replacing another emission unit?		
		✓ no	imber 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	al 🗹 4. Annual 🗹 5. RES	
		(include Operating Permit and Plan Approval reports, but not ex	cceedance reporting)	
		c. Is this unit subject to (check all that apply):		
		☐ NESHAP ☐ NSPS ☐ MACT		



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Emission Unit - Fuel Utilization Equipment

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A. Equipment Description (cont.)



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BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

A. Equipment Description (cont.)

Year of record
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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	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)	
applicable.	g. DEP approval date (mm/dd/yyyy)	DEP approval date (mm/dd/yyyy)	DEP approval date (mm/dd/yyyy)	
L	h. Decommission date (mm/dd/yyyy)	Decommission date (mm/dd/yyyy)	Decommission date (mm/dd/yyyy)	
	i. Percent overall efficiency - en	ter 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.	
СО	% 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.	

% Overall eff.

Specify "Other"

Other

% Overall eff.

Specify "Other"

% Overall eff.

Specify "Other"



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Emission Unit - Fuel Utilization Equipment

A. Equipment Description (cont.)

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2009

?
How to delete
a monitor?

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

How to delete a monitor?	☐ 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	b. Manufacturer:	Describe "other"	Describe "other"	Describe "other"		
estimate	c. Model number:					
	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 blank if not applicable.	g. DEP approval date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)		
аррисавіе.	h. Decommission date: i. Recorder ?	(mm/dd/yyyy) ☐ yes ☐ no	(mm/dd/yyyy)	(mm/dd/yyyy) ☐ yes ☐ no		
	j. Audible alarm ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no		
<u> </u>	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"		



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Emission Unit - Fuel Utilization Equipment

2009 Year of record DEP EU# (old Point #) 1190564 Facility AQ identifier

B. Fuels and Emissions

	_			
	4	First Name / Ohamantaminting	BOILER #1-CLEAVER BROOKS #2 OIL-0.3	3 PE
	1.	Fuel Name / Characteristics:	Fuel name	
		Number of fuels for this unit (previous records): 1	1	
			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 the fuel in this unit permanently. You must still report this year of record even if amount is "0" – the fuel was be removed from the unit in the next report cycle.	for
		When to NOT check this box?		
			40000504	
		a. Source Classification Code (SCC) (see instructions):	SC Code (call DEP if SC code will not validate) DIST.OIL- GRADE NO.1 OR NO.2 OIL	
			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	
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 0.0430	cord.
uncontrolled design		f Do you have fuel or years restrictions?		
capacity). Do not enter the		f. Do you have fuel or usage restrictions?	yes no - skip to question 2	
normal	g. DEP approval number for restrictions:		MBR-95-RES-047	
operation rate nor any restricted			Most recent for this fuel	
(allowable) rate.		h. Annual use restriction (amount or hours):	376680 GALLONS	
		For this fuel	Quantity Units	
		i. Short term use restriction (amount or hours):	31390 GALLONS	
		For this fuel	Quantity Units	
			Per:	
			CAUTION: check your amount vs.units	
	2.	Annual usage:	7.4000 1000 GALLONS	
		-	a. Amount – year of record b. Units	
		Enter "0" if not used in the year of record	.32 1000 GALLONS	alv.



Read

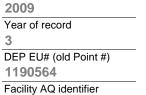
First

Massachusetts Department of Environmental Protection

Bureau of Waste Prevention - Air Quality

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

Emission Unit - Fuel Utilization Equipment **B. Fuels and Emissions** (cont.)





Pollutant:	☐ PM10	☐ PM2.5	☐ SO2	□ NO2
Actual for previous year	0.0003	0.0001	0.01	0.0032
eDEP only:	Tons 0.0037	Tons 0.0009	Tons 0.0725	Tons 0.0888
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
2 modern ractors	1000 GALLONS	1000 GALLONS	1000 GALLONS	1000 CALLON
in pounds per unit:	1000 GALLONS	1000 GALLONS	1000 GALLONS	1000 GALLON
Maximum allowed emissions –	Total	Total	T	T
annual:	Tons	Tons	Tons	Tons
Maximum allowed emissions – short term:	Pounds	Pounds	Pounds	Pounds
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
				other:
Pollutant:	□ со	□ voc	□ NH3	specify
Actual for previous year	0.0008	0.0001	0.0001	
eDEP only:	Tons 0.0185	Tons 0.0007	Tons 0.0030	Tons
Actual for year of record:	Tons	Tons	Tons	Tons
	0.9417	0.0377	0.1507	
Potential emissions at max		0.00.		_
Potential emissions at max capacity uncontrolled:	Tons	Tons	Tons	Tons
	Tons 5		Tons 0.80	Ions
capacity uncontrolled:		Tons		Tons
capacity uncontrolled: Emission factor: in pounds per unit: Maximum allowed emissions —	1000 GALLONS	Tons 0.20 1000 GALLONS	0.80 1000 GALLONS	
capacity uncontrolled: Emission factor: in pounds per unit: Maximum allowed emissions – annual:	5	Tons 0.20	0.80	Tons
capacity uncontrolled: Emission factor: in pounds per unit: Maximum allowed emissions —	1000 GALLONS	Tons 0.20 1000 GALLONS	0.80 1000 GALLONS	
capacity uncontrolled: Emission factor: in pounds per unit: Maximum allowed emissions – annual: Maximum allowed emissions –	1000 GALLONS Tons	Tons 0.20 1000 GALLONS Tons	0.80 1000 GALLONS Tons	Tons

or regulation:



Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

В.	Fuels	and	Emissions	(cont)
┏.	i ucio	ana		1 GOI IL. 1

2009
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1190564
Facility AQ identifier

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

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

2009 Year of record DEP EU# (old Point #) 1190564

Facility AQ identifier

Important: When filling out forms on the computer, use only the tab key to move your 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 OI	L-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 Appro	ovals? ☑ 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 Reason for exemption					
6.	Emission unit installation date and decommission date:					
,	5/1/2003					
	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	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 requir	rements 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 (include Operating Permit and Plan Approval reports, but not exceed the control of the control	-				
	c. Is this unit subject to (check all that apply):					
	☐ NESHAP ☐ NSPS ☐ MACT					



Massachusetts Department of Environmental ProtectionBureau of Waste Prevention – Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

2009
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2
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

	9.	Equipment:		EPA Unit T	ype Code (eDEP o	only): BUILER	
How to report on combined		a. Type: 🔽	boiler [furnace	engine oth	ner:	
inits?		If engine, is				Describe "other" equipr	ment type
	3	,	uns an en	lergency ge	enerator? 🔲 yes		
		HURST				4VT-50BHP	
		b. Manufacture1	; Γ			c. Model number 1	
What to do		d. Max input rat	ting MMBtu/h	ır (enter "0" if ı	not applicable)	e. Number of burners (ente	er "0" if not applicable)
data nknown or		f. Type of bu	ırner – che	ck one:	☐ rotary	✓ mech. atomizer	steam atomizer
ot available?					air atomizer	☐ traveling grate	☐ hand fired
					other:		
						"other" burner type	
		HURST				30	
		g. Burner manu 5/1/2003	ıtacturer			h. Burner model number	
		i. Burner installa	ation date (n	nm/dd/yyyy)			
?		b. Number of ho	ours per day		7 c. Number of days pe	heck if continuously oper week $\frac{24}{\text{d. N}}$	umber of weeks per year
		97.4	1.1	0.4	1.1	0	
						Sum of Q1+Q2+Q3+Q4 m	
		Q1	Q2	Q3	Q4	or 0% if the unit was not o	
	11.				Q4 e – May 1 through	or 0% if the unit was not o	
	11.					or 0% if the unit was not o	
	11.	Ozone seas	on operati	on schedule		or 0% if the unit was not on September 30:	
		Ozone seaso	on operation	on schedule	e – May 1 through 1 b. Ozone season day	or 0% if the unit was not on September 30:	perated for any quarter eeks operated in ozone season
		Ozone seaso	on operation hours per	on schedule day t – select or	e – May 1 through 1 b. Ozone season day ne: Page 1	September 30: ys per week or 0% if the unit was not or 0% if the uni	eeks operated in ozone season
		Ozone seaso 2 a. Ozone seaso Emission rel Non-Stack fugitive engine	lease point Release	on schedule day t – select or	e – May 1 through 1 b. Ozone season day ne: Pent acing vent	September 30: ys per week times click here for instruction	eeks operated in ozone season
	12.	Ozone seaso 2 a. Ozone seaso Emission rel Non-Stack fugitive engine vertical	lease point Release hexh. d	on schedule day t – select or Points: norizontal ver downward faut less than t, skip to ques	e – May 1 through 1 b. Ozone season day ne: Pent acing vent 10ft tion 14.	September 30: September 4: Septe	peerated for any quarter eeks operated in ozone season ns:
	12.	Ozone seaso 2 a. Ozone seaso Emission rel Non-Stack fugitive engine vertical If Non-Stack Link this unit	lease point Release e	on schedule day t – select or Points: norizontal ver downward faut less than t, skip to ques ical stack (i	e – May 1 through 1 b. Ozone season day ne: Pent acing vent 10ft tion 14. f applicable) – pick	September 30: September 30: To We will be a september 30: September 30: To We will be a s	peerated for any quarter eeks operated in ozone season ns:
	12.	Ozone seaso 2 a. Ozone seaso Emission rel Non-Stack fugitive engine vertical If Non-Stack Link this unit STACK #2	lease point Release exh.	on schedule day t – select or Points: norizontal velownward fat less than t, skip to ques ical stack (if	e – May 1 through 1 b. Ozone season day ne: Pent acing vent 10ft tion 14.	September 30: September 30: To We sper week Signer wee	peerated for any quarter eeks operated in ozone season ns:



Bureau of Waste Prevention - Air Quality

BWP AQ AP-1

Emission Unit - Fuel Utilization Equipment

A. Equipment Description (cont.)

Year of record

DEP EU# (old Point #)

1190564

Facility AQ identifier

than 3 air pollution control this unit. eDEP will add a page of control devices a though i page of control devices a	nother
Air pollution control device 1 Air pollution control device 2 Air pollution control	device 3
a. Type Type	
Do not leave blank – Manufacturer Manufacturer Manufacturer	
if unknown write 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	ce
e. Installation date (mm/dd/yyyy) Installation date (mm/dd/yyyy) Installation date (mm/dd/yyyy)	/уууу)
The description of the descripti	ecent)
blank if not applicable. g. DEP approval date (mm/dd/yyyy) DEP approval date (mm/dd/yyyy) DEP approval date (mm/dd/yyyy)	/dd/yyyy)
h. Decommission date (mm/dd/yyyy) Decommission date (mm/dd/yyyy) Decommission date (mm/dd/yyyy)	n/dd/yyyy)
? i. Percent overall efficiency - enter for all pollutants that the device was designed to control	:
PM 10	
PM 2.5 % Overall eff. % Overall eff. % Overall eff. % Overall eff.	
SO2 White the second	
CO White the control of the contr	
VOC	
NO2 We observe the second of	
NH3	
HOC Woverall eff. Woverall eff. Woverall eff. Woverall eff.	
HYC	
Hg % Overall eff.	
Pb	

% Overall eff.

Specify "Other"

Other

% Overall eff.

Specify "Other"

% Overall eff.

Specify "Other"



Massachusetts Department of Environmental Protection 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?

2009
Year of record
2
DEP EU# (old Point #)
1190564
Facility AQ identifier

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: c. Model number:	Describe "other"	Describe "other"	Describe "other"
	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 blank if not applicable.	g. DEP approval date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
(h. Decommission date: i. Recorder ?	(mm/dd/yyyy) ☐ yes ☐ no	(mm/dd/yyyy)	(mm/dd/yyyy) yes no
	j. Audible alarm ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
7	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

2009 Year of record DEP EU# (old Point #) 1190564 Facility AQ identifier

B. Fuels and Emissions

			DOILED #2 HIDST #20	. #2 OII O 2 CIII EII	
	1.	Fuel Name / Characteristics:	BOILER #2-HURST #30 Fuel name) - #2 OIL-0.3 SULFU	
		Number of fuels for this unit (previous records): 1	1		
		,	DEP Fuel #		
How does eDEF andle 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). When to NOT check this box?	fuel in this unit permanent	ox if you stopped using this thy. You must still report for amount is "0" – the fuel will in the next report cycle.	
		When to not check this box ?			
		a Source Classification Code (SCC)	10200501		
		a. Source Classification Code (SCC) (see instructions):	SC Code (call DEP if SC code DIST.OIL- GRADE NO.1		
			SCC Code Description - filled	by eDEP	
		b. Type of fuel – check one:	☑ no.2	☐ 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 - de	escribe:	
		c. Sulfur content for oils and coal $(0 - 2.2)$:	Describe "other" fuel .138		
			Percent by weight		
Note for e:		d. Ash content for oils and coal (0 -10):	Percent by weight		
Maximum Fuel Rate at which the unit can burn fuel (its absolute uncontrolled		e. Maximum hourly fuel rate for all firing burners:	O.0110 Amount Enter "0" if unit decommissioned	1000 GALLONS Units per hour d prior to this Year of Record.	
design capacity). Do		f. Do you have fuel or usage restrictions?	yes no - skip to c	question 2	
not enter the normal		g. DEP approval number for restrictions:	EXEMPT		
operation rate nor any restricted			Most recent for this fuel		
(allowable) rate.		h. Annual use restriction (amount or hours):	91980	GALLONS	
		For this fuel	Quantity	Units	
		 Short term use restriction (amount or hours): For this fuel 	9271 Quantity	GALLONS Units	
			Per: month week	day hour	
			CAUTION: check your amount v	vs.units	
	_		12.3680	1000 GALLONS	
	2.	Annual usage:	a. Amount – year of record	b. Units	
		Enter "0" if not used in the year of record		GALLONS	
			 c. Total annual usage for prior y 	year of record – eDEP only	



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:

2009 Year of record DEP EU# (old Point #) 1190564 Facility AQ identifier



Part 75 Requirements

☐ NO2 Pollutant: ☐ PM10 ☐ PM2.5 ☐ SO2 0.02 0.01 0.42 0.20 Actual for previous year Tons Tons Tons Tons eDEP only: 0.0062 0.0015 0.1212 0.1484 ctual for year of record: Tons Tons Tons Tons 0.0482 0.0120 0.9441 1.1563 otential emissions at max Tons capacity uncontrolled: Tons Tons Tons 0.25 142 24 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: Pollutant: □ VOC ☐ NH3 □ co specify 0.05 0.0033 0.01 Actual for previous year Tons Tons Tons Tons eDEP only: 0.0309 0.0012 0.0049 Actual for year of record: Tons Tons Tons Tons 0.2409 0.0096 0.0385 Potential emissions at max Tons capacity uncontrolled: Tons Tons Tons 5 0.20 0.80 Emission factor: 1000 GALLONS 1000 GALLONS 1000 GALLONS in pounds per unit: Maximum allowed emissions -Tons Tons Tons Tons annual: For this fuel only Maximum allowed emissions short term: **Pounds Pounds** Pounds Pounds Short term period (or MMBtu): **EXEMPT EXEMPT** 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.)

2009
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2
DEP EU# (old Point #)
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Facility AQ identifier

?

7.8820	10.3592
a. Typical day VOC emissions – pounds p	er 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

BWP AQ AP-2

Emission Unit – Process Description

2009 Year of record

1190564

61

DEP EU# (old Point #)

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 key.

A. Emission Unit – Process Description

on uter,		From the title of the con-			
he	1.	Facility identifiers:			
		CLEAN HARBORS OF BRAINTREE			
r o not		a. Facility name			
turn		34839	1190564		
		b. DEP Account number	c. Facility AQ identifier - SSEIS ID number		
	2.	Emission unit identifiers:			
		REPACKAGING SOLVENTS DECOMMISSIONED 08/09			
		a. Facility's choice of emission unit name – edit as needed			
		61	61		
		b. Facility's emission unit number / code - edit as needed	c. DEP emissions unit # (old SSEIS Point #)		
2					
		d. Combined Units – enter number of individual units			
?	3.	DEP approvals – leave blank if not applicable:			
		MBR-88-IND-229	11/9/1988		
		a. Most recent approval number	b. DEP approval date (mm/dd/yyyy)		
	4.	Is this unit exempt under 310 CMR 7.02 Plan Appr	ovals ?		
	5.	If exempt from Plan Approval, indicate reason why	(e.g., cite a specific DEP regulation):		



6. Equipment manufacturer and model number and type:

N/A

N/A

a. Manufacturer

Reason for exemption

b. Model number

DRUMS AND BULK TANKERS FOR PACKAGING SOLVENTS



c. Equipment Type

d. EPA Unit Type Code: ROOF VENTS/BUILDING VENTS

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

7. Emission unit installation and decommission dates:

1/1/1986

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

8/7/2009

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

2009
Year of record
61
DEP EU# (old Point #)
1190564
Facility AO identifier

8.	Emission unit replace	cement:			
	a. Is this unit replac	ing another er	mission unit?		
	☑ no □ yes	enter DEP'	s emissions u	nit number for the ur	nit being replaced below:
	DEP's emission unit nu	mber and facility	unit name		
9.	Additional state rep	orting requirer	ments:		
	 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 MACT				
10.	. Hours of operation	for the emissic	on unit: a. [check if continuou	ısly operated – 24 x 7 x 52
9	0		0	ys per week	d. Number of weeks per year
		•		n each calendar qua	
	$\frac{0}{Q1}$ $\frac{0}{Q2}$	0 Q3	0 Q4	Sum of Q1+Q2+Q3 (or 0% if the unit w	3+Q4 must = 100% as not operated for any quarter)
11.	. Ozone season sche	edule – May 1	through Septe	mber 30:	
11.		•			
11.	Ozone season sche	•			
		per day	0 b. Ozone season		
	a. Ozone season hours p	per day point – select o	0 b. Ozone season		
	a. Ozone season hours p	per day point – select o se Points: horizontal ve downward fa	b. Ozone seasor	n days per week	C. Weeks operated in ozone season
12.	o a. Ozone season hours p Emission release po Non-Stack Release fugitive gooseneck vertical stack/v If Non-Stack release p	per day per	b. Ozone seasor one: ent acing vent 10ft tion 14.	Physical Stacks: vertical stack vertical with ra	c. Weeks operated in ozone season
12.	a. Ozone season hours part of a color of a c	per day point – select of se Points: horizontal very downward farent less than repoint, skip to quest hysical stack (if	b. Ozone seasor one: ent acing vent 10ft tion 14. f applicable) –	Physical Stacks: vertical stack vertical with ra	c. Weeks operated in ozone season
12.	a. Ozone season hours part of a color of a c	per day point – select of se Points: horizontal verilled downward farent less than point, skip to quest hysical stack (if the NOT U	b. Ozone seasor one: ent acing vent 10ft tion 14. f applicable) –	Physical Stacks: vertical stack vertical with ra	c. Weeks operated in ozone season ain cap/sleeve

Bureau of Waste Prevention - Air Quality

BWP AQ AP-2

Emission Unit - Process Description

2009
Year of record
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DEP EU# (old Point #)
1190564
Eggility AQ 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 #:			
	a 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 " other"	Describe offici	Describe " other"

Bureau of Waste Prevention - Air Quality

BWP AQ AP-2

Emission Unit - Process Description

Year of record
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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
		а. Туре	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
		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	was designed to control:
PM 10		% Overall eff.	% Overall eff.	% Overall eff.
PM 2.5		% Overall eff.	% Overall eff.	% Overall eff.
SO2			<u>, </u>	
СО		% Overall eff.	% Overall eff.	% Overall eff.
VOC		% Overall eff.	% Overall eff.	% Overall eff.
		% 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 Protection Bureau of Waste Prevention – Air Quality

BWP AQ AP-2

Emission Unit – Process Description

2009
Year of record
61
DEP EU# (old Point #)
1190564
Facility AO identifier

R Emissions for Paw Materials/Finished Products

	О.	EIIIISSIOIIS IOI RAW Wateriais/Fiiiis	ned Froducts	
		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	l or making this product in this st still report data for this year " 0" – the material / product
	1.	Operation description:	SOLVENTS	
?		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	DEP#
nw materials or nished roducts ?		c. Process description:	REPACKAGING SOLVEI PACKAGED IN 2006-	
		d. Source Classification Code (SCC):	49099999	
		(see instructions)	SC Code (call DEP if SC Code ORGANIC SOLVENT N	OT CLASSIFIED
?		e. Maximum process rate for material/product:	SCC Description – filled by eDE O Amount	TONS Units per hour
ote: efinition of laximum		f. If organic material, give weight % of:	VOC	HOC
rocess rate			HYC	TONO
		g. Total actual raw material used or finished product produced for year of record:	0.0000 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
	?	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 florie, leave blatik.	Per: month wee	
		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/ş	
		09/19/05	BWP AQ AP-2 Emission Unit -	Process Description • Page 9

Bureau of Waste Prevention - Air Quality

BWP AQ AP-2

Emission Unit - Process Description

2009

Year of record

61

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:

<u> </u>	Total officerions for time	material product	. tone per year			
Important: Leaving blanks for	Pollutant	PM10	PM2.5	SO2	NO2	со
Actual and Potential emissions means that	Actual for previous year					
you are certifying that there were less than	eDEP only:	Tons	Tons	Tons	Tons	Tons
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::					
.	Max allowed – annual:	Tono	Tono	Torre	Tarra	T
ial o		Tons	Tons	Tons	Tons	Tons
For this material or product in the product of the product	= 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-
?						Other:
Important: 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:		<u> </u>			
	In pounds per unit:					
o 9	Max allowed – annual:	Tons	Tons	Tons	Tons	Tons
material or fluct only	Max allowed — short term:	Pounds	Pounds	Pounds	Pounds	Pounds

Short term period:

Basis - DEP approval number or regulation:

MBR-87-IND-

check to enter your own values

MBR-87-IND-

Bureau of Waste Prevention - Air Quality

BWP AQ AP-2

Emission Unit – Process Description

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1190564
acility AQ 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

BWP AQ AP-2

Emission Unit - Process Description

2009 Year of record 5 DEP EU# (old Point #) 1190564

Facility AQ identifier

Important: When filling out forms the comp use only tab key move yo cursor use the key.

A. Emission Unit - Process Description

out forms on the computer,	1	Eacility identifiers:		
use only the	١.	Facility identifiers:		
tab key to move your		CLEAN HARBORS OF BRAINTREE		
cursor - do not		a. Facility name	1190564	
use the return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number	
tab				
	2.	Emission unit identifiers:		
return		2 DRUM CRUSHING LINES NOT USED 09		
		a. Facility's choice of emission unit name – edit as needed		
		5	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. 5. 	Is this unit exempt under 310 CMR 7.02 Plan Approval If exempt from Plan Approval, indicate reason why (
		Reason for exemption		
	6.	Equipment manufacturer and model number and type	pe:	
		GREENBECK	18 SWB	
How to report on combined		a. Manufacturer	b. Model number	
units?		DRUM CRUSHER		
		c. Equipment Type		
		d. EPA Unit Type Code : CRUSHER		
How to delete a unit? (click ?-icon)	7.	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.

Bureau of Waste Prevention – Air Quality

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Emission Unit – Process Description

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8.	Emission unit replacement:				
	a. Is this unit replacing another	emission unit?			
	✓ no yes – enter DEI	P's emissions ur	nit number for the un	t being replaced below:	
	DEP's emission unit number and facility unit name				
9.	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 Monthly Quarterly (include Operating Permit and Plan Ap	Semi-annual poproval reports, but no			
	c. Is this unit subject to (check NESHAP NSPS	MACT			
10.	Hours of operation for the emiss				
2	h Number of hours per day	C Number of da	vs ner week	d. Number of weeks per year	
	e. Percent of total annual opera		•		
	$ \begin{array}{cccc} 0 & 0 & 0 \\ \mathbf{Q1} & \mathbf{Q2} & \mathbf{Q3} \end{array} $	0 Q4	(or 0% if the unit wa	s not operated for any quarter)	
11.	Ozone season schedule – May	1 through Septe	mber 30:		
0 0 0 a. Ozone season hours per day b. Ozone season days per week c. Weeks operated i					
	0	0		0	
	a. Ozone season hours per day	b. Ozone season		0 c. Weeks operated in ozone season	
12.	a. Ozone season hours per day Emission release point – select	_		0 c. Weeks operated in ozone season	
12.		_	days per week	0 c. Weeks operated in ozone season	
12.	Emission release point – select Non-Stack Release Points: I fugitive horizontal	vent			
	Emission release point – select Non-Stack Release Points: fugitive horizontal gooseneck downward	vent facing vent n 10ft	Physical Stacks: vertical stack vertical with rai	in cap/sleeve	

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?	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 #:			
	a 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 " other"	Describe offici	Describe " other"

Bureau of Waste Prevention – Air Quality

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1190564
Facility AQ identifier

2	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	✓ 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
	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 – e	nter for all pdlutants that the device	e 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"

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

BWP AQ AP-2

09/19/05

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Facility AQ identifier

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

				,		
	B.	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	or making this product in this st still report data for this year " 0" – the material / product		
	1.	Operation description:	RCRA EMPTY DRUMS			
?		a. Raw material or finished product name: Number of segments for this unit (previous records): 1				
How does eDEF handle multiple		b. Is material/product an input or output?	✓ input □ output	1 DEP#		
raw materials or finished products?	•	c. Process description:	2 DRUM CRUSHING LIN	ES DRUMS		
		d. Source Classification Code (SCC): (see instructions)	3999998 SC Code (call DEP if SC Code	•		
			MISC INDUSTRIAL PRO			
		e. Maximum process rate for material/product:	SCC Description – filled by eDE	1000 EACH		
		e. Maximum process rate for material/product.	Amount	Units per hour		
Note: Definition of Maximum process rate		f. If organic material, give weight % of:	VOC	HOC		
		-	HYC	4000 FACU		
		g. Total actual raw material used or finished product produced for year of record:	0.0000 Amount	1000 EACH Units		
		Enter " 0" if not used in the year of record	Prior year – eDEP only	1000 EACH 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 for	or this material or product		
·	<u> </u>	j. Short term raw material/finished product	moot room approval nambor to	or time material or product		
		restriction – if none, leave blank:	Quantity (amount or hours)	Units		
			Per: month weel	k		
		k. Annual material/product restrictionif none, leave blank:	Quantity (amount or hours)	Units		
		I. Indicate which air pollution control devices from	Device ID #	Device ID #		
		Section A, Question 15 control this				
		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 pollumunit apply to this material/p			

Bureau of Waste Prevention - Air Quality

BWP AQ AP-2

Emission Unit - Process Description

2009 Year of record

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:

	,					
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
here were less than 0.0001 (or zero) tons of emissions for each	Actual for year of record:	Tons	Tons	Tons	Tons	Tons
olank.	Potential emissions at maximum capacity uncontrolled:	Tons	Tons	Tons	Tons	Tons
	Emission factor: In pounds per unit::					
	in pounds per unic.					
ial or Iy Jone)	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 prod	Short term period:					_
ŭ š	Basis: DEP approval number or regulation:					
Important:						Other:
Reporting now required for t-Butyl Acetate	Pollutant	voc 0	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: Potential emissions at maximum	Tons 12	Tons	Tons	Tons	Tons
	capacity uncontrolled:	Tons 0.11	Tons	Tons	Tons	Tons
	Emission factor:	-				
		EACH				
	In pounds per unit:	EACH				
ial or I ly ⊓one)	In pounds per unit:	Tons	Tons	Tons	Tons	Tons
For this material or product only (leave blank if none)	In pounds per unit:		Tons	Tons	Tons	Tons

check to enter your own values

number or regulation:

Bureau of Waste Prevention - Air Quality

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Emission Unit – Process Description

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ear of record
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1190564
Facility 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

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Emission Unit – Process Description

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

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: (?)	
		DISTILLATION UNITS 710 GAL/HR DECOMMIS	SIONED 2009
		a. Facility's choice of emission unit name - edit as needed	
		4	4
		b. Facility' s emission unit number / code - edit as needed	c. DEP emissions unit # (old SSEIS Point #)
9		3	
4		d. Combined Units – enter number of individual units	
?	3.	DEP approvals – leave blank if not applicable:	
		MBR-88-IND-229	11/9/1988
		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 ? ☐ yes 🗹 no
	5.	If exempt from Plan Approval, indicate reason why	(e.g., cite a specific DEP regulation):
		Reason for exemption	



How to

delete a unit?

6. Equipment manufacturer and model number and type:

LUWA/PFAUDLER/CLEAN HARBORS

F-1

a. Manufacturer

c. Equipment Type

b. Model number

8/7/2009

SOLVENT RECOVERY CLOSURE WITH DEP 2009



d. EPA Unit Type Code: ROOF VENTS/BUILDING VENTS

7. Emission unit installation and decommission dates:

11/9/1988

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

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

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

(click ?-icon)

Bureau of Waste Prevention – Air Quality

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Emission Unit – Process Description

2009
Year of record
4
DEP EU# (old Point #)
1190564
Facility AQ identifier

8.	Emission unit	replacement:			
	a. Is this unit	replacing anot	ther emission unit?		
	☑ no	☐ yes – enter	DEP's emissions u	ınit number for the ι	unit being replaced below:
	DEP's emission	unit number and	facility unit name		
9.	Additional sta	ite reporting re	equirements:		
			ir quality reporting re	•	emissions unit ? to question 9c
	☐ Monthly (include Operat	Quarterly	heck all that apply: Semi-annual an Approval reports, but r		
		subject to (ch	eck all that apply): MACT		
	□ NESHAP	☐ NSPS	□ WAC1		
10	-				ously operated – 24 x 7 x 52
?	b Number of ho		0		0
	D. Harribor of Ho	urs per day	c. Number of d	ays per week	d. Number of weeks per year
			c. Number of d peration that occurs		
	e. Percent of	total annual o	peration that occurs	in each calendar qu	
11	e. Percent of Q1	total annual o	peration that occurs	in each calendar qu Sum of Q1+Q2+C (or 0% if the unit)	uarter:
11	e. Percent of O Q1 Ozone seaso	total annual o	peration that occurs O Q4 May 1 through Septe	in each calendar qu Sum of Q1+Q2+C (or 0% if the unit) ember 30:	uarter: Q3+Q4 must = 100% was not operated for any quarter)
11	e. Percent of O Q1 Ozone seaso	total annual o	peration that occurs O Q4 May 1 through Septe	in each calendar qu Sum of Q1+Q2+C (or 0% if the unit) ember 30:	uarter:
	e. Percent of O Q1 Ozone seaso	total annual op Output Q2 In schedule — In hours per day	peration that occurs O Q4 May 1 through Septe O b. Ozone seaso	in each calendar qu Sum of Q1+Q2+C (or 0% if the unit) ember 30:	uarter: Q3+Q4 must = 100% was not operated for any quarter)
	e. Percent of O Q1 Ozone seaso a. Ozone seasor	total annual op Output Q2 In schedule — In hours per day	peration that occurs O Q4 May 1 through Septo O D. Ozone seaso elect one:	in each calendar qu Sum of Q1+Q2+C (or 0% if the unit) ember 30:	uarter: Q3+Q4 must = 100% was not operated for any quarter) O c. Weeks operated in ozone season
	e. Percent of O Q1 . Ozone seasor a. Ozone seasor Emission rele Non-Stack fugitive goosene	total annual op O Q2 In schedule – In hours per day ease point – se Release Points	peration that occurs O Q4 May 1 through Septe O D. Ozone seaso elect one: s: ntal vent vard facing vent	in each calendar question of Q1+Q2+Q (or 0% if the unit vertical Stacks Physical Stacks vertical stacks	uarter: Q3+Q4 must = 100% was not operated for any quarter) O c. Weeks operated in ozone season :
12	e. Percent of O Q1 . Ozone seasor a. Ozone seasor b. Emission rele Non-Stack goosene vertical s	total annual of Q2 In schedule — hours per day ease point — se Release Points horizo eck	peration that occurs O Q4 May 1 through September O Delect one: elect one: s: ntal vent ward facing vent of than 10ft to question 14.	in each calendar question of Q1+Q2+Q (or 0% if the unit vertical stacks) Physical Stacks vertical stack	uarter: Q3+Q4 must = 100% was not operated for any quarter) O c. Weeks operated in ozone season : crain cap/sleeve
12	e. Percent of O Q1 Ozone seaso a. Ozone seasor Emission rele Non-Stack goosene vertical seasor If Non-Stack rele Link this unit	total annual of O Q2 In schedule — Thours per day ease point — se Release Points Thorizo eck	peration that occurs O Q4 May 1 through Septe O D. Ozone seaso elect one: s: ntal vent ward facing vent to question 14. tack (if applicable) —	in each calendar question of Q1+Q2+Q (or 0% if the unit vertical stacks) Physical Stacks vertical stack	uarter: Q3+Q4 must = 100% was not operated for any quarter) O c. Weeks operated in ozone season : crain cap/sleeve
12	e. Percent of O Q1 . Ozone seasor a. Ozone seasor E. Emission rele Non-Stack goosene vertical s If Non-Stack r Link this unit s 4 THREE DIST	total annual of Q2 CQ2 CQ2 CQ2 CQ2 CQ2 CQ2 CQ2 CQ2 CQ2	peration that occurs O Q4 May 1 through September O Delect one: elect one: s: ntal vent ward facing vent of than 10ft to question 14.	in each calendar quesum of Q1+Q2+Q (or 0% if the unit vertical Stacks Physical Stacks vertical stack vertical with pick from the list be	uarter: Q3+Q4 must = 100% was not operated for any quarter) O c. Weeks operated in ozone season : crain cap/sleeve elow:

Bureau of Waste Prevention - Air Quality

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Emission Unit - Process Description

2009
Year of record
4
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 #:			
	a 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 " other"	Describe offici	Describe " other"

Bureau of Waste Prevention – Air Quality

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Emission Unit – Process Description

2009
Year of record
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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 mothan 3 air pollution control devices of		
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		
	TUBE AND SHELL CONDENSER				
	a. Type UNKNOWN	Туре	Туре		
Do not leave blank – if unknown	b. Manufacturer UNKNOWN	Manufacturer	Manufacturer		
write ' unknown' or	c. Model number 1	Model number	Model number		
estimate	d. Facility's ID for this device 11/9/1988	Facility's ID for this device	Facility's ID for this device		
?	e. Installation date (mm/dd/yyyy) MBR-88-IND-229	Installation date (mm/dd/yyyy)	Installation date (mm/dd/yyyy)		
Leave f, g, h	f. DEP approval # (most recent) 11/9/1988	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 – ei	nter for all pdlutants that the device	e was designed to control:		
PM 10	0				
	% Overall eff.	% Overall eff.	% Overall eff.		
PM 2.5	0 % Overall eff.	% Overall eff.	% Overall eff.		
SO2	0				
00	% Overall eff.	% Overall eff.	% Overall eff.		
CO	% Overall eff.	% Overall eff.	% Overall eff.		
VOC	99.9				
NOO	% Overall eff.	% Overall eff.	% Overall eff.		
NO2	% Overall eff.	% Overall eff.	% Overall eff.		
NH3	0				
1100	% Overall eff.	% Overall eff.	% Overall eff.		
HOC	% Overall eff.	% Overall eff.	% Overall eff.		
HYC	0				
l la	% Overall eff.	% Overall eff.	% Overall eff.		
Hg	0 % Overall eff.	% Overall eff.	% Overall eff.		
Pb	0				
Othor	% 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-2

Emission Unit - Process Description

How to make a new air pollution control device

appear in these drop menus?

09/19/05

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	•		r domey red radritinor					
Ī	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	luct: check the box if you all or making this product in this lest still report data for this year s " 0" – the material / product unit in the next report cycle.					
1	Operation description:	CHLORINATED SOLVENTS						
? How does eDEP	 a. Raw material or finished product name: Number of segments for this unit (previous records): 1 b. Is material/product an input or output ? 	✓ input □ output	1					
nandle multiple aw materials or inished products ?	c. Process description:	STILLS #4, 5, 6- CHLOR DOWN 2007	DEP# INATED SOLVENTS					
	d. Source Classification Code (SCC): (see instructions)	30184001 SC Code (call DEP if SC Code GENERAL PROCESSES						
?	e. Maximum process rate for material/product:	SCC Description – filled by eDi 710 Amount	EP upon validation GALLONS Units per hour					
Note: Definition of Maximum process rate	f. If organic material, give weight % of:	VOC	HOC					
	g. Total actual raw material used or finished product produced for year of record:	HYC 0.0000 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?	_,	to question 1.I					
4	i. DEP approval number for restrictions:	MBR-88-IND-229 Most recent approval number for	or this material or product					
	j. Short term raw material/finished product	710	GALLONS					
	restriction – if none, leave blank:	Quantity (amount or hours)	Units					
			k ☐ day 🗹 hour					
	k. Annual material/product restrictionif none, leave blank:	Guantity (amount or hours)	GALLONS Units					
	I. Indicate which air pollution control devices from Section A, Question 15 control this material/product by liciting the facility.	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 #					

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

unit apply to this material/product

check here if ALL air pollution control devices on the

Bureau of Waste Prevention - Air Quality

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Emission Unit - Process Description

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

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

?	2. Total emissions for this	material/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 there were less than	Actual for previous year eDEP only:	Tons	Tons	Tons	Tons	Tons
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 y y	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
rthis:	Short term period:					
For	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 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:					
o or	Max allowed – annual:	Tons	Tons	Tons	Tons	Tons
this material or product only	Max allowed – short term:					
# + # ×	iviax allowed — Short term.	Pounds	Pounds	Pounds	Pounds	Pounds

MBR-88-IND-

Basis - DEP approval number or regulation:

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

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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:

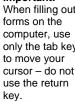
☐ Check here to submit attachments to this form (e.g., calculations). For eDEP on-line filers, this will create a new step on your Current Submittals Page where you will attach electronic files to your submittal. For attachments that cannot be sent electronically, please list all such attachments below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

Bureau of Waste Prevention - Air Quality

BWP AQ AP-3

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Importa When fi







	Εm	nission Unit – Incinerator: Solid Waste, Sludge, M	edical Waste, other Facility AQ identifier				
Important: When filling out forms on the computer, use only the tab key to move your cursor – do not	A.	A. Emission Unit – Incinerator Information					
	1.	Facility identifiers:					
		CLEAN HARBORS OF BRAINTREE					
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:					
	۷.	STACK 1 POINT 1 SEGMENT NOT USED 09					
		a. Facility's choice of emission unit name – edit as needed					
		1	1 DED aniceione with COSTIC point #				
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #				
	2	DED approvals leave blank if not applicable:					
	3.	DEP approvals – leave blank if not applicable: MBR-89-INC-003	5/17/1993				
		a. Most recent approval number	b. DEP approval date (mm/dd/yyyy)				
	4.	Emission unit installation and decommission dates:					
?		5/1/1989					
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.				
	5.	Emission unit replacement?					
		a. Is this unit, replacing another emission unit?					
		✓ no yes – enter DEP's emissions unit num	nber for the unit being replaced below:				
		b. DEP's Emission Unit Number and facility's unit name					
	6.	Are there routine air quality reporting requirements for this emissions unit (other than Source Registration)?					
		a. Are there other routine air quality reporting requirements for this emissions unit?					
		✓ yes – specify reporting frequency below ☐ no – skip to question 6c					
		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

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Facility AQ identifier

			(**************************************							
Note: This section is not for afterburners or	7.	Incinerator description:								
other pollution control		a. Type: commercial industrial medical								
equipment.			INCINERATOR							
		municipal sludge other:	Specify "other" incinerator type							
		VENT-O -MATIC	CAE500							
		b. Manufacturer:	c. Model number							
		d. Maximum operating capacity:	amount in units of:							
			✓ pounds OR ☐ tons of waste per hour							
		e. Pounds of steam per hour	f. MMBtu per hour							
	8.	Waste type – select one:	e – dry rubbish, trash							
			e – mix of rubbish & garbage e – garbage e – infectious/medical waste e – industrial (liquid)							
		☐ Type 3 Wast								
		☐ other:	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:	0.0000 Tons							
			0							
			Tons in previous year – eDEP only							
	11.	Charging rate restriction (for batch units only):	0.00							
			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 feeder?	Square Feet ✓ 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

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	Hours of operation for the	e emission	ı unit: a. [check if cor	ntinuously ope	erated – 24 x	7 x 52	
	0		0		0			
	b. Number of hours per day		c. Number of day	s per week	d. Nu	mber of weeks	per year	
	e. Percent of total annual operation that occurs in each calendar quarter:							
	0 0	0	0		of Q1+Q2+Q3+			
	Q1 Q2	Q3	Q4	or U	if the unit was no	ot operated for a	any quarter	
17.	Ozone season schedule	– May 1 th	nrough Septer	nber 30:				
	0		0		0			
	a. Ozone season hours per day	/	b. Ozone seasor	i days per week	C. VVE	eeks operated ii	n ozone season	
18.	Emission release point –	select one	e: ?					
	Non-Stack Release Po	ints:		Physical S	Stacks:			
		izontal ver vnward fac ess than 1	cing vent	✓ vertical vertical	l stack I with rain cap	/sleeve		
19.	If Non-Stack release point, st Link this unit to a physica 1 STACK #1- INCINERATOR #1-VENT-	I stack (if a	applicable) – p	oick from the I	ist below:			
19.	Link this unit to a physica	I stack (if a o-matic- NA 20 TACK form -	applicable) – p 007 - to change stack	name use the S	TACK form	m before return	ing to this form.	
	Link this unit to a physica 1 STACK #1- INCINERATOR #1-VENT- Facility's stack identifier from S	I stack (if a o-matic- na 20 TACK form – sted, save an	applicable) — p 2007 - to change stack d exit this form no	name use the Sow and complete	TACK form			
	Link this unit to a physica 1 STACK #1- INCINERATOR #1-VENT- Facility's stack identifier from S' If the stack for this unit is not lis	I stack (if a o-matic- na 20 TACK form – sted, save an	applicable) — p 2007 - to change stack d exit this form no	name use the Sow and complete	TACK form a new Stack form Chamber 100			
	Link this unit to a physica 1 STACK #1- INCINERATOR #1-VENT- Facility's stack identifier from S' If the stack for this unit is not lis Temperature — degrees in a. Operating range:	I stack (if a o-matic- na 20 TACK form – sted, save an	applicable) — p 2007 - to change stack d exit this form no	primary 50 Lower 50	TACK form a new Stack form Chamber 100 Upper 100	Seconda	Ty Chamber	
	Link this unit to a physica 1 STACK #1- INCINERATOR #1-VENT- Facility's stack identifier from S' If the stack for this unit is not lis Temperature – degrees in	I stack (if a o-matic- na 20 TACK form – sted, save an	applicable) — p 2007 - to change stack d exit this form no	name use the Sow and complete Primary 50 Lower	TACK form a new Stack form Chamber 100 Upper	Seconda	nry Chambe	
20.	Link this unit to a physica 1 STACK #1- INCINERATOR #1-VENT- Facility's stack identifier from S' If the stack for this unit is not lis Temperature — degrees in a. Operating range:	I stack (if a o-matic- Na 20 TACK form - sted, save an	applicable) — p 2007 - to change stack d exit this form no	primary 50 Lower 50	TACK form a new Stack form Chamber 100 Upper 100	Seconda	ary Chambe Upper	
20.	Link this unit to a physica 1 STACK #1- INCINERATOR #1-VENT- Facility's stack identifier from S' If the stack for this unit is not lis Temperature – degrees in a. Operating range: b. Permitted range:	I stack (if a o-matic- Na 20 TACK form - sted, save an	applicable) — p 2007 - to change stack d exit this form no	primary 50 Lower 50	TACK form a new Stack form Chamber 100 Upper 100	Seconda	ary Chambe Upper	

Bureau of Waste Prevention - Air Quality

BWP AQ AP-3

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

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a Tune of human sheet and	□ roto = :	□ maah atami=a=	O stoom stom:		
a. Type of burner – check one:	☐ rotary☐ air atomize☐ other:	☐ mech. atomizer r ☐ traveling grate	☐ steam atomizer☐ hand fired		
		MECH ATOMIZER			
CARLIN		Specify "other" burner type	9		
b. Burner manufacturer					
201-CRD		0.77			
c. Burner model number		d. Maximum rating MMBtu	/ hr		
e. Source Classification C code (SC	CC):	50290005			
(see instructions)		SC Code (call DEP if SC c			
			NS-DISTILLATE OIL ed by eDEP upon validation		
_		So code Description – Till	su by eder upon validation		
f. Type of fuel – check one:		☐ no.2 ☐ no.4	☐ no.6		
		☐ diesel ☐ natura	al gas 🗹 other – desci		
		AUX FUEL			
		Describe "other "fuel			
a Sulfur content for alla (0.2.2):					
g. Sulfur content for oils (0-2.2):		Percent by weight			
g. Sulfur content for oils (0-2.2):h. Maximum hourly fuel rate for all fi	iring burners:	Percent by weight 0.1750	1000 GALLONS		
	iring burners:		1000 GALLONS Units per hour		
h. Maximum hourly fuel rate for all fi	ecord:	0.1750			
h. Maximum hourly fuel rate for all fi	ecord:	O.1750 Amount O.0000 Amount – year of record	Units per hour ?		
h. Maximum hourly fuel rate for all fi	ecord:	0.1750 Amount 0.0000	Units per hour ?		
h. Maximum hourly fuel rate for all fine. i. Total actual fuel used for year of record) (Enter "0" if not used in the year of record)	ecord:	O.1750 Amount O.0000 Amount – year of record 0	Units per hour 1000 GALLONS Units 1000 GALLONS		
h. Maximum hourly fuel rate for all fi	ecord:	O.1750 Amount O.0000 Amount – year of record O Prior year – eDEP only yes	Units per hour 1000 GALLONS Units 1000 GALLONS		
h. Maximum hourly fuel rate for all fine. i. Total actual fuel used for year of record) (Enter "0" if not used in the year of record)	ecord:	O.1750 Amount O.0000 Amount – year of record O Prior year – eDEP only V yes	Units per hour 1000 GALLONS Units 1000 GALLONS Units		
h. Maximum hourly fuel rate for all fi i. Total actual fuel used for year of r (Enter "0" if not used in the year of record) j. Do you have fuel or usage restrict k. DEP approval number for fuel res	ecord: tions?	O.1750 Amount O.0000 Amount – year of record O Prior year – eDEP only V yes	Units per hour 1000 GALLONS Units 1000 GALLONS Units Skip to question 23		
h. Maximum hourly fuel rate for all fi i. Total actual fuel used for year of r (Enter "0" if not used in the year of record) j. Do you have fuel or usage restrict	ecord: tions?	O.1750 Amount O.0000 Amount – year of record O Prior year – eDEP only V yes	Units per hour 1000 GALLONS Units 1000 GALLONS Units		

Bureau of Waste Prevention - Air Quality

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

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23.	Secondary chamber auxiliary burners:	:				
	Is there a secondary chamber?	Yes 🗹 No −	if no skip to Question 24	1		
	a. Type of burner – check one:] rotary] air atomizer] other:	☐ mech. atomizer ☐ traveling grate	steam atomizer hand fired		
			Specify "other" burner type			
	b. Burner manufacturer					
	c. Burner model number		d. Maximum rating MMBtu/hr			
	e. Source Classification C code (SCC): (see instructions) f. Type of fuel – check one:		SC Code (call DEP if SC code will not validate)			
			SC Code Description – filled by eDEP upon validation no.2 no.4 no.6 diesel natural gas other – describe:			
			Describe "other" fuel			
	g. Sulfur content for oils (0-2.2):		Percent by weight			
	h. Maximum hourly fuel rate for all firing	g burners:	Amount	Units per hour		
	i. Total actual fuel used for year of reco (Enter "0" if not used in the year of record)	ord:	Amount – year of record Prior year – eDEP only	Units		
	j. Do you have fuel usage restrictions?		☐ yes 🗹 no – ski	ip to question 24		
	k. DEP approval number for fuel restric	ctions:	Most recent for this fuel			
	I. Annual usage restriction (for this fuel):	Quantity	Units		
	m. Short term fuel use restriction (for the	nis fuel):	Quantity	Units		
			Per: month we	ek 🗌 day 🔲 hour		

Bureau of Waste Prevention – Air Quality

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

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24	. Is there an air pollution control o	device/s on this emissions unit?	Check here if you need to report more	
How to delete a control?	✓ yes – answer a through i	no – skip to question 25	than 3 air pollution control devices on this unit. eDEP will add another page of control devices after this form.	
	Air pollution control device	Air pollution control device	Air pollution control device	
	FABRIC FILTER - HIGH TEMPERATURE, I.E. T>2	50F SODIUM-ALKALI SCRUBBING	FLUID BED DRY SCRUBBER	
	a. Type	Туре	Туре	
	0	0	0	
Do not leave blank –	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 W 2.0	% Overall eff.	% Overall eff.	% Overall eff.	
SO2	0	0	0	
002	% Overall eff.	% Overall eff.	% Overall eff.	
СО	0	0	0	
00	% Overall eff.	% Overall eff.	% Overall eff.	
VOC	0	0	0	
٧٥٥	% Overall eff.	% Overall eff.	% Overall eff.	
NO2	0	0	0	
INOZ	% Overall eff.	% Overall eff.	% Overall eff.	
NILIO	0	0	0	
NH3		% Overall eff.	% Overall eff.	
1100	% Overall eff.	0	0	
HOC	% Overall eff.		% Overall eff.	
		% Overall eff.		
HYC	0	0	0 % Overall eff.	
	% Overall eff.	% Overall eff.		
Hg	% Overall eff.	0 % Overall eff.	0 % Overall eff.	
DI	% Overall eff.	% Overall eff.	% Overall eff.	
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

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?	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:	check only one:			
Do not leave blank –		☐ 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:			
if unknown write 'unknown' or		DYNATROL Describe "other"	Describe "other"	Describe "other"			
estimate	b. Manufacturer:	DYNATROL					
	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					
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 S02 C0 VOC N02 NH3 Mercury Oxygen C02 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

2009 Year of record DEP EU# (old Point#) 1190564 Facility AQ identifier

B. Emissions

Total emissions for this emissions unit – tons per year:

	Total emissions for this	s emissions unit	tons per ye	ar:		
	Pollutant	PM10	PM2.5	SO2	NO2	СО
Important: Leaving blanks for	Actual for previous year	0	0	0	0	0
Actual and Potential	eDEP only:	Tons	Tons	Tons	Tons	Tons
emissions means that	Actual for year of	0.0000	0.0000	0.0000	0.0000	0.0000
you are certifying that there were less than	record:	Tons	Tons	Tons	Tons	Tons
0.0001 (or zero) tons	Potential emissions at	.048		3	5	6
of emissions for each blank.	max. capacity uncontrolled:	Tons	Tons	Tons	Tons	Tons
	?Emission factor:					
	Emission factor units in pounds per:					
	Maximum allowed					
unit	emissions – annual:	Tons	Tons	Tons	Tons	Tons
For the entire unit only (leave blank if none)	Maximum allowed emissions – short term:	Pounds	Pounds	Pounds	Pounds	Pounds
the e or	Short term period (or MMBtu):					
For (leav	Basis: DEP approval number or regulation:	MBR-91-INC-003B		MBR-91-INC-003B	MBR-91-INC-003B	MBR-91-INC-003B
	Humber of regulation.					
						Other:
	Pollutant	VOC	нос	*Reserved*	NH3	Specify
	Actual for previous year					
	eDEP only:	Tons	Tons	Tons	Tons	Tons
	Actual for year of record:	0.0000	Tons	Tons	Tons	Tons
		Tons 19	TOTIS	TOTIS	TOTIS	TOTIS
	Potential emissions at maximum capacity uncontrolled:	Tons	Tons	Tons	Tons	Tons
	maximum capacity uncontrolled.	10115	10115	10115	10115	10115
	Emission factor:			_		
	Emission factor units in pounds per:					
	Maximum allowed					
nit	emissions – annual:	Tons	Tons	Tons	Tons	Tons
	Maximum allowed	Pounds	Pounds	Pounds	Pounds	Pounds
For the entii only (leave blank i	Short term period (or MMBtu):			_		
For (leav	Basis – DEP approval number or regulation:	MBR-91-INC-003B		_		
		no Mou 1 than	uah Cantaurt	or 20:		
?	 Ozone season emissio 0 	ons – way i info	ugri septemb	oer 30: 0		
NOTE for Ozone Season	a. Typical day VOC emissio	ns – pounds per day			c emissions – pound	s per day
Emissions	_				·	· •
	check to enter your own	values		☐ check to enter	your own values	

Bureau of Waste Prevention - Air Quality

BWP AQ AP-3

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

2009
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. 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-4

Emission Unit - Organic Material Storage

2009
Year of record
9
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Complete one AP-4 for EACH organic material storage tank.			
Important: When filling	A.	Equipment Description		
out forms on the computer, use only the	1.	Facility identifiers: 2		
tab key to		CLEAN HARBORS OF BRAINTREE		
move your cursor – do		a. Facility name	4400504	
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 A4- 5,200 GAL WASTE STREAM A-22	2	
		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		
	3.	Emission unit installation and decommission dates:		
		1/1/1986		
How to delete		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?		
		v 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:	Specify other	
		10.66 10.5 5200		
		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

2009
Year of record
9
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

	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	e. Vapor pressure in PSI at 25° C				
52	167878.0000				
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 cor	itents changed during year of record):				
MIXED ORGANIC LEAN WATERS FOR INCI					
a. Name of material					
	40722098				
b. CAS number if single chemical	c. SC Code for standing / breathing loss				
ORGANIC CHEM.SPECIFY IN COMMNETS	0.39				
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
	132708				
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					
	additional information that will help DEP understand				
your submission.	'				
•					

paper copy of this form.

Bureau of Waste Prevention – Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
8
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Complete one AP-4 for EACH organic material storage tank.		
nportant: Vhen filling ut forms on	A.	Equipment Description	
ne computer, se only the	1.	Facility identifiers: 7	
ab key to		CLEAN HARBORS OF BRAINTREE	
nove your ursor – do		a. Facility name	
ot use the		34839	1190564
turn key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
Y	2.	Emission unit identifiers:	
return		AG TANK A3-9,800 GAL NOT USED IN 2009	
		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 #
ow to		d. Combined Units – enter number of individual units	
nits?			
	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
ow to delete 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	ımber 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
		14.66 11.5 9800	• •

 $lue{}$ 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

2009
Year of record
8
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	- V			
2	d. SC Code description – filled by eDEP 52	e. Vapor pressure in PSI at 25° C			
B	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	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				
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

2009
Year of record
7
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Coi	mplete one AP-4 for EACH organic material storage tan	ık.
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 A2-9,800 GAL WASTE STREAM A-21	
		a. Facility's choice of emission unit name – edit as needed	
		7	7
_		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	
unito :	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 descriptions:	
		a. Description: 🗹 above ground 🗌 below groun	nd
		b. Roof type: ☐ floating roof ☐ internal roof ☐ other:	
		14.66 11.5 9800	Specify other
			ity – 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

2009
Year of record
7
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):	
	MIXTURE OF FUELS FOR INCINERATION	
	a. Name of material	_
		40799998
	b. CAS number if single chemical	c. SC Code for standing / breathing loss
	MISC.CHEMICAL STORAGE	1.04
?	d. SC Code description – filled by eDEP 52	e. Vapor pressure in PSI at 25° C ? 302097.0000
	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 ^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 ac your submission.	dditional information that will help DEP understand
	year east-meetern	
	2 Attachments: Check here to submit attach	oments 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

Year of record
63
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
V
return

combine units?

a unit?

Coi	mplete one AP-4	for EACH organic m	naterial storage ta	nk.		
Α.	Equipmen	t Description	1			
1.	Facility identifie	ers: 🔨				
	CLEAN HARBO	ORS OF BRAINTRI	EE			
	a. Facility name					
	34839			1190564		
	b. DEP Account nu	mber		c. Facility AQ identifier – SSEIS ID number		
2.	Emission unit id	dentifiers:				
	AG TANK B9 P	OLYOLEFIN H TA	NKS WASTEWA	TER NO VOCS		
		of emission unit name -	edit as needed			
	63			63		
	b. Facility's emissic	on unit number / code -	edit as needed	c. DEP emissions unit # - SSEIS point #		
	d. Combined Units – enter number of individual units					
3.	1/1/1977	nstallation and deco		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 re	eplacement:				
,	a. Is this unit re	placing another em	nission unit?			
	☑ no	yes – enter DEP's	emissions unit n	umber for the unit being replaced below:		
	b. DEP's Emission	Unit Number and facilit	y unit name			
5.	Unit description	ıs:				
	a. Description:	✓ above ground	below grou	nd		
	b. Roof type:	☐ floating roof	internal roc	of		

6250

steel weld other weld rivet fiberglass gunite

e. Capacity - gallons

10.5

6. Construction:

c. Height / Length - feet

11.75

d. Diameter - feet

Specify other

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009 Year of record 63 DEP EU# (old Point #) 1190564 Facility AQ identifier

A. Equipment Description (cont.)

2		a Nama of material	
2		a. Name of material	30187097
		b. CAS number if single chemical	c. SC Code for standing / breathing loss
Click "c icon		SPECIFY LIQUID:BREATHING LOSS	3
for SC Code		d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C
help	(Y)	52	
		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):
		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

2. Attachments:

Check here to submit attachments 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
62
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Cor	mplete one AP-4	for EACH organic m	aterial storage tar	nk.
Important: When filling out forms on	Α.	Equipmen	t Description		
the computer,	1.	Facility identifie	ers: 🥎		
use only the tab key to		-	ORS OF BRAINTRE	E	
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					
X	2.	Emission unit id	dentifiers:		
return		AG TANK B8- I	POLYOLEFIN H TA	NKS WASTEWA	ATER NO VOCS
			of emission unit name -	edit as needed	
		62		- dit d- d	62
		b. Facility's emission	on unit number / code – e	edit as needed	c. DEP emissions unit # - SSEIS point #
?		d. Combined Units	– enter number of individ	dual units	
How to combine units?					
	3.	Emission unit ir	nstallation and deco	mmission dates:	
		1/1/1977			
?			- 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 re	eplacement:		
		a. Is this unit re	placing another em	ission unit?	
		v 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 description	ns:		
•		a. Description:	✓ above ground	below grour	nd
		b. Roof type:	☐ floating roof ✓ fixed	internal roof	
					Specify other
		9.6	11.75	7000	

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

2009
Year of record
62
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

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	_
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	
	additional information that will halp DED underst
your submission.	additional 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

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

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

Importanti
Important:
When filling
out forms on
the computer,
use only the
tab key to
move your
cursor – do
not use the
return key.
100
Tab Tab

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 B7- POLYOLEFIN H TANKS WASTE	WATER NO VOCS	
	a. Facility's choice of emission unit name – edit as needed		

60

How to combine

units?

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

d. Combined Units - enter number of individual units



3. Emission unit installation and decommission dates:

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

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

c. DEP emissions unit # - SSEIS point #

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



60

1/1/1977

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 d	escription	S:				
a. Des	scription:	✓ above ground	☐ beld	ow ground		
b. Roo	of type:	☐ floating roof ✓ fixed	inte	ernal roof er:	Consideration	
11.5		10		6250	Specify other	

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

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
60
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

	a. Name of material	
	Tham of material	30187097
	b. CAS number if single chemical	c. SC Code for standing / breathing loss
	SPECIFY LIQUID:BREATHING LOSS	g, a committee g
?	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	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	
1.	Notes: please include in the space below any a	dditional information that will help DEP understa
٠.	your submission.	dational information that will help DET understa

2. Attachments:

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paper copy of this form.

help

Bureau of Waste Prevention – Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
6
DEP EU# (old Point #)
1190564
Facility AQ identifier

A.	A. 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 A1-9,800 GAL NOT USED IN 2009					
	a. Facility's choice of emission unit name – edit as needed 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					
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				
		Complete only if the unit was shut down permanent 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					
	b. DEP's Emission Unit Number and facility unit name					
) 5.	b. DEP's Emission Unit Number and facility unit name Unit descriptions:					
5.		ind				
5.	Unit descriptions:	of 				
5.	Unit descriptions: a. Description: ✓ above ground ☐ below ground b. Roof type: ☐ floating roof ☐ internal roof					

 $lue{}$ 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

2009
Year of record
6
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

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 eDE	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					
a. Name of material	v 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 eDE	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				
h. RVP – gasoline only	i. Total oxygen percent – gasoline only				
h. RVP – gasoline only j. Oxygenate name – gasoline only 3. Notes and Attachme	i. Total oxygen percent – gasoline only				
h. RVP – gasoline only j. Oxygenate name – gasoline only B. Notes and Attachmel Notes: please include in the sp	i. Total oxygen percent – gasoline only				
h. RVP – gasoline only j. Oxygenate name – gasoline only B. Notes and Attachmel Notes: please include in the sp	i. Total oxygen percent – gasoline only				
h. RVP – gasoline only j. Oxygenate name – gasoline only B. Notes and Attachmel Notes: please include in the sp	i. Total oxygen percent – gasoline only				
h. RVP – gasoline only j. Oxygenate name – gasoline only 3. Notes and Attachmel Notes: please include in the sp	i. Total oxygen percent – gasoline only				
h. RVP – gasoline only j. Oxygenate name – gasoline only 3. Notes and Attachmel Notes: please include in the sp	i. Total oxygen percent – gasoline only				
h. RVP – gasoline only j. Oxygenate name – gasoline only 3. Notes and Attachmel Notes: please include in the sp	i. Total oxygen percent – gasoline only				
h. RVP – gasoline only j. Oxygenate name – gasoline only 3. Notes and Attachmel Notes: please include in the sp	i. Total oxygen percent – gasoline only				
h. RVP – gasoline only j. Oxygenate name – gasoline only 3. Notes and Attachmel Notes: please include in the sp	i. Total oxygen percent – gasoline only				
h. RVP – gasoline only j. Oxygenate name – gasoline only 3. Notes and Attachmel Notes: please include in the sp	i. Total oxygen percent – gasoline only				
h. RVP – gasoline only j. Oxygenate name – gasoline only 3. Notes and Attachmel Notes: please include in the sp	i. Total oxygen percent – gasoline only				

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
59
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.	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 B6- POLYOLEFIN H TANKS WASTEW	ATER 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 #				
How to combine units ?		d. Combined Units – enter number of individual units					
unito :	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	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	nd				
		b. Roof type:					
		11.5 10 6250	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

2009
Year of record
59
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):					
	COROSSIVES NO VOCS NOT APPLIBABLE T	O 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	_				
8.	New material stored (enter new material if conte	ents changed during year of record):				
	h CAS number if single chamical	a CC Code for standing / breathing loss				
	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 attack	hments to this form. For attachments that cannot be				

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paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

Year of record
58
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
return /

combine units?

a unit?

Co	mplete one AP-4 for EACH organic material storage ta	nk.				
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 B5- POLYHLEFIN H TANKS WASTEWA	ATER 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: 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	imber for the unit being replaced below:				
	b. DEP's Emission Unit Number and facility unit name					
5.	Unit descriptions:					
٦.	one decomputation					

	b. DEP's Emission Unit Number and facility unit name							
5.	Unit description	ns:						
	a. Description:	✓ above ground	☐ belo	w ground				
	b. Roof type:	oe:	_		other:			
	10.5	44.75			Specify other			
	10.5	11.75	6250					
	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

2009
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 TO REPORT					
	a. Name of material	7				
		30187097				
	b. CAS number if single chemical	c. SC Code for standing / breathing loss				
	SPECIFY LIQUID:BREATHING LOSS	a Vanar procesure in BSI at 250 C				
	d. SC Code description – filled by eDEP 52	e. Vapor pressure in PSI at 25° C 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	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.	Notes : please include in the space below any additional information that will help DEP understand your submission.					

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Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
57
DEP EU# (old Point #)
1190564
Facility AQ identifier

combine units?

a unit?

_							
Со	mplete one AP-4	for EACH organic m	aterial storage tan	k.			
A.	. Equipmen	t Description					
1.	Facility identified CLEAN HARBO a. Facility name 34839 b. DEP Account no	ORS OF BRAINTRE	<u>EE</u>	1190564 c. Facility AQ identifier – SSEIS ID number			
2.	AG TANK B4-	Emission unit identifiers: AG TANK B4- POLYOLEFIN H WASTEWATER NO VOCS a. Facility's choice of emission unit name – edit as needed					
	57 b. Facility's emission	on unit number / code – e	edit as needed	57 c. DEP emissions unit # - SSEIS point #			
3.	1/1/1977	nstallation and deco		b. Decommission date (mm/dd/yyyy) – if applicable Complete only if the unit was shut down permanently			
4.		eplacing another em		or replaced since the last report. mber for the unit being replaced below:			
5.	b. DEP's Emission Unit description	n Unit Number and facility	y unit name				
	a. Description:b. Roof type:	✓ above ground☐ floating roof✓ fixed	☐ below grour ☐ internal roof ☐ other:	Specify other			
	9.5	11.75	7000	Spoon, stroi			

e. Capacity - gallons

steel weld other weld rivet fiberglass gunite

c. Height / Length – feet

6. Construction:

d. Diameter – feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
57
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

eathing loss 25° C ons (enter 0 if not used) soline only record):
ons (enter 0 if not used) soline only
ons (enter 0 if not used) soline only
ons (enter 0 if not used) soline only
soline only
soline only
record):
record):
eathing loss
25° C
ons
soline only
l help DEP understan
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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

2009 Year of record 56 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 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	
	a. Facility name	
	34839	1190564
	b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
2	Emission unit identifiers:	



Emission unit identifiers:

AG TANK B3-	POLYOLEFIN TANKS WASTEV	VATER NO VOCS
a. Facility's choice	of emission unit name - edit as needed	
56		56

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

c. DEP emissions unit # - SSEIS point #



3. Emission unit installation and decommission dates:

d. Combined Units - enter number of individual units

	1/1/1977	
	a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) – if applicable
ow to delete unit ?		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?

✓ 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	rnal roof er:		
					Specify other	
	11.5	10		6250		
	c. Height / Length -	- feet d. Diameter – fe	eet	e. Capacity -	gallons	

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
56
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	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	
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
a. 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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Bureau of Waste Prevention – Air Quality

Emission Unit - Organic Material Storage

2009 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
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	
	a. Facility name	
	34839	1190564
	b. DEP Account number	c. Facility AQ identifier – SSEIS ID number



combine units?

a unit?

	34839	1190564			
	b. DEP Account number	c. Facility AQ identifier – SSEIS ID number			
2.	Emission unit identifiers:				
	AG TANK B2- POLYOLEFIN TANK WASTEWAT	ER NO VOCS			
	a. Facility's choice of emission unit name – edit as needed	54			
	b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # – SSEIS point #			
	b. Facility's emission unit number / code – edit as needed	C. DEF emissions unit # - 33E13 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 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				
	a. 2 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 -				
	b. Roof type: ☐ floating roof ☐ internal roof				

b. DEP's Emission	on Unit Number and facility	unit name		
Unit description	ons:			
a. Description:	: 🗹 above ground	☐ below ground		
b. Roof type:	☐ floating roof ✓ fixed	☐ internal roof ☐ other:		
11.5	10	6250	Specify other	
c. Height / Length			- gallons	

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
54
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):						
	CORROSIVES NO VOCS NOT APPLICABLE 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					
\mathbf{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 conte	nts changed during year of record):					
	b. CAS number if single chemical	c. SC Code for standing / breathing loss					
	b. CAS humber it single chemical	c. So 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.						
	your oubinicolori.						
:	2. Attachments: Check here to submit attach	ments to this form. For attachments that cannot be					

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Bureau of Waste Prevention - Air Quality

Emission Unit - Organic Material Storage

2009 Year of record 53 DEP EU# (old Point #) 1190564 Facility AQ identifier

Complete	one AP-4	for EACH	organic i	material s	storage t	tank

ortant: n filling orms on	. Equipment Description				
computer, 1.	Facility identifiers:				
ey to	CLEAN HARBORS OF BRAINTREE				
your r – do	a. Facility name				
se the n key.	b. DEP Account number	1190564			
Ney.	b. DEP Account number	c. Facility AQ identifier – SSEIS ID number			
	Emission unit identifiers:				
	AG TANK B1- POLYOLEFIN WASTEWATER	NO VOCS			
	a. Facility's choice of emission unit name – edit as needed				
	53	53			
	b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #			
	d. Combined Units – enter number of individual units				
ne					
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			
delete		Complete only if the unit was shut down permanentl or replaced since the last report.			
? 4.	Emission unit replacement:				
	a. Is this unit replacing another emission unit?				
	□ □ DED!:	and a section of the state of t			
	✓ no				
	b. DEP's Emission Unit Number and facility unit name				
? 5.	Unit descriptions:				
	a. Description: ✓ above ground ☐ below groun	10			
	b. Roof type: floating roof internal roof				
	✓ fixed	Specify other			
	11.5 10 6250				
	c. Height / Length – feet d. Diameter – feet e. Capac	ity – gallons			
6.	Construction: ☐ steel weld ☑ other weld ☐ ri	vet			

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
53
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

CORROSIVES NO VOCS NOT APPLIBABLE T a. Name of material	O REPORT
a Name of material	
a. Name of material	7
	30187097
	c. SC Code for standing / breathing loss
	Noncommunica DCI et 050 C
	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)
1. Temperature typical storage temp. In Tamermon	g. / will dat all odgripat in gallons (citter of it not doca)
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 help DEP understand
your submission.	
	j. Oxygenate name – gasoline only New material stored (enter new material if conte a. Name of material b. CAS number if single chemical d. SC Code description – filled by eDEP f. Temperature – typical storage temp. in °Fahrenheit h. RVP – gasoline only j. Oxygenate name – gasoline only Notes and Attachments

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
52
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.	Equipmen	t Description		
the computer,	1.	Facility identifie	rs: 🛜		
use only the tab key to		CLEAN HARBO	ORS OF BRAINTRE	E	
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 A12-	6.300 GAL FUI	EL OIL # 2	
			of emission unit name –		
		52			52
		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 individ	dual units	
units :	3.	Emission unit ir	nstallation and deco	mmission dates:	
_		1/1/1985			
?			- 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 re	eplacement:		
		a. Is this unit re	placing another em	ission unit?	
		v 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 description	s:		
		a. Description:	✓ above ground	below groun	nd
		b. Roof type:	☐ floating roof ☑ fixed	internal roof other:	Specify other
		20	6	4000	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

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

A. Equipment Description (cont.)

7.	Material stored (at start of year):						
	FUEL NO. 2						
	a. Name of material						
	68476302	40301021					
	b. CAS number if single chemical	c. SC Code for standing / breathing loss					
	PETROLEUM STORAGEDIST FUEL NO.2						
<u> </u>	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C					
(I	52	19749.0000					
	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. 1.	Notes and Attachments Notes: please include in the space below any ac your submission.	dditional information that will help DEP understand					
		ments to this form. For attachments that cannot be					
	sent electronically, please list all such attachmer	its 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

2009
Year of record
51
DEP EU# (old Point #)
1190564
Facility AQ identifier

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 A13- 4,000 GAL #2 DIESEL -LOW	SULF
	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 #
	d. Combined Units – enter number of individual 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
		Complete only if the unit was shut down permanent 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:	
5.	Unit descriptions: a. Description: ✓ above ground ☐ below ground	und
5.	•	
5.	a. Description: ✓ above ground ☐ below ground b. Roof type: ☐ floating roof ☐ internal roof	

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

6. Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009 Year of record 51 DEP EU# (old Point #) 1190564

Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):		
	DIESEL FUEL # 2		
	a. Name of material		
	68334305	40301021	
	b. CAS number if single chemical	c. SC Code for standing / breathing loss	
	PETROLEUM STORAGEDIST FUEL NO.2		
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C	
(?)	52	106967.0000	
	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 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	ditional information that will help DEP understand	
	your submission.		
	2 Attachments: Check here to submit attach	ments 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

2009
Year of record
48
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.

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



Emission unit identifiers:

AG TANK P14- 2400 GAL DECOMMISSIONED 08/09

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

48

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:



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

8/7/2009

48

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



. 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

Year of record
48
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

2009 Year of record 47 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

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	1.	Facility identifiers:							
tab key to move your			DRS OF BRAINTRE	E					
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 P13- 2400 GAL DECOMMISSIONED 08/09							
		a. Facility's choice	of emission unit name -	edit as needed					
		47			47				
		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 individ	dual units					
unito .	3.	Emission unit ir	nstallation and deco	mmission dates:					
		1/1/1989			8/7/2009				
		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 re	eplacement:						
		a. Is this unit re	placing another em	ission unit?					
		☑ no □	yes – enter DEP's e	emissions unit nur	mber for the unit being replaced below:				
		b. DEP's Emission	Unit Number and facility	y unit name					
?	5.	Unit description	as:						
		a. Description:	✓ above ground	☐ below groun	nd				
		b. Roof type:	☐ floating roof ☑ fixed	internal roof other:	Specify other				
		6	8	2400	эреспу отнег				

e. Capacity - gallons

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

c. Height / Length – feet

d. Diameter - feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
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	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	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	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

BWP AQ AP-4

A. Equipment Description

Emission Unit - Organic Material Storage

2009
Year of record
46
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 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	1190564
	b. DEP Account number	c. Facility AQ identifier – SSEIS ID number



2. Emission unit identifiers:

AG TANK P12- 3,000 GAL DECOMMISSIONED 08/09					
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 #				

2 000 CAL DECOMMISSIONED 00/00



d. Combined Units – enter number of individual units

How to delete a unit?

3. Emission unit installation and decommission dates:

1/1/1989	8/7/2009			
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.

a. Is this unit replacing another emission unit?

Emission unit replacement:

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

 DEP's Emission Unit Number and facility unit nam
--

? 5.	Unit descriptions:							
	a. Description:	∠ at	oove ground	☐ belo	ow ground			
	b. Roof type: ☐ floating roof ☑ fixed		internal roof other:					
						Specify other		
	12		8		3000			
	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

2009
Year of record
46
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):	
	NONE	
	a. Name of material	
	The state of the s	40799998
	b. CAS number if single chemical	c. SC Code for standing / breathing loss
	MISC.CHEMICAL STORAGE	ů ů
_	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 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.	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

WP ΔΩ ΔΡ-4

Emission Unit – Organic Material Storage

2009 Year of record 45 DEP EU# (old Point #) 1190564 Facility AQ identifier

Complete one AP-4 for EACH organic material storage tank. 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 P11- 3,000 GAL DECOMMISSIONED 08/09 a. Facility's choice of emission unit name - edit as needed 45 45 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: 8/7/2009 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 a unit? or replaced since the last report. 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: v above ground below ground

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

Specify other

12 8 3000

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

✓ steel weld □ other weld □ rivet Construction: fiberglass

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

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	4070000
	h OAO ampharif signification to a visual	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

paper copy of this form.

Bureau of Waste Prevention – Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
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.
tab
1

combine units?

a unit?

Co	mplete one AP-4 for EACH organic material storage tai	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 P10- 3,000 GAL DECOMMISSIONED 0	08/09
	a. Facility's choice of emission unit name – edit as needed 44 b. Facility's emission unit number / code – edit as needed	44 c. DEP emissions unit # - SSEIS point #
	d. Combined Units – enter number of individual units	
3.	Emission unit installation and decommission dates: 1/1/1990	8/7/2009
	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

5.	Unit description	is:					
	a. Description:	✓ above ground	☐ belo	ow ground			
	b. Roof type:	☐ floating roof ☑ fixed	inte	ernal roof er:			
					Specify other		
	12	8		3000			
	c. Height / Length -	- feet d. Diameter - fe	eet	e. Capacity -	- gallons	=	
6.	Construction:	✓ steel weld	other we	eld 🗌 rivet	t fiberglass	☐ aunite	

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
44
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):	
	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

paper copy of this form.

Bureau of Waste Prevention - Air Quality

Emission Unit - Organic Material Storage

2009 Year of record 43 DEP EU# (old Point #) 1190564 Facility AQ identifier

	Coi	mplete one AP-4 for EACH organic material storage tai	1K.
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		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 P9- 3,000 GAL DECOMMISSIONED 08	3/09
		a. Facility's choice of emission unit name – edit as needed 43	40
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #
		b. Facility's emission unit number / code – edit as needed	c. DEF emissions unit # = 33E13 point #
?		d. Combined Units – enter number of individual units	
How to			
combine units ?			
	3.	Emission unit installation and decommission dates:	
		1/1/1989	8/7/2009
		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:	
		5	
		a. Description: above ground below ground below ground	nd
		h Doof trans. floating roof internal roof	4
		b. Roof type:	
		E IMOU	Specify other
		12 8 3000	
		c. Height / Length – feet d. Diameter – feet e. Capac	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
43
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
<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
	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	_
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	

paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
42
DEP EU# (old Point #)
1190564
Facility AQ identifier

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

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?

	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 P8- 3,000 GAL DECOMMISSIONED	08/09
	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 #
	d. Combined Units – enter number of individual units	
	1/1/1989	8/7/2009
	1/1/1989 a. Installation date – estimate if unknown (mm/dd/yyyy)	b. Decommission date (mm/dd/yyyy) - if applicable
4.		b. Decommission date (mm/dd/yyyy) – if applicable Complete only if the unit was shut down permanent
4.	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 permanent
4.	a. Installation date – estimate if unknown (mm/dd/yyyy) Emission unit replacement: a. Is this unit replacing another emission unit?	b. Decommission date (mm/dd/yyyy) – if applicable Complete only if the unit was shut down permanent
4.	a. Installation date – estimate if unknown (mm/dd/yyyy) Emission unit replacement: a. Is this unit replacing another emission unit?	b. Decommission date (mm/dd/yyyy) – if applicable Complete only if the unit was shut down permanently or replaced since the last report.
4 .	 a. Installation date – estimate if unknown (mm/dd/yyyy) Emission unit replacement: a. Is this unit replacing another emission unit? ✓ no yes – enter DEP's emissions unit replacement. 	b. Decommission date (mm/dd/yyyy) – if applicable Complete only if the unit was shut down permanently or replaced since the last report.
4 .	 a. Installation date – estimate if unknown (mm/dd/yyyy) Emission unit replacement: a. Is this unit replacing another emission unit? ✓ no yes – enter DEP's emissions unit replacement. b. DEP's Emission Unit Number and facility unit name 	b. Decommission date (mm/dd/yyyy) – if applicable Complete only if the unit was shut down permanently or replaced since the last report. number for the unit being replaced below:

other:

3000

e. Capacity - gallons

fixed

8

d. Diameter - feet

12

c. Height / Length - feet

Specify other

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

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				

paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
41
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Со	mplete one AP-4 for EACH organic material storage ta	nk.
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	
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 P7- 3,000 GAL DECOMMISSIONED 0	8/09
		a. Facility's choice of emission unit name – edit as needed	
		41	41
		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:	



1/1/1989

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

8/7/2009

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				er for the unit being replaced below:	
	b. DEP's Emission	n Unit Number and facility	unit name	3	
? 5.	Unit description	ns:			
	a. Description:	✓ above ground	☐ belo	ow ground	
	b. Roof type:	☐ floating roof ☑ fixed	☐ inte	ernal roof er:	Specify other
	12	8		3000	Specify officer
	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

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	c. OC Code for standing / breathing loss				
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
9	•					
(f)	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)				
	r. remperature – typicai 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 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. 30 code for standing / breathing loss				
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
	u. SC 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 add your submission.	ditional information that will help DEP understand				
:	2. Attachments: Check here to submit attachn	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

BWP AQ AP-4

Emission Unit - Organic Material Storage

Year of record
40
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 P6- 3,000 GAL DECOMMISSIONED 0	08/09				
		a. Facility's choice of emission unit name – edit as needed					
		40	40				
		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:					
		1/1/1989	8/7/2009				
(?)		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 ground	nd				
		b. Roof type:					
		10 0 0000	Specify other				
			city – gallons				
			٠٠٠- ١٠٠				

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

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 add	itional 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

paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
39
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 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	
	a. Facility name	
	34839	1190564
	b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
2.	Emission unit identifiers:	
	AG TANK P5- 3,000 GAL DECOMMISSIONED (08/09



a. Facility's choice of emission unit name – edit as needed
39

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

c. DEP emissions unit # - SSEIS point #

8/7/2009



3. Emission unit installation and decommission dates:

d. Combined Units - enter number of individual units

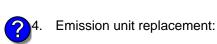


1/1/1080

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.



a. Is this unit replacing another emission unit?

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	inte	rnal roof er:			
	12	8		3000	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

Year of record
39
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 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	_				
B. 1.	Notes and Attachments Notes: please include in the space below any ac your submission.	dditional information that will help DEP understand				
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paper copy of this form.

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

A. Equipment Description

Emission Unit - Organic Material Storage

Year of record
38
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 computer,
use only the
tab key to
move your
cursor – do
not use the
return key.
tab

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 P4- 3,000 GAL DECOMMISSIONED	08/09			
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 – enter number of individual units

How to delete a unit?

3. Emission unit installation and decommission dates:

1/1/1989		8/7/2009
1 1 11 12 1 1	" ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	

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 u	nit replacement:
	a. Is this ur	nit replacing another emission unit?
	v no	yes – enter DEP's emissions unit number for the unit being replaced below:

6.	Construction:	steel weld	other weld	☐ rivet	fiberglass	gunite
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Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
38
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

	Material stored (at start of year):	
	NONE	
	a. Name of material	10700000
	b. CAS number if single chemical	delighted 20799998 c. SC Code for standing / breathing loss
	MISC.CHEMICAL STORAGE	c. So 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)
2	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
	garami, and	70 1 0 7
	j. Oxygenate name – gasoline only	_
3.		_
3.	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	dditional information that will help DEP understand
	j. Oxygenate name – gasoline only Notes and Attachments	_
	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_
	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_
	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_
	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_
	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_
	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_
	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_
	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_
	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_
	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_
	j. Oxygenate name – gasoline only 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

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Bureau of Waste Prevention - Air Quality

Emission Unit - Organic Material Storage

2009 Year of record 37 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.
37 []

۱. E	Equipment Description	
. F	acility identifiers:	
С	CLEAN HARBORS OF BRAINTREE	
a.	. Facility name	
3	4839	1190564
b.	. DEP Account number	c. Facility AQ identifier – SSEIS ID number
. Е	mission unit identifiers:	
Α	AG TANK P3- 3,000 GAL DECOMMISSIONED	0 08/09
A a.	AG TANK P3- 3,000 GAL DECOMMISSIONED . Facility's choice of emission unit name – edit as needed	
A a. 3	AG TANK P3- 3,000 GAL DECOMMISSIONED . Facility's choice of emission unit name – edit as needed	0 08/09 37 c. DEP emissions unit # – SSEIS point #
A a. 3	AG TANK P3- 3,000 GAL DECOMMISSIONED Facility's choice of emission unit name – edit as needed 7	37
A a. 3	AG TANK P3- 3,000 GAL DECOMMISSIONED Facility's choice of emission unit name – edit as needed 7	37
A a. 3	AG TANK P3- 3,000 GAL DECOMMISSIONED . Facility's choice of emission unit name – edit as needed 7 . Facility's emission unit number / code – edit as needed	37
A a. 3	AG TANK P3- 3,000 GAL DECOMMISSIONED . Facility's choice of emission unit name – edit as needed 7 . Facility's emission unit number / code – edit as needed	37

combine units?



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

8/7/2009 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:

1/1/1989

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	☐ below grou	ınd
	b. Roof type:	☐ floating roof ☑ fixed	internal roc	
	12	8	3000	Specify other

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

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
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					
	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 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 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

2009
Year of record
36
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 computer, use only the tab key to move your cursor – do not use the return key.

combine units?

a unit?

	p	······
A	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:	
۷.		00/00
	AG TANK P2- 3,000 GAL DECOMMISSIONED a. Facility's choice of emission unit name – edit as needed	08/09
	36	36
	b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # - SSEIS point #
	ST. GOM, G. ST. GOM, G. ST. G.	0. 2 _ 1. 0.1.100.01.0 u.i.u.
	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?	
	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	ınd
	, a and a g and a according	

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

internal roof

3000

e. Capacity – gallons

Specify other

other:

b. Roof type:

c. Height / Length – feet

12

☐ floating roof
✓ fixed

8

d. Diameter - feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

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 ^o 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

Emission Unit - Organic Material Storage

2009 Year of record 35 DEP EU# (old Point #) 1190564

Facility AQ identifier

Complete	one AP-4	for EAC	CH organi	ic material	storage	tank.

		proto ono ra e rot Erioti o gamo matorial otorago tal				
Important: When filling out forms on	A.	Equipment Description				
the computer, 1. Facility identifiers:						
tab key to CLEAN HARBORS OF BRAINTREE						
move your a. Facility name						
not use the		34839	1190564			
return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number			
Y	2.	Emission unit identifiers:				
return		AG TANK P1- 3,000 GAL - DECOMMISIONED	8/09			
		a. Facility's choice of emission unit name – edit as needed				
		35	35			
		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	8/7/2009			
		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	imber 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			
			opoon, onto			

3000

e. Capacity - gallons

8

d. Diameter - feet

12

c. Height / Length - feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
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				
	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 ^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

Emission Unit - Organic Material Storage

2009 Year of record 34 DEP EU# (old Point #) 1190564

Facility AQ identifier

Complete one AP-4 for EACH org	ganic material storage tank
--------------------------------	-----------------------------

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

	Implete one AF-4 for EACH organic material storage in	air.
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 F8- 1,500 GAL DECOMMISSIONED 0	8/09
	a. Facility's choice of emission unit name – edit as needed	
	34	34
	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	8/7/2009
	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	number for the unit being replaced below:
	b. DEP's Emission Unit Number and facility unit name	
	2. 22. 3 Emission one rampor and rasinty and ramit	



combine units?

? 5.	Unit descriptions
? 5.	Unit descriptions

a. Description: 🗹 above ground below ground

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

Specify other 9.5 5.33 1500

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

✓ steel weld □ other weld □ rivet Construction: fiberglass

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
34
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):				
	NONE				
	a. Name of material	4070000			
	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 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 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

WP AQ AP-4

Emission Unit - Organic Material Storage

2009 Year of record 32 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 computer
use only the
tab key to
move your
cursor – do
not use the
return key.

A. Equipment Description

1. Facility identifiers: CLEAN HARBORS OF BRAINTREE a. Facility name 34839 1190564



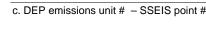
Emission unit identifiers:

b. DEP Account number

AG TANK F6- 2,000 GAL DECOMMISSIONED 08/09

a. Facility's choice of emission unit name - edit as needed 32

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



32

8/7/2009

c. Facility AQ identifier - SSEIS ID number



d. Combined Units - enter number of individual units

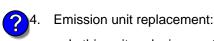


3. Emission unit installation and decommission dates:

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.



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	below ground		
	b. Roof type:	☐ floating roof ☑ fixed	internal roof other:		
	12.13	5.33	2000	Specify other	

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

6.	Construction:	✓ steel weld	other weld	☐ rivet	☐ fiberglass	gunite
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Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

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	4070000			
	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 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 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

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009 Year of record 31 DEP EU# (old Point #) 1190564

Facility AQ identifier

Complete one AP-4	for EACH	organic 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.

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 F5- 2,000 GAL DECOMMISSIONED 08/09

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

31

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

d. Combined Units - enter number of individual units

31

c. DEP emissions unit # - SSEIS point #



3. Emission unit installation and decommission dates:



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

8/7/2009

Specify other

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?

ves – 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

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

2009
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	4070000					
	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 additional 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

2009 Year of record 30 DEP EU# (old Point #) 1190564

Facility AQ identifier

Comple	te one	AP-4 fo	r EACH	organic	material	storage	tank

Important: When filling	Α.	Equipmen	t Description	1	
out forms on the computer,					
use only the tab key to		Facility identified	ORS OF BRAINTRI	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
tab					
	2.	Emission unit id	dentifiers:		
return		AG TANK F4-	2,000 GAL DECO	MMISSIONED 08	/09
			of emission unit name -	edit as needed	
		30			30
		b. Facility's emission	on unit number / code –	edit as needed	c. DEP emissions unit # - SSEIS point #
2		d. Combined Units	– enter number of indivi	idual units	
How to					
combine units?					
	3.	Emission unit in	nstallation and deco	ommission dates:	
		1/1/1983			8/7/2009
2			 estimate if unknown (r 	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.
<u> </u>	4.	Emission unit re	eplacement:		
•		a. Is this unit re	placing another em	nission unit?	
			-		
		v no □	yes – enter DEP's	emissions unit nu	mber for the unit being replaced below:
		b. DEP's Emission	Unit Number and facilit	y unit name	
?	5.	Unit description	is:		
•				—	
		a. Description:	✓ above ground	☐ below grour	nd
		b. Roof type:	floating roof	internal roof	f
			✓ fixed	other:	Specify other
		12.16	5.33	2000	epoor, outo

e. Capacity - gallons

c. Height / Length - feet

6. Construction:

d. Diameter - feet

✓ steel weld □ other weld □ rivet

☐ fiberglass ☐ gunite

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

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						
	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					
	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 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

paper copy of this form.

Bureau of Waste Prevention - Air Quality

WP AQ AP-4

A. Equipment Description

Emission Unit - Organic Material Storage

2009 Year of record 29 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 computer,
use only the
tab key to
move your
cursor – do
not use the
return key.
- A
tab

1.	Facility identifiers:	
	CLEAN HARBORS OF BRAINTREE	
	a. Facility name	
	34839	1190564
	b. DEP Account number	c. Facility AQ identifier – SSEIS ID number



Emission unit identifiers:

AG TANK F3-/SS 2,000 GAL DECOMMISSIONED 08/09				
a. Facility's choice of emission unit name – edit as needed				
29	29			
b. Facility's emission unit number / code - edit as needed	c. DEP emissions unit # - SSEIS point #			

d. Combined Units - enter number of individual units



?
low to delete
a unit ?

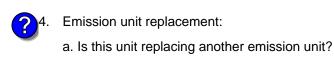
3. Emission unit installation and decommission dates:

8/7/2009

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.



✓ 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	☐ bel	ow ground			
	b. Roof type:	☐ floating roof ☑ fixed	☐ inte	ernal roof er:			
					Specify other		
	12.13	5.33		2000			
	c. Height / Length -	feet d. Diameter -	feet	e. Capacity -	gallons	_	

✓ steel weld □ other weld □ rivet □ fiberglass Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
29
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	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	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 conten	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 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	monte 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

2009
Year of record
28
DEP EU# (old Point #)
1190564
Facility AQ identifier

Complete one AP-4 for EACH organic material storage tan	ık.
---	-----

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	Equ	ipment	Descr	iption
-----	-------------	-----	--------	-------	--------

1. Facility identifiers:

CLEAN HARBORS OF BRAINTREE

a. Facility name

34839

tab



Emission unit identifiers:

b. DEP Account number

AG TANK F2- 2,000 GAL DECOMMISSIONED 08/09

a. Facility's choice of emission unit name – edit as needed 28

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

c. DEP emissions unit # - SSEIS point #

c. Facility AQ identifier - SSEIS ID number

1190564

28

8/7/2009



3. Emission unit installation and decommission dates:

d. Combined Units - enter number of individual units

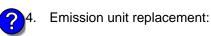
How to delete a unit?

4/4/4004

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

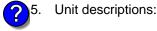
b. Decommission date (mm/dd/yyyy) - if applicable

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



a. Is this unit replacing another emission unit?

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



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

2009
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					
<u> </u>	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
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	-				
B. 1.	Notes and Attachments Notes: please include in the space below any ac your submission.	dditional information that will help DEP understand				
	 Attachments:	ments to this form. For attachments that cannot be its 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

2009 Year of record 27 DEP EU# (old Point #) 1190564

Facility AQ identifier

Complete one AP-	for EACH or	rganic material	storage tank
------------------	-------------	-----------------	--------------

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?

	Co	mplete one AP-4 for EACH organic material storage ta	ank.				
	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				
1	2.	Emission unit identifiers:					
J		AG TANK F1- 2,000 GAL DECOMMISSIONED 0	08/09				
		a. Facility's choice of emission unit name – edit as needed					
		27	27				
		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					
	J.						
		1/1/1983	8/7/2009				
_		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 replacing another emission unit?					
		Mana DEDia amiasiana unita	wash on for the wait being nonloced below.				
		✓ 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. Id shows ground. helpy ground.					
		a. Description: 🗹 above ground 🗌 below ground					
		h Roof type:	of				

6.	Construction:	steel weld	□ otner weid			☐ gunite
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Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
27
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

Material sto	ored (at start of year):						
NONE	NONE						
a. Name of ma	aterial						
		40706024					
	er if single chemical OETHYLENE-WORKING LOSS	c. SC Code for standing / breathing loss					
	escription – filled by eDEP	e. Vapor pressure in PSI at 25° C					
2)52	Scription filed by CDE1	0					
	e – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)					
h. RVP – gaso	line only	i. Total oxygen percent – gasoline only					
j. Oxygenate n	name – gasoline only	_					
8. New materi	al stored (enter new material if conte	nts changed during year of record):					
a. Name of ma	aterial						
b. CAS numbe	er if single chemical	c. SC Code for standing / breathing loss					
d. SC Code de	escription – filled by eDEP	e. Vapor pressure in PSI at 25° C					
f. Temperature	e – typical storage temp. in ^o Fahrenheit	g. Annual throughput in gallons					
h. RVP – gaso	line only	i. Total oxygen percent – gasoline only					
j. Oxygenate n	name – gasoline only	-					
B. Notes a	nd Attachments						
1. Notes : plea	ase include in the space below any a	dditional information that will help DEP understand					
1. Notes : plea		dditional information that will help DEP understand					
		dditional information that will help DEP understand					
		dditional information that will help DEP understand					
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		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

BWP AQ AP-4

Emission Unit - Organic Material Storage

Year of record
26
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?

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		1190564		
	b. DEP Account number		c. Facility AQ identifier – SSEIS ID number		
2.	Emission unit identifiers:				
	AG TANK A25- 1,000 GAL -NOT USED 20	09- PC	В		
	 a. Facility's choice of emission unit name – edit as needed 26 	ed	26		
	b. Facility's emission unit number / code – edit as neede	ed	c. DEP emissions unit # - SSEIS point #		
	d. Combined Units – enter number of individual units				
	d. Somblined Sinter Maniber of Individual diffic				
3.	Emission unit installation and decommission	dates:			
	1/1/1987		h December data (analytical). Year Parkin		
	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				
_	Heit descriptions				
5.	Unit descriptions:				
	a. Description: 🗹 above ground 🗌 below	w groun	d		
	b. Roof type:	nal roof			
		r:	Specify other		
			oponiy onto		

d. Diameter - feet

1000

e. Capacity - gallons

10.5

c. Height / Length – feet

Bureau of Waste Prevention – Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
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 ac your submission.	dditional 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

2009
Year of record
25
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Cor	omplete one AP-4 for EACH organic material storage tank.			
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	=F	
move your		a. Facility name	5110 01 B10 (111111)		
cursor – do 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 A24-	2,400 GAL - PCE	3	
			of emission unit name –		
		25			25
		b. Facility's emission	on unit number / code – e	edit as needed	c. DEP emissions unit # - SSEIS point #
		d. Octobra dillata		dual value	
How to combine units?		d. Combined Units	– enter number of indivi	dual units	
units:	3.	Emission unit ir	nstallation and deco	mmission dates:	
_		1/1/1983			
2			 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.
<u></u>	4.	Emission unit replacement:			
•		a. Is this unit re	placing another em	ission 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	
?	5.	Unit description	ns:		
		a. Description:	✓ above ground	below grour	nd
		b. Roof type:	☐ floating roof ☑ fixed	internal roof	
		40.5	7	0.400	Specify other
		10.5	7	2400	

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

2009
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 ?				
	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.	Notes : please include in the space below any ac your submission.	dditional information that will help DEP understand				
	your submission.					
	2 Attachments: Check here to submit attach	amonts 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

2009
Year of record
24
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Cor	mplete one AP-4 for EACH organic material stora	ge tanl	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 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	d	24
		b. Facility's emission unit number / code – edit as needed	 	c. DEP emissions unit # - SSEIS point #
?		d. Combined Units – enter number of individual units	<u></u>	
How to combine units ?				
	3.	Emission unit installation and decommission d	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.
	4.	Emission unit replacement:		
		a. Is this unit replacing another emission unit?		
	✓ no			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:	al roof	Specify other
		10.5 7 24	400	Opedity officer
		·		y – 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

2009
Year of record
24
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	e. Vapor pressure in PSI at 25° C				
T	52	1959.0000				
	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 contents	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				
	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 addi your submission.	tional information that will help DEP understand				
	your submission.					
	2 Attachments: Check here to submit attachm	onto to this form. For attachments that agreet 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
23
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Coi	mplete one AP-4 for EACH organic material storage tai	nk.
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 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 #
2		d. Combined Units – enter number of individual units	
How to combine units?		d. Combined Offics – effet flumber of individual diffic	
	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.
<u> </u>	4.	Emission unit replacement:	
		a. Is this unit replacing another emission unit?	
		and the time time replacing another enhanced and	
		✓ no yes – enter DEP's emissions unit nu	ımber 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
		inced Utilet.	Specify other

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

2400

e. Capacity - gallons

10.5

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

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
23
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):					
	OIL WITH POLYCHLORINATED BIPHENYLS	WITH POLYCHLORINATED BIPHENYLS				
	a. Name of material					
	1336363	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	2322.0000				
	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 ^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 adyour submission.	ditional information that will help DEP understand				
:	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

2009
Year of record
18
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 a. Facility name	
cursor – do not use the		34839	1190564
return key.		b. DEP Account number	c. Facility AQ identifier – SSEIS ID number
return	2.	Emission unit identifiers: AG TANK A17B- 750 GAL NOT USED IN 2009	
		a. Facility's choice of emission unit name – edit as needed	18
		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:	
How to delete a unit?		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.
<u> </u>	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 ☐ other:	Specify other
		6.5 4.83 700	ореспу оптет
		·	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

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	_				
		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 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 °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				
		<u> </u>				
	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 a	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 a	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 a	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 a	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 a	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 a	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 a	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 a	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 a	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 a	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 a	i. Total oxygen percent – gasoline only				

paper copy of this form.

Bureau of Waste Prevention - Air Quality

Emission Unit - Organic Material Storage

2009 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
out forms on
the computer,
use only the
tab key to
move your
cursor – do
not use the
return key.

A.	Equipment L	Description
1	Facility identifiers:	

BRAINTREE

a. Facility name 34839

b. DEP Account number

CLEAN HARBORS OF

1190564

c. Facility AQ identifier - SSEIS ID number



Emission unit identifiers:

AG TANK A11-	5 000 GAL	DECOMMISSIONED	12/09

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 #

d. Combined Units - enter number of individual units



3. Emission unit installation and decommission dates:



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

12/29/2009

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?

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

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



14

Unit descriptions:

a. Description: v above ground below ground

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

> Specify other 8.16 5200

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

✓ steel weld □ other weld □ rivet □ fiberglass Construction:

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

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	- V				
2	d. SC Code description – filled by eDEP 52	e. Vapor pressure in PSI at 25° C				
B	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 ^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

2009
Year of record
15
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.

combine units?

a unit?

Co	mplete one AP-4 for EACH organic material storage tar	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 A10- 9,800 GAL DECOMMISSIONED 1	2/09			
	a. Facility's choice of emission unit name – edit as needed				
	15	15			
	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:				
J.		40/00/0000			
	1/1/1987	12/29/2009			
	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:

Specify other 14.66 11.5 9800

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

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

A. Equipment Description (cont.)

7. M	Material stored (at start of year):				
Е	EMPTY				
a.	Name of material				
		40799998			
	CAS number if single chemical	c. SC Code for standing / breathing loss			
	IISC.CHEMICAL STORAGE	- Vanas processes in BCI at 050 C			
7)52	SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C			
	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				
	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 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				
B. N	lotes and Attachments				
	otes: please include in the space below any addit	ional information that will help DEP understand			
yo	our submission.				
2	Attachments: Check here to submit attachme	ants 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.

help

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
14
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Cor	mplete one AP-4 for EACH organic material storage tan	k.		
Important: When filling	A.	Equipment Description			
out forms on 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 A9- 5,000 GAL WASTE STREAM A21			
		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 #		
2		d. Combined Units – enter number of individual units			
How to		a. combined office of fidel nation of individual diffe			
combine units ?					
unito .	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		, , , , , , , , , , , , , , , , , , , ,	Complete 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:		
		yes enter ber semissions unit ha	mber for the drift 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			
		fixed other:			
		13 8.5 5000	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

2009
Year of record
14
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):				
	NON HALOGENATED FUEL				
	a. Name of material	7			
		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	20751.0000			
	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):			
	NON HALOGENATED FUEL	, ,			
	a. Name of material				
		40799998			
	b. CAS number if single chemical	c. SC Code for standing / breathing loss			
	MISC.CHEMICAL STORAGE	1.04			
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C 171957			
	f. Temperature – typical storage temp. in ^o Fahrenheit	g. Annual throughput in gallons			
	h. RVP – gasoline only	i. Total oxygen percent – gasoline only			
		i. Total oxygen percent – gasonne only			
	j. Oxygenate name – gasoline only	i. Total oxygen percent – gasonne omy			
	j. Oxygenate name – gasoline only	i. Total oxygen percent – gasonne omy			
3.	j. Oxygenate name – gasoline only Notes and Attachments	_			
3.	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	dditional information that will help DEP understand			
	j. Oxygenate name – gasoline only Notes and Attachments	_			
В.	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_			
3.	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_			
3.	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_			
3.	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_			
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3.	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_			
3.	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_			
3.	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_			
3.	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_			
3.	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_			
3.	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_			
3.	j. Oxygenate name – gasoline only Notes and Attachments Notes: please include in the space below any a	_			

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help

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
13
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Cor	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	E	
move your		a. Facility name	01.0 01 01.0		
cursor – do not use the		34839			1190564
return key.		b. DEP Account no	ımber		c. Facility AQ identifier – SSEIS ID number
tab					
	2.	Emission unit i	dentifiers:		
return		AG TANK A8-	5,000 GAL TANK	NOT USED IN 20	009
			of emission unit name -	edit as needed	
		13			13
		b. Facility's emissi	on unit number / code – e	edit as needed	c. DEP emissions unit # - SSEIS point #
2		d Combined Units	– enter number of individ	dual units	
How to		d. Combined Crite	onto nambor of marvis	addi di iito	
combine					
units?	3.	Emission unit i	nstallation and deco	mmission dates:	
	Э.		nstaliation and deco	illillission dates.	
		1/1/1987	actimate if unknown (n	om/dd/, n n n)	h Decemberies data (mm/dd/mm) if applicable
How to delete		a. Iristaliation date	 estimate if unknown (n 	iiii/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 r	eplacement:		
		a. Is this unit re	eplacing another em	ission unit?	
		✓ no	yes – enter DEP's e	emissions unit nu	mber for the unit being replaced below:
		b. DEP's Emission	n Unit Number and facility	v unit name	
			·		
6	\ 5.	Unit description	ns:		
U					
		a. Description:	above ground	below groun	nd
		b. Roof type:	☐ floating roof	internal roof	
		.71	✓ fixed	other:	
		40	0.5	5000	Specify other
		13	8.5	5000	

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

2009
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				
	The state of the s	40799998			
	b. CAS number if single chemical	c. SC Code for standing / breathing loss			
	MISC.CHEMICAL STORAGE	of Go Godo for otalianing for all ming for a			
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C			
9	52	120930			
4	f. Temperature – typical storage temp. in Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)			
	1. Temperature—typical storage temp. III T ameriliet	g. 7 militar timoagripat in ganorio (onter o il riot asca)			
?	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):			
	4. Hamo 5. Hatona				
	b. CAS number if single chemical	c. SC Code for standing / breathing loss			
	S. C. C. Hamber II diligio diformodi	of the standing producing loop			
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C			
	a. So code description mice by ober	c. vapor pressure in the at 25 G			
	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.				
	your outstriction.				
	2. Attachments: Check here to submit attach	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

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Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
12
DEP EU# (old Point #)
1190564
Facility AQ identifier

	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
tab			
X	2.	Emission unit identifiers:	
return		AG TANK A7- 9,000 GAL WASTE STREAM A-23	3
		a. Facility's choice of emission unit name – edit as needed	40
		b. Facility's emission unit number / code – edit as needed	12 c. DEP emissions unit # - SSEIS point #
		b. I domity 3 chilosion unit humber / code — cuit as needed	C. DET CHISSIONS WHILE # OGETO 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 yes – enter DEP's emissions unit nu	imber for the unit being replaced below:
		yes chief bet 3 chiesolis unit ha	imber for the drift being replaced below.
		DEDIC Forbish Hell Month of the Property of th	
		b. DEP's Emission Unit Number and facility unit name	
?	5.	Unit descriptions:	
		a. Description: ☑ above ground ☐ below groun	nd
		b. Roof type:	f
		✓ fixed	Specify other

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

9000

e. Capacity - gallons

10.5

d. Diameter - feet

14.66

c. Height / Length – feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009 Year of record 12 DEP EU# (old Point #) 1190564

Facility AQ identifier

A. Equipment Description (cont.)

7.	Material stored (at start of year):					
	OIL, GASOLINE AND WASTER MIXTURE					
	a. Name of material					
		40722098				
	b. CAS number if single chemical	c. SC Code for standing / breathing loss				
	ORGANIC CHEM.SPECIFY IN COMMNETS	Ç Ü				
_	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
7	52	24225.0000				
•	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): ʔ				
	OIL, GASOLINE AND WASTER MIXTURE					
	a. Name of material					
		40722098				
	b. CAS number if single chemical	c. SC Code for standing / breathing loss				
	ORGANIC CHEM.SPECIFY IN COMMNETS	3.25				
	d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C				
	52	142251				
	f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons				
	i. remperature typicar storage temp. iii i amerinen	g. / will dai will begrip de ill gallono				
	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	Iditional 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

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Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
11
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Cor	omplete 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 A6- 9,000 GAL WASTE STREAM A-2	3			
		a. Facility's choice of emission unit name – edit as needed	44			
		b. Facility's emission unit number / code – edit as needed	c. DEP emissions unit # – SSEIS point #			
		b. I acility 3 emission unit number / code — edit as needed	c. DET GITISSIONS WITH # — SOCIO POINT #			
How to combine units ?		d. Combined Units – enter number of individual 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				
		b. DEP's Emission Unit Number and facility unit name				
?	5.	Unit descriptions:				
		a. Description: 🗹 above ground 🗌 below grou	nd			
		b. Roof type:				
			Specify other			

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

9000

e. Capacity - gallons

10.5

d. Diameter - feet

14.66

c. Height / Length – feet

Bureau of Waste Prevention - Air Quality

BWP AQ AP-4

Emission Unit - Organic Material Storage

2009
Year of record
11
DEP EU# (old Point #)
1190564

Facility AQ identifier

A. Equipment Description (cont.)

7. Material stored (at start of year):	
GASOLINE, OIL AND WATER	
a. Name of material	40799998
b. CAS number if single chemical	c. SC Code for standing / breathing loss
MISC.CHEMICAL STORAGE	3.250
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C
? 52	120949.0000
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 cont GASOLINE OIL AND WATER a. Name of material	rents changed during year of record):
a. Name of material	40799998
b. CAS number if single chemical	c. SC Code for standing / breathing loss
MISC.CHEMICAL STORAGE	3.25
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25° C
52	166706
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	<u> </u>
B. Notes and Attachments	
 Notes: please include in the space below any a your submission. 	additional information that will help DEP understand
2. Attachments: Check here to submit attachments	chments 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
10
DEP EU# (old Point #)
1190564
Facility AQ identifier

	Co	mplete one AP-4 for EACH organic material storage tan	ık.
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 A5- 5,200 GAL NOT USED 2005	
		a. Facility's choice of emission unit name – edit as needed	
		10	10
		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?	2	Envisoion unit installation and decommission dates.	
	3.	Emission unit installation and decommission dates:	
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 – estimate il diffinown (him/od/yyyy)	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 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:	Specify other
		10.5 10.5 5200 c. Height / Length – feet d. Diameter – feet e. Capac	ity – gallons
		5	

✓ 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
10
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				
	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.	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

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Bureau of Waste Prevention - Air Quality

WP AQ AP-STACK

Physical Vertical Stacks

2009
Year of record
9
DEP Stack #
1190564
Facility AQ identifier

Complete one AP-STACK form for EACH physical stack at the facility

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









How to delete a stack?

200 200		•	• •	_	
CLEAN HARBORS OF BRAINTREE a. Facility name 34839 b. DEP Account number 2. Stack identifiers: 1 STACK-2 FURNACES LENNOX REMOVED FROM SERVICE 09 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: 15	Α.	. Stack Descript	on		
CLEAN HARBORS OF BRAINTREE a. Facility name 34839 b. DEP Account number 2. Stack identifiers: 1 STACK-2 FURNACES LENNOX REMOVED FROM SERVICE 09 a. Facility's choice of stack name – edit as needed 9 b. Facility's stack number – edit as needed 7 5. Gas exit velocity: 6. Exit temperature: 1 STACK-2 FURNACES LENNOX REMOVED FROM SERVICE 09 a. Facility's choice of stack name – edit as needed 9 c. DEP stack # – old SSEIS stack # 0.6 Internal Diameter in feet 15 Low end - feet per second (0.1 – 500) 200 Low end - Fahrenheit (50 – 1800) 7. Stack liner material: I metal brick refractory other:	1.	Facility identifiers:		Hov	w to report combined units/stacks: see 3b b
a. Facility name 34839 b. DEP Account number 2. Stack identifiers: 1 STACK-2 FURNACES LENNOX REMOVED FROM SERVICE 09 a. Facility's choice of stack name – edit as needed 9 b. Facility's stack number – edit as needed 7 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 above the ground 15 Low end - feet per second (0.1 – 500) 200 Low end - °Fahrenheit (50 – 1800) 7. Stack liner material: metal brick refractory other:		•	E BRAINTREE		
1190564			FBRAINTREE		
b. DEP Account number C. AQ identifier – SSEIS ID number 2. Stack identifiers: 1 STACK-2 FURNACES LENNOX REMOVED FROM SERVICE 09 a. Facility's choice of stack name – edit as needed 9 b. Facility's stack number – edit as needed 7. Type: a. vertical vertical with rain cap/sleeve b. Combined stacks – enter number of individual stacks 28 Height in feet above the ground 5. Gas exit velocity: 6. Exit temperature: 15 Low end - feet per second (0.1 – 500) 200 Low end - Fahrenheit (50 – 1800) 7. Stack liner material: metal brick refractory other:		•		1100564	
2. Stack identifiers: 1 STACK-2 FURNACES LENNOX REMOVED FROM SERVICE 09 a. Facility's choice of stack name – edit as needed 9 b. Facility's stack number – edit as needed 7. Type: a. vertical vertical with rain cap/sleeve b. Combined stacks – enter number of individual stacks 1 Stack liner material: vertical with rain cap/sleeve b. Combined stacks – enter number of individual stacks 1 Stack liner material: vertical with rain cap/sleeve b. Combined stacks – enter number of individual stacks 1 Stack liner material: vertical with rain cap/sleeve b. Combined stacks – enter number of individual stacks 1 Stack liner number of individual stacks 2 Stack liner number of individual stacks 1 Stack liner number of individual stacks 1 Stack liner number of individual stacks 1 Stack liner number of individual stacks 2 Stack liner number of individual stacks 2 Stack liner number of individual stacks 1 Stack liner number of individual stacks 2 Stack liner number of individual stacks 1 Stack liner number of individual stacks 2 Stack liner number of individual stacks 3 Stack liner number of individual stacks 2 Stack liner number of individual stacks 3 Stack liner number of individual stacks 3 Stack liner number of individual stacks 4 Stack liner number of individual stacks 5 Stack liner number of individual stacks 5 Stack liner number of individual stacks 6 Stack liner number of individual stacks 1 Stack liner number of individual stacks 1 Stack liner number of individual stacks 2 Stack liner number of individual stacks 3 Stack liner number of individual stacks 5 Stack liner number of individual stacks 6 Stack liner n					er – SSEIS ID number
a. Facility's choice of stack name – edit as needed 9 b. Facility's stack number – edit as needed 7 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: 5. Gas exit velocity: 6. Exit temperature: 7. Stack liner material: ✓ metal ☐ brick refractory ☐ other:		b. DET Account number		C. AQ Identilie	ei – Socio ib nambei
a. Facility's choice of stack name – edit as needed 9 b. Facility's stack number – edit as needed 7 c. DEP stack # – old SSEIS stack # 9 c. DEP stack # – old SSEIS stack # 1 7 c. DEP stack # – old SSEIS stack # 1 7 c. DEP stack # – old SSEIS stack # 1 7 c. DEP stack # – old SSEIS stack # 1 7 c. DEP stack # – old SSEIS stack # 1 7 c. DEP stack # – old SSEIS stack # 1 7 6 7 6 7 7 7 7 7 8 7 8 7 8 9 8 7 8 9 8 9 8 9 8	2.	Stack identifiers: (?			
a. Facility's choice of stack name – edit as needed 9 b. Facility's stack number – edit as needed 7 c. DEP stack # – old SSEIS stack # 9 c. DEP stack # – old SSEIS stack # 1 5. Cas exit velocity: 15 15 15 15 15 15 16 15 16 16 17 18 10 19 10 10 10 11 15 15 15 15 15 15 15 15 15 15 16 15 15 16 15 16 15 16 16 17 18 19 19 10 10 10 10 10 10 10 10 10 10 10 10 10		1 STACK-2 FURNACI	S LENNOX REMOVED FR	OM SERVIC	CF 09
b. Facility's stack number – edit as needed 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				0 02	, <u> </u>
b. Facility's stack number – edit as needed 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		•		9	
3. Type: a. ✓ vertical ✓ vertical with rain cap/sleeve b. Combined stacks – enter number of individual stacks. 4. Dimensions: 5. Gas exit velocity: 6. Exit temperature: 7. Stack liner material: ✓ metal ☐ brick refractory ☐ other: 28 Height in feet above the ground 15 Low end - feet per second (0.1 – 500) 200 High end - feet per second (0.2 200) High end - feet per second (50 – 1800)		b. Facility's stack number –	edit as needed	c. DEP stack	# - old SSEIS stack #
4. Dimensions: Begin black 28 Height in feet above the ground 15 15 15 Cow end - feet per second (0.1 – 500) 200 Exit temperature: Comparison: 28 Height in feet above the ground 15 15	_	<u></u>			
4. Dimensions: Height in feet above the ground 15 Low end - feet per second (0.1 – 500) 200 Low end - ⁰Fahrenheit (50 – 1800) This product in feet 15 High end - feet per second (0.2 200) High end - ⁰ Fahrenheit (50 – 1800) The product in feet 15 High end - feet per second (0.2 200) High end - ⁰ Fahrenheit (50 – 1800) The product in feet 15 High end - feet per second (0.2 200) High end - ⁰ Fahrenheit (50 – 1800) The product in feet 15 High end - feet per second (0.2 200) High end - ⁰ Fahrenheit (50 – 1800) The product in feet 15 High end - feet per second (0.2 200) High end - ⁰ Fahrenheit (50 – 1800)	3.	Type: a. ✓ vertical 🔲 v	ertical with rain cap/sleeve b. Co	mbined stacks	– enter number of individual stacks:
5. Gas exit velocity: 6. Exit temperature: 15 Low end - feet per second (0.1 – 500) 200 Low end - °Fahrenheit (50 – 1800) 7. Stack liner material: metal brick refractory other:	4	Dimensions	28		0.6
 Gas exit velocity: Low end - feet per second (0.1 – 500) 200 High end - ⁰ Fahrenheit (50 – 1800) Stack liner material: ✓ metal ☐ brick refractory ☐ other: 	4.	Dimensions:	Height in feet above the groun	d	Internal Diameter in feet
6. Exit temperature: 200 Low end - 1eet per second (0.1 - 500) Aligh end - 1eet per second (0.2 - 500) High end - 1eet per second (0.2 - 500) The second end - 1eet per second (0.2 - 500) High end - 1e	_	Coo ovit volocitu	15		15
 6. Exit temperature: Low end - °Fahrenheit (50 – 1800) High end - ° Fahrenheit (50 – 1 7. Stack liner material: ✓ metal ☐ brick refractory ☐ other: 	Э.	Gas exit velocity:	·	- 500)	High end - feet per second (0.1 – 500)
7. Stack liner material: ✓ metal ☐ brick refractory ☐ other:	6	Evit tomporatura:			
	О.	Exit temperature.	Low end - ⁰ Fahrenheit (50 – 18	300)	High end - ⁰ Fahrenheit (50 – 1800)
	7	Stack liner material:	✓ metal □ brick refractory	Other:	
Describe Other	٠.	Stack inter material.	Filletai Dilek Terractory	☐ outer.	
Describe Other				-	
				Describe Oth	er
8. Decommission date – if applicable: (mm/dd/yyyy) Complete only if the stack was permanently re	8.	Decommission date –	if applicable:		

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 uni
(i.e., AP1,
AP2, or AP3).

EU#64-2 LENNOX FURNACES SR 20Q5-140/154 0.246 MMBTU/HR	

Bureau of Waste Prevention - Air Quality

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

2009

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

2009	
Year of record	
7	
DEP Stack #	
1190564	
Facility AQ identifier	

Complete one AP-STACK form for EACH physical stack at the facility

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









a stack?

		•	• •	_			
Important: When filling out forms on	A.	Stack Description	n	How	to report combined units/stacks: see 3b below		
the computer, use only the tab key to move your	1.	Facility identifiers:					
		CLEAN HARBORS OF	BRAINTREE				
cursor - do not		a. Facility name					
use the return		34839		1190564			
key.		b. DEP Account number		c. AQ identifier	- SSEIS ID number		
tab	2.	Stack identifiers: ?					
		1 STACK GENERATO	OR (2)- CUMMINS AND CA	TERPILLAR			
		a. Facility's choice of stack nar	ne – edit as needed				
return		7		7			
		b. Facility's stack number – edit as needed		c. DEP stack # - old SSEIS stack #			
	3.	Type: a. ✓ vertical vertical with rain cap/sleeve b. Combined stacks – enter number of individual stacks:					
		D'arrain a	12		0.8		
	4.	Dimensions:	Height in feet above the ground	d	Internal Diameter in feet		
hat to wif data unknown or	_	One mit walanit w	32		32		
available ?	5.	Gas exit velocity:	Low end - feet per second (0.1	- 500)	High end - feet per second (0.1 – 500)		
ia valiabio i	_		1150		1150		
	6.	Exit temperature:	Low end - ⁰ Fahrenheit (50 – 18	300)	High end - ⁰ Fahrenheit (50 – 1800)		
	7.	Stack liner material:	metal	other:			
				Describe Other	•		
	8.	Decempiosion data if	annlicable:				
How to delete	ο.	Decommission date – if a	applicable. (mm/dd/y)	vyy) Complete on	ly 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 uni
(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 PERS

Bureau of Waste Prevention - Air Quality

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

2009

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.

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

BWP AQ AP-STACK

Physical Vertical Stacks

2009
Year of record
5
DEP Stack #
1190564
Facility AQ identifier

	Co	mplete one AP-STACK for	m for EACH phys	sical stack at the f	facility		
Important: When filling out forms on	A.	Stack Description	on		How to	report combined units/stacks: see 3b below	
the computer, use only the	1.	Facility identifiers:					
tab key to move your		CLEAN HARBORS OF	BRAINTREE				
cursor - do not		a. Facility name		110	0564		
use the return key.		b. DEP Account number			c. AQ identifier – SSEIS ID number		
tab	2.	Stack identifiers:					
		2 DRUM CRUSHING LINES- NOT USED 09					
return		a. Facility's choice of stack name – edit as needed					
		5 b. Facility's stack number – ed	dit as needed	5	ED stock #	old SSEIS stack #	
		·			_F SIACK # -	- Old SSEIS Stack #	
	3.	Type: a. 🗹 vertical 🗌 ve	rtical with rain cap/sle	eeve b. Combined	d stacks – ei	nter number of individual stacks:	
	4.	Dimensions:	54			1.3	
What to sif data	••	Dimendione.	Height in feet abo	ove the ground		Internal Diameter in feet 54	
is unknown or unavailable?	5.	Gas exit velocity:		er second (0.1 – 500)	<u> </u>	High end - feet per second (0.1 – 500)	
unavaliable !	_	Fuit to see a section of	60	(60	
	6.	Exit temperature:	Low end - °Fahre	enheit (50 – 1800)		High end - ⁰ Fahrenheit (50 – 1800)	
	7.	7. Stack liner material: ✓ metal ☐ brick refractory ☐ other:					
				Dosc	cribe Other		
				Desc	Tibe Other		
How to delete a stack?	8.	Decommission date – if	applicable:	(mm/dd/yyyy) Co	mplete only	if the stack was permanently removed	
	В.	3. Emission Units Associated with Stack – eDEP Only					
	ent		changes on the f	forms for each er	mission ur	is for information only – no data nit (i.e., AP1, AP2, or AP3). Note: bmitted.	
Important: To assign an		EU#5-2 DRUM CR	USHING LIN	ES			
emission unit							
to this stack, enter the Stack Id No.							
on the form for the emission unit							
(i.e., AP1, AP2, or AP3).							

Bureau of Waste Prevention - Air Quality

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

2009

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

WP AQ AP-STACK

Physical Vertical Stacks

2009	
ear of record	
ļ.	
EP Stack #	
190564	
acility AQ identifier	

Complete one AP-STACK form for EACH physical stack at the facility

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







? f data
What to sif data
is unknown or
unavailable?

How to delete a stack?

A	a. Stack Descript	ion		
1.	Facility identifiers:		-	low to report combined units/stacks: see 3b belo
	CLEAN HARBORS O	F BRAINTRFF		
	a. Facility name			
	34839		1190564	
	b. DEP Account number		c. AQ ident	tifier – SSEIS ID number
2.	Stack identifiers:			
	THREE DISTILLATION	N UNITS DECO	MMISSIONED	
	a. Facility's choice of stack	name – edit as neede	ed	
	4		4	
	b. Facility's stack number –	edit as needed	c. DEP stace	ck # - old SSEIS stack #
3.	Type: a. 🗹 vertical 🔲 v	vertical with rain cap/s	sleeve b. Combined stack	cs – enter number of individual stacks:
		70		2
4.	Dimensions:	Height in feet a	above the ground	Internal Diameter in feet
_	0 '' 1 ''	15		15
5.	Gas exit velocity:	Low end - feet	per second (0.1 - 500)	High end - feet per second (0.1 – 500)
6	Cvit tomporatura	70		70
6.	Exit temperature:	Low end - ⁰ Fah	renheit (50 – 1800)	High end - ⁰ Fahrenheit (50 – 1800)
7.	Stack liner material:	✓ metal	ck refractory	:
			Describe O	Other
0	Decempiosion data	if applicable:	8/7/2009	
8.	Decommission date –	п аррпсавіе.	(mm/dd/yyyy) Complete	e 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#4-THREE DISTILLATION UNITS 710 GAL/HR NOT USED 2008
EU#61-REPACKAGING SOLVENTS NOT USED IN 2008 BEING CLOSED

Bureau of Waste Prevention - Air Quality

WP AQ AP-STACK

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

C. Notes and Attachments

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

PLANING TO PUT SOLVENT RECOVERY OPERATIONS THROUGH CLOSURE IN 2008. WORKING WITH MA DEP. SOLVENT RECOVERY UNIT IN THE PROCESS OF BEING PUT THROUGH CLOSURE. EXPECTED COMPLETION DATE JUNE 12, 2009. CLOSURE UNDER A MA DEP APPROVED PLAN.

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.

2009

Bureau of Waste Prevention - Air Quality

BWP AQ AP-STACK

Physical Vertical Stacks

A. Stack Description

8. Decommission date – if applicable:

2009
Year of record
3
DEP Stack #
1190564
Facility AQ identifier

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

Complete one AP-STACK form for EACH physical stack at the facility

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









out forms on				How	to report combined units/stacks: see 3b below
the computer, 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 identifier	- SSEIS ID number
tab	2.	Stack identifiers:			
•		1 STACK BOILER #1-	CLEAVER BROOKS- #2 C)IL	
		a. Facility's choice of stack nar	me – edit as needed		
return		3		3	
		b. Facility's stack number – ed	it as needed	c. DEP stack #	- old SSEIS stack #
	3.	Type: a. ✓ vertical ver	tical with rain cap/sleeve b. Co	mbined stacks –	enter number of individual stacks:
		5	35		1
(?)	4.	Dimensions:	Height in feet above the ground	1	Internal Diameter in feet
What to so if data	_	0	47		47
is unknown or unavailable?	5.	Gas exit velocity:	Low end - feet per second (0.1	– 500)	High end - feet per second (0.1 – 500)
	6.	Evit town a notion	450		450
		Exit temperature:	Low end - °Fahrenheit (50 – 18	00)	High end - ⁰ Fahrenheit (50 – 1800)
	7.	Stack liner material:	metal brick refractory	other:	
				Describe 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).

How to delete a stack?

EU#3-BOILER #1-CLEAVER BROOKS- #2 OIL 0.3 PERCENTSULFUR	

Bureau of Waste Prevention - Air Quality

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

2009

Year of record

C. Notes and Attachments

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

2. Attachments:

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Bureau of Waste Prevention - Air Quality

NP AQ AP-STACK

Physical Vertical Stacks

2009
Year of record
2
DEP Stack #
1190564
Facility AQ identifier

Complete one AP-STACK form for EACH physical stack at the facility

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

Important: When filling out forms on	A	. Stack Descripti	on	How to report combined units/stacks: see 3b below	
the computer, use only the	1.	Facility identifiers:		The wite report combined dimerclastic. Good as below	
tab key to		CLEAN HARBORS OF	BRAINTREE		
move your cursor - do not		a. Facility name			
use the return		34839	11	90564	
key.		b. DEP Account number		c. AQ identifier – SSEIS ID number	
tab	2.	Stack identifiers:			
		STACK #2- BOILER #	2- HURST #30- #2 OIL 0.3 PER.	S	
		a. Facility's choice of stack n	ame – edit as needed		
return		2	2		
		b. Facility's stack number – e	edit as needed c. [DEP stack # - old SSEIS stack #	
	3.	Type: a. 🗹 vertical 🔲 ve	ertical with rain cap/sleeve b. Combin	ed stacks – enter number of individual stacks:	
			35	1	
(?)	4.	Dimensions:	Height in feet above the ground	Internal Diameter in feet	
What to if data			50	50	
is unknown or unavailable?	5.	Gas exit velocity:	Low end - feet per second (0.1 – 50	High end - feet per second (0.1 – 500)	
unavanable :			212	212	
	6.	Exit temperature:	Low end - ⁰ Fahrenheit (50 – 1800)	High end - ⁰ Fahrenheit (50 – 1800)	
	7.	Stack liner material:	✓ metal ☐ brick refractory ☐		
			De	scribe Other	
?	8.	Decommission date – i	f applicable: (mm/dd/yyyy)	omplete only if the stack was permanently removed	

How to delete a stack?

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#2-BOILER #2-HURS1 #30 1.004 MMB1U/HR #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

2009

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

2009
Year of record
10
DEP Stack #
1190564
Facility AQ identifier

Complete one AP-STACK form for EACH physical stack at the facility Important: A. Stack Description When filling out forms on How to report combined units/stacks: see 3b below the computer, 1. Facility identifiers: use only the tab key to **CLEAN HARBORS OF BRAINTREE** move your a. Facility name cursor - do not 34839 1190564 use the return c. AQ identifier - SSEIS ID number key b. DEP Account number 2. Stack identifiers: **CUT OFF ROOM 2008** a. Facility's choice of stack name - edit as needed 10 10 b. Facility's stack number - edit as needed c. DEP stack # - old SSEIS stack # Type: a. vertical vertical with rain cap/sleeve b. Combined stacks - enter number of individual stacks: 18 **Dimensions:** Height in feet above the ground Internal Diameter in feet What t 15 is unknown or Gas exit velocity: Low end - feet per second (0.1 - 500)High end - feet per second (0.1 - 500)unavailable? Exit temperature: Low end - ⁰Fahrenheit (50 – 1800) High end - ⁰ Fahrenheit (50 – 1800) Stack liner material: metal brick refractory other: Describe Other Decommission date – if applicable: (mm/dd/yyyy) Complete only if the stack was permanently removed How to delete a stack? 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).

Bureau of Waste Prevention - Air Quality

Year of record 10 WP AQ AP-STACK DEP Stack # 1190564 Emission Unit - Fuel Utilization Equipment Facility AQ identifier

C. Notes and Attachments

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

PAINT SQUISHER WAS REMOVED FROM CUT OFF ROOM. THIS ROOM IS **USED TO PUMP FLAMMABLE DRUMS.**

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.

2009

Bureau of Waste Prevention - Air Quality

WP AQ AP-STACK

Physical Vertical Stacks

2009
Year of record
1
DEP Stack #
1190564
Facility AQ identifier

Complete one AP-STACK form for EACH physical stack at the facility

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

2.

3.

5.

6.

7.

A.	Stack Descriptio	n		
			How	to report combined units/stacks: see 3b below
1.	Facility identifiers:			
	CLEAN HARBORS OF I	BRAINTREE		
	a. Facility name			
	34839		1190564	
	b. DEP Account number		c. AQ identifier	- SSEIS ID number
2.	Stack identifiers:			
	STACK #1- INCINERAT	OR #1-VENT-O-MATIC- NA	A 2007	
	a. Facility's choice of stack nan	ne – edit as needed		
	1		1	
	b. Facility's stack number – edi	t as needed	c. DEP stack #	- old SSEIS stack #
3.	Type: a. ✓ vertical vertical vertical	ical with rain cap/sleeve b. Con	nbined stacks –	enter number of individual stacks:
4	Dimensions	185		1.2
4.	Dimensions:	Height in feet above the ground		Internal Diameter in feet
_		21		21
5.	Gas exit velocity:	Low end - feet per second (0.1 -	– 500)	High end - feet per second (0.1 – 500)
		240		240
6.	Exit temperature:	Low end - ⁰ Fahrenheit (50 – 180	00)	High end - ⁰ Fahrenheit (50 – 1800)
7.	Stack liner material:	metal	other:	
			Describe Othe	r

How to delete a stack?

What t is unknown or

unavailable?

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 uni
(i.e., AP1,
AP2, or AP3).

EU#1-STACK 1 POINT 1 SEGMENT

Bureau of Waste Prevention - Air Quality

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

2009

C. Notes and Attachments

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

INCINERATOR #1-VENT-O-MATIC- NOT OPERATED IN 2009

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-TES

Total Emissions Statement & Hazardous Air Pollutant List

Year of record 1190564 Facility AQ identifier

A. Annual Total Emissions Statement

Importa	nt:
---------	-----

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 HARBORS OF BRAIN	CLEAN	HARBORS	OF	BRAIN	TREE
-------------------------------	--------------	---------	----	-------	------

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	.0445	.0303	.6033	.5142	.1206
	eDEP only:	Tons	Tons	Tons	Tons	Tons
	Actual for year of record:	0.0317	0.0183	0.2699	0.4974	0.1077
		Tons	Tons	Tons	Tons	Tons
	Potential emissions at max	9.6157	9.3725	16.5201	143.1452	35.7008
	capacity uncontrolled:	Tons	Tons	Tons	Tons	Tons
	Facility-wide max allowed				17.3	
(emissions – annual:	Tons	Tons	Tons	Tons	Tons
g o	Facility-wide max allowed				9400	
-ķi	emissions – short term:	Pounds	Pounds	Pounds	Pounds	Pounds
향達	Short term period:				MONTH	
Facility-wide estrictions on	Basis: DEP approval number or regulation:				MBR-95-RES-047	
	,					
	Pollutant:	voc	HOC	*Reserved*	NH3	☐ *Reserved*
	Actual for previous year	.0226	0	0	.0302	.12
	eDEP only:	Tons	Tons	Tons	Tons	Tons
	Actual for year of record:	0.0204	0	0	0.0115	
		Tons	Tons	Tons	Tons	Tons
	Potential emissions at max	41.8513	0	0	0.8320	
	capacity uncontrolled:	Tons	Tons	Tons	Tons	Tons
ĺ	Facility-wide max allowed	36.2				
<u>></u>	emissions – annual:	Tons	Tons	Tons	Tons	Tons
o ge	Facility-wide max allowed	23600				
-wi	emissions – short term:	Pounds	Pounds	Pounds	Pounds	Pounds
Facility-wide estrictions only	Short term period:	MONTH				
Est est	Basis: DEP approval number or regulation:	MBR-95-RES-047				



Bureau of Waste Prevention - Air Quality

BWP AQ AP-TES

2009
Year of record
1190564
Facility AQ identifier

Total Emissions Statement & Hazardous Air Pollutant List

A. Annual Total Emissions Statement (co	ont.`	١
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	86-COM-027	376680		GALLONS	YEAR		
DEP a	pproval # (most recent)	Amount of restric	ction	Restriction units	Per unit time		
NUMB	ER 2 OIL 0/3PERCENT S	SULPHUR					
Descrip	otion of fuel, raw material	or product restricted					
	39-COM-31	300		HOUR	YEAR		
'	pproval # (most recent)	Amount of restric	tion	Restriction units	Per unit time		
	ER 2 OIL 0/3PERCENT S						
Descrip	otion of fuel, raw material	or product restricted	J				
		444050		0.411.0310	\(\pi \)		
EXEM	· ·	111252		GALLONS	YEAR		
	pproval # (most recent)	Amount of restric	tion	Restriction units	Per unit time		
	NUMBER 2 OIL 0/3PERCENT SULPHUR						
Descrip	otion of fuel, raw material	or product restricted					
. Gre	enhouse Gas	List					
			wing gre	enhouse gas chemicals	s are used and/or emitte		
	ecking the appropria	te box:					
by ch	Consists of		Haa	C mo: 44 o al			
,	Emitted	NaO	Use	Emitted	one (UEC'e)		
by ch Use	Nitroug ovido		H	Hydrofluorocarbons (HFC's)			
•	☐ Nitrous oxide	Sulfur Hexafluoride (SF6) Perfluorocarbons (PFCs)					
,		ioride (SF6)	ш		,		
		ioride (SF6)	Ш		` '		

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

 what to report and what not to report here

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

yes - indicate which che	micals are used and w	hich are emitted by cl	hecking the appropriate boxe
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 ☐ 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		☐ Allyl chloride ☐ 4-Aminobiphenyl ☑ Aniline ☐ o-Anisidine ☑ Asbestos ☑ Benzene ☐ Benzidine ☐ Benzotrichloride ☐ Benzyl chloride	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

2009 Year of record

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

Use Emitted CAS # Use Emitted	CAS#
☐ ☐ Biphenyl 92-52-4 ☐ ☐ 2,4-Dinitrotoluene	121-14-2
☐ ☐ Bis(2-ethylhexyl)phthalate	
☐ ☐ Bis(chloromethyl)ether 542-88-1 ☐ ☐ 1,2-Diphenylhydrazine	122-66-7
☐ ☐ Bromoform 75-25-2 ☐ ☐ Epichlorohydrin (1-Chloro-2,3-epoxyp	
☐ ☐ 1,3-Butadiene ☐ ☐ ☐ 1,2-Epoxybutane (1,2-Butylene oxi	
☐ ☐ Calcium cyanamide 156-62-7 ☐ ☑ Ethyl acrylate	140-88-5
☐ ☐ Captan 133-06-2 ☐ ☑ Ethyl benzene	100-41-4
☐ ☐ Carbaryl 63-25-2 ☐ ☐ Ethyl carbamate (Urethane)	51-79-6
☐ ☐ Carbon disulfide 75-15-0 ☐ ☐ Ethyl chloride (Chloroethane)	75-00-3
☐ ☐ Carbon tetrachloride 56-23-5 ☐ ☐ Ethylene dibromide (1,2-Dibromoe	thane) 106-93-4
☐ ☐ Carbonyl sulfide 463-58-1 ☐ ☐ Ethylene dichloride (1,2-Dichloroet	
☐ ☐ Catechol 120-80-9 ☐ ☐ Ethylene glycol	107-21-1
☐ ☐ Chloramben 133-90-4 ☐ ☑ Ethylene imine (Aziridine)	151-56-4
☐ ☐ Chlordane 57-74-9 ☐ ☑ Ethylene oxide	75-21-8
☐ ☐ Chlorine 7782-50-5 ☐ ☐ Ethylene thiourea	96-45-7
☐ ☐ Chloroacetic acid 79-11-8 ☐ Ethylidene dichloride (1,1-Dichloroe	ethane) 75-34-3
☐ ☐ 2-Chloroacetophenone 532-27-4 ☐ ☑ Formaldehyde	50-00-0
☐ ☐ Chlorobenzene 108-90-7 ☐ ☐ 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 ☐ ☑ Hexachloroethane	67-72-1
☐ ☐ Cresols (mixed isomers) 1319-77-3 ☐ ☐ Hexamethylene-1,6-diisocyanate	822-06-0
☐ ☐ m-Cresol 108-39-4 ☐ ☐ Hexamethylphosphoramide	680-31-9
□ □ o-Cresol 95-48-7 □ □ Hexane	110-54-3
□ □ p-Cresol 106-44-5 □ □ Hydrazine	302-01-2
☐ ☐ Cumene 98-82-8 ☐ ☐ Hydrochloric acid	7647-01-0
☐ ☑ 2,4-D, salts and esters 94-75-7 ☐ ☑ Hydrogen fluoride	7664-39-3
☐ ☐ DDE 72-55-9 ☐ ☐ Hydrogen sulfide	7783-06-4
☐ ☐ Diazomethane 334-88-3 ☐ ☑ Hydroquinone	123-31-9
☐ ☐ Dibenzofuran 132-64-9 ☐ ☐ Isophorone	78-59-1
☐ ☐ 1,2-Dibromo-3-chloropropane 96-12-8 ☐ ☑ Lindane	58-89-9
☐ ☐ Dibutylphthalate 84-74-2 ☐ ☑ Maleic anhydride	108-31-6
☐ ☑ 1,4-Dichlorobenzene 106-46-7 ☐ ☑ Methanol	67-56-1
□ □ 3,3-Dichlorobenzidene 91-94-1 □ ☑ Methoxychlor	72-43-5
☐ ☐ Dichloroethylether (Bis(2-chloroethyl)ether) 111-44-4 ☐ ☑ Methyl bromide (Bromomethane)	74-83-9
☐ ☐ 1,3-Dichloropropene (1,3-Dichloropropylene) 542-75-6 ☐ ☑ Methyl chloride (Chloromethane)	74-87-3
☐ ☐ Dichlorvos 62-73-7 ☐ ☑ Methyl chloroform (1,1,1-Trichloroet	thane) 71-55-6
☐ ☐ Diethanolamine 111-42-2 ☐ ☐ Methyl ethyl ketone (not required)	78-93-3
□ N,N-Diethyl aniline (N,N-Dimethylaniline) 121-69-7 □ Methyl hydrazine	60-34-4
☐ ☐ Diethyl sulfate 64-67-5 ☐ ☐ Methyl iodide (Iodomethane)	74-88-4
□ □ 3,3-Dimethoxybenzidine 119-90-4 □ ☑ Methyl isobutyl ketone (Hexone)	108-10-1
☐ ☐ Dimethyl aminoazobenzene 60-11-7 ☐ ☐ Methyl isocyanate	624-83-9
☐ ☐ 3,3-Dimethyl benzidine 119-93-7 ☐ ☑ Methyl methacrylate	80-62-6
☐ ☐ Dimethyl carbamoyl chloride 79-44-7 ☐ ☑ Methyl tert-butyl ether	1634-04-4
☐ ☐ Dimethyl formamide (N,N-) 68-12-2 ☐ ☐ 4,4-Methylenebis(2-chloroaniline)	101-14-4
☐ ☐ 1,1-Dimethyl hydrazine 57-14-7 ☐ ☑ Methylene chloride (Dichlorometha	
☐ ☐ Dimethyl phthalate 131-11-3 ☐ ☐ Methylene diphenyl diisocyanate(N	
	,
	101-77-9
	101-77-9 91-20-3



Bureau of Waste Prevention - Air Quality

BWP AQ AP-TES

Total Emissions Statement & Hazardous Air Pollutant List

2009 Year of record 1190564

Facility AQ identifier

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

4-Nitrophenol 100-02-7	Use	Emitted	CAS#	Use	Emitted		CAS#
4-Nitrophenol 100-02-7		☐ 4-Nitrobiphenyl	92-93-3		✓ Vinylidene chlo	ride (1,1-Dichloroethylene)	75-35-4
□ 2-Nitropopane 79-46-9 □ m-Xylene 108-38-3 □ N-Nitrosodmethylamine 62-75-9 □ o-Xylene 95-47-6 □ N-Nitrosomorpholine 59-89-2 □ p-Xylene 106-42-3 □ N-Nitroso-N-methylurea 684-93-5 □ Antimony 7440-36-0 □ Partachlorophenol 56-38-2 □ Pentachlorophenol 7440-36-2 □ Phenal 108-95-2 □ Arsenic compounds: 7744-38-2 □ Phospherol 106-50-3 □ Arsenic 77440-38-2 □ Phospherous 75-44-5 Other Metals: 0 Phosphorous 7723-14-0 □ Cadmium 7440-41-7 □ Phosphorous 7723-14-0 □ Cadmium 7440-43-9 □ Chromium 7440-43-9 □ Phosphorous 7723-14-0 □ Cadmium 7440-43-9 □ Chromium 7440-43-9 □ Phosphorous 7753-14-0 □ Cadmium 7440-43-9 □ Chromium 7440-43-3 □ Proplena dichoride 123-38-6 □ Gobalt 7440-43-4 □ Chromium 7439-96-5 □ Propylene coxide 19-22-5 □ Mercury 733-99-6			100-02-7		•	, ,	1330-20-7
N-Nitrosomorpholine 59-89-2 □ p-Xylene 95-47-6 106-42-3 106-42-5 □ Antimony 7440-36-0 7784-42-1 108-95-2 □ Ansenic compounds: 7840-41-7 108-95-2		-	79-46-9		_ , ,	,	108-38-3
N-Nitroson/methylurea		_ , ,	62-75-9	$\overline{\Box}$	_ ,		95-47-6
N-Nitroso-N-methylurea 684-93-5			59-89-2		-		106-42-3
Parathion S6-38-2		·					
		· ·		_			
Pentachlorophenol 87-86-5 Arsenic 7440-38-2 Phenol 106-95-2 Arsine 7784-42-1 Phenol 106-95-3 Arsine 7784-42-1 Phenol 106-95-3 Arsine 7784-42-1 Phenolymendiamine 106-50-3 Phosphine 75-44-5 Other Metals: Phosphine 7803-51-2 Beryllium 7440-41-7 Phosphine 7723-14-0 Phosphorous 7723-14-0 Cadmium 7440-43-9 Phthalic anhydride 85-44-9 Chromium 7440-43-9 Phenolyment 1120-71-4 Phenolyment		_		Arse	c compounds:		
Phenol 108-95-2 Arsine 7784-42-1 Phenol 106-50-3 Phenylenediamine 106-50-3 Phenylenediamine 106-50-3 Phosphere 75-44-5 Phosphine 7803-51-2 Beryllium 7440-41-7 Phosphorous 7723-14-0 Cadmium 7440-43-9 Phosphorous 7723-14-0 Cadmium 7440-43-9 Phosphorous 7723-14-0 Cadmium 7440-43-9 Phosphorous 7723-14-0 Cadmium 7440-43-9 Phosphorous 1336-36-3 Cobalt 7440-48-4 Phosphorous 1120-71-4 Lead 7439-92-1 Phosphorous 7439-92-1 Phosphorous 75-57-8 Manganese 7439-95-5 Propionaldehyde 123-38-6 Mercury 7439-97-6 Propylene dichloride (1,2 Dichloropropale)/78-87-5 Selenium 7782-49-2 Propylene dichloride (1,2 Dichloropropale)/78-87-5 Propylene dichloride (` '			•		7440-38-2
□ P-Phenylenediamine 106-50-3 □ Phospene 75-44-5 □ Phosphine 780-351-2 □ Phosphorous 7723-14-0 □ Phosphorous 7723-14-0 □ Phthalic anhydride 85-44-9 □ PCBs 1336-36-3 □ PCBs 1336-36-3 □ 1,3- Propane sultone 1120-71-4 □ Deta-Propiolactone 57-57-8 □ Propovaldehyde 123-38-6 □ Propovur (Baygon) 114-26-1 □ Propovur (Baygon) 114-26-1 □ Propylene dichloride (1,2 Dichloropropane)78-87-5 □ Selenium 7782-49-2 □ Propylene dichloride (1,2 Dichloropropane)78-87-5 □ Selenium 7782-49-2 □ Propylene dichloride (1,2 Dichloropropane)78-87-5 □ Selenium 7782-49-2 □ Propylene dichloride (1,2 Dichloropropane)78-87-5 □ Coke oven emissions □ Quinoine 91-22-5 □ Coke oven emissions □ Quinoine 91-22-5 □ Coke oven emissions □ Styrene oxide 96-93-3 □ Cyanide compounds (XCN where X=H or any other group where a formal dissociation may occur) □ Styrene oxide 96-93-3		·		_			
Phosgène 75-44-5 Other Metals:		_		_			
Phosphine		_ · · · · ·		Othe	Metals:		
□ Phosphorous 7723-14-0 □ Zadmium 7440-43-9 □ Phthalic anhydride 85-44-9 □ Zhromium 7440-47-3 □ PCBs 1336-36-3 □ Zlobalt 7440-48-4 □ 1,3- Propane sultone 1120-71-4 □ Zlead 7439-92-1 □ beta-Propiolactone 57-57-8 □ Zlaagnese 7439-96-5 □ Propoxur (Baygon) 114-26-1 □ Zlocke over emissions □ Propylene dichloride (1,2 Dichloropropane)/78-87-5 □ Selenium 7782-49-2 □ Propylene oxide 75-56-9 □ Selenium 7782-49-2 □ Propylene oxide (1,2 Dichloropropane)/78-87-5 □ Coke oven emissions □ Coke oven emissions □ Quinone (2-Methyl aziridine) (2-Methyl aziridine) (2-Methyl aziridine) (2-Methyla azi		S .	-				7440-41-7
□ Phthalic anhydride 85-44-9 □ Chromium 7440-47-3 □ PCBs 1336-36-3 □ Clobalt 7440-48-4 1 1,3 - Propane sultone 1120-71-4 □ Lead 7439-92-1 □ beta-Propiolactone 57-57-8 □ Manganese 7439-96-5 □ Propovar (Baygon) 114-26-1 □ Nickel 7440-02-0 □ Propylene dichloride (1,2 Dichloropropane)78-87-5 □ Propylene dichloride (1,2 Dichloropropane)78-87-5 □ Selenium 7782-49-2 □ Propylene dichloride (1,2 Dichloropropane)78-87-5 □ Selenium 7782-49-2 □ Propylene dichloride (1,2 Dichloropropane)78-87-5 □ Coke oven emissions □ Quinoline 91-22-5 □ Quinoline 91-22-5 □ Quinone 106-51-4 □ Cyanide compounds (XCN where X=H or any other group where a formal dissociation may occur) □ Styrene oxide 96-09-3 □ Hydrogen cyanide 74-90-8 □ 23,7,8-Tetrachlorodibenzo-p-dioxin 1746-01-6 □ Glycol ethers (include mono- and di- esters of ethylene glycol, dichlylene glycol, and triethylene glycol glycol, and triethylene glycol glycol, dichlylene glycol, and triethylene glycol glycol, diestylene glycol, and triethylene glycol glycol, gl		•			•		
PCBs 1336-36-3 PCobalt 7440-48-4		·					
		·		_	_		-
□ beta-Propiolactone 57-57-8 □ Manganese 7439-96-5 □ Propoxur (Baygon) 114-26-1 □ Nickel 7440-02-0 □ Propylene dichloride (1,2 Dichloropropane)/78-87-5 □ 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 □ Cyanide compounds (XCN where X=H or any other group where a formal dissociation may occur) □ Styrene oxide 96-09-3 □ Hydrogen cyanide 74-90-8 □ 1,1,2-Tetrachloroethane 79-34-5 □ Titanium tetrachloride 7550-45-0 □ Toluene 108-88-3 □ Toluene-2,4- diamine 95-80-7 □ 2,4-Trichloroethane 95-53-4 □ 1,1,2-Trichloroethylene 120-82-1 □ 1,1,2-Trichloroethylene 95-53-4 □ 1,1,2-Trichloroethylene 95-95-4 □ 1,1,2-Trichloroethylene 95-95-4 □ 1,1,2-Trichloroethylene 95-95-4 □ 2,2,4-Trimethylpentane 121-44-8 □ Trifluralin 1582-09-8 □ 1,1,1-Trimethylpentane 121-44-8 □ 1,1,1-T		_		_			
Propionaldehyde 123-38-6		•			 '		
Propoxur (Baygon)		•			ū		
☐ Propylene dichloride (1,2 Dichloropropane)78-87-5 ☐ Selenium 7782-49-2 ☐ Propylene oxide 75-56-9 ☐ Coke oven emissions ☐ Quinoline 91-22-5 ☐ Coke oven emissions ☐ Quinone 106-51-4 ☐ Cyanide compounds (XCN where X=H or any other group where a formal dissociation may occur) ☐ Styrene oxide 96-09-3 ☐ Hydrogen cyanide 74-90-8 ☐ Styrene oxide 96-09-3 ☐ Hydrogen cyanide 74-90-8 ☐ Intrachloroethylene operation of the properties of expressions ☐ Glycol ethers (include mono- and di- esters of ethylene glycol, aid triethylene glycol, aid triethylene glycol, and triethy							
☐ Propylene oxide 75-56-9 ☐ 1,2-Propylenimine (2-Methyl aziridine) 75-55-8 ☐ Coke oven emissions ☐ Quinoline 91-22-5 ☐ Cyanide compounds (XCN where X=H or any other group where a formal dissociation may occur) ☐ Styrene oxide 96-09-3 ☐ Hydrogen cyanide 74-90-8 ☐ 2,3,7,8-Tetrachlorodibenzo-p-dioxin 1746-01-6 ☐ Hydrogen cyanide 74-90-8 ☐ 2,3,7,8-Tetrachloroethane 79-34-5 ☐ Glycol ethers (include mono- and di- esters of ethylene glycol, diethylene glycol, and triethylene glycol R- (OCH2CH2)n-OR' where n = 1, 2, or 3: R = alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or any other group where a formal dissociation may occur) ☐ 1,1,2,2-Tetrachloroethylene (Perchloroethylene) 127-18-4 (OCH2CH2)n-OR' where n = 1, 2, or 3: R = alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or any other group where a formal dissociation may occur) ☐ Toluene-2,4- diamine 95-80-7 (OCH2CH2)n-OR' where n = 1, 2, or 3: R = alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or OR' consisting of carboxylic acid esters, sulfate, phosphate, nitrate or sulfonate. ☐ 1,1,2,4-Trichloroethylene 19-00-5 ☐ Fine mineral fibers (includes glass microfibers, glass wool fibers, rock wool fibers and slag wool fibers, each characterized as "respirable" (fiber diameter)			_		_		
□ 1,2-Propylenimine (2-Methyl aziridine) 75-55-8 □ Coke oven emissions □ Quinoline 91-22-5 □ Quinone 106-51-4 □ Cyanide compounds (XCN where X=H or any other group where a formal dissociation may occur) □ Styrene oxide 96-09-3 □ Hydrogen cyanide 74-90-8 □ 2,3,7,8-Tetrachlorodibenzo-p-dioxin 1746-01-6 □ Glycol ethers (include mono- and di- esters of ethylene glycol, aid triethylene glycol, and triethylene glycol, and triethylene glycol, and triethylene glycol, diethylene glycol, and triethylene glycol, and triethylene glycol, and triethylene glycol, and triethylene glycol are glycol, diethylene glycol, and triethylene glycol are glycol, diethylene glycol, and triethylene glycol are glycol, diethylene glycol, and triethylene glycol, and triethylene glycol, and triethylene glycol, and triethylene glycol are glycol, diethylene glycol, and triethylene glycol, and triethylene glycol, and triethylene glycol are glycol, diethylene glycol, and triethylene			,	_	_ Coloriiaiii		7702 10 2
☑ Quinoline 91-22-5 ☐ Quinone 106-51-4 ☐ Cyanide compounds (XCN where X=H or any other group where a formal dissociation may occur) ☐ Styrene oxide 96-09-3 ☐ Hydrogen cyanide 74-90-8 ☐ 2,3,7,8-Tetrachlorodibenzo-p-dioxin 1746-01-6 ☐ 1,1,2,2-Tetrachloroethylene (Perchloroethylene) 127-18-4 ☐ Tetrachloroethylene (Perchloroethylene) 127-18-4 ☐ Glycol ethers (include mono- and di- esters of ethylene glycol, diethylene glycol, and triethylene glycol R- (OCH2CH2)n-OR' where n = 1, 2, or 3: R = alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or CR' consisting of carboxylic acid ester, sulfate, phosphate, nitrate or sulfonate. ☐ 1,1,2-Trichlorobenzene 120-82-1 ☐ Fine mineral fibers (includes glass microfibers, glass wool fibers, rock wool fibers and slag wool fibers, each characterized as "respirable" (fiber diameter < 3.5 micrometers) and possessing an aspect ratio (fiber length divided by fiber diameter) > 3) ☐ 2,4,5-Trichloroethylene <td></td> <td></td> <td></td> <td>П</td> <td>□ Coke oven e</td> <td>missions</td> <td></td>				П	□ Coke oven e	missions	
□ Quinone 106-51-4 □ Zyanide compounds (XCN where X=H or any other group where a formal dissociation may occur) □ Styrene oxide 96-09-3 □ Hydrogen cyanide 74-90-8 □ 2,3,7,8-Tetrachlorodibenzo-p-dioxin 1746-01-6 □ Glycol ethers (include mono- and di- esters of ethylene glycol, and triethylene glycol R- (OCH2CH2)n-OR' where n = 1, 2, or 3: R = alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or OR' consisting of carboxylic acid ester, sulfate, phosphate, nitrate or sulfonate. □ Toluene-2,4- diamine 95-80-7 □ 2,4-Toluene diisocyanate 584-84-9 □ 1,1,2,4-Trichlorobenzene 120-82-1 □ 2,1,1,2-Trichloroethylene 79-00-5 □ 1,1,2-Trichloroethylene 79-01-6 □ 1,1,2-Trichloroethylene 79-01-6 □ 2,2,4,5-Trichlorophenol 95-95-4 □ 1,1,2-Trichloroethylene 1582-09-8 □ 1,1,2-Trimethylpentane 1582-09-8 □ 2,2,4-Trimethylpentane 540-84-1 □ 2,2,4-Trimethylpentane 540-84-1 □ Vinyl acetate 108-05-4 □ Vinyl bromide 593-60-2				_			
□ Styrene 100-42-5 group where a formal dissociation may occur) □ Styrene oxide 96-09-3 □ Hydrogen cyanide 74-90-8 □ 2,3,7,8-Tetrachlorodibenzo-p-dioxin 1746-01-6 □ Glycol ethers (include mono- and di- esters of ethylene glycol, aid triethylene glycol, and triethylene glycol, and triethylene glycol, diethylene glycol, and triethylene glycol, and triethylene glycol, diethylene glycol, diethylene glycol, diethylene glycol, diethylene glycol, and triethylene glycol, diethylene glycol, diethylene glycol, and triethylene glycol, diethylene glycol, and triethylene flycol R- (OCH2CH2)n-OR' where a formal dissocration may occuring lycol, and triethylene glycol, and triethylene glycol, and triethylene flycol R- (OCH2CH2)n-OR' where a formal dissocration may occuring lycol, and triet		-		П	☑ Cvanide con	npounds (XCN where X=H	or any other
□ Styrene oxide 96-09-3 □ Hydrogen cyanide 74-90-8 □ 2,3,7,8-Tetrachlorodibenzo-p-dioxin 1746-01-6 □ Glycol ethers (include mono- and di- esters of ethylene glycol, diethylene glycol, diethylene glycol, and triethylene glycol R- glycol, diethylene glycol, and triethylene glycol R- glycol, diethylene glycol, and triethylene glycol R- glycol, diethylene glycol, and triethylene glycol, diethylene glycol, and triethylene glycol, and triethylene glycol, and triethylene glycol, diethylene glycol, diethylene glycol, diethylene glycol, diethylene glycol, and triethylene glycol, diethylene glycol, diethylene glycol, diethylene glycol, and triethylene glycol, and triethylene glycol, diethylene glycol, and triethylene glycol, and triethy				_	•	'	•
□ 2,3,7,8-Tetrachlorodibenzo-p-dioxin 1746-01-6 □ 1,1,2,2-Tetrachloroethane 79-34-5 □ 2 Tetrachloroethylene (Perchloroethylene) 127-18-4 □ Titanium tetrachloride 7550-45-0 □ Toluene 108-88-3 □ Toluene-2,4- diamine 95-80-7 □ 2,4-Toluene diisocyanate 584-84-9 □ 0-Toluidene 95-53-4 □ 1,2,4-Trichlorobenzene 120-82-1 □ 1,1,2-Trichloroethylene 79-00-5 □ 2,4,5-Trichlorophenol 95-95-4 □ 2,2,4-Trimethylpamine 121-44-8 □ 1,2,2-Trimethylpentane 108-05-4 □ 2,2,4-Trimethylpentane 108-05-4 □ Vinyl bromide 593-60-2 Glycol ethers (include mono- and di- esters of ethylene glycol, and triethylene glycol, and triethy				П	• .	•	,
□ 1,1,2,2-Tetrachloroethane 79-34-5 □ Glycol ethers (include mono- and di- esters of ethylene glycol, and triethylene glycol, and triethylene glycol, and triethylene glycol, and triethylene glycol, diethylene glycol, and triethylene glycol, and triethylene glycol, and triethylene glycol, and triethylene glycol, diethylene glycol, diethylene glycol, and triethylene glycol, and triethylene glycol, and triethylene glycol, diethylene glycol, diethylene glycol, diethylene glycol, and triethylene glycol, and triethylene glycol, diethylene glycol, diethylene glycol, diethylene glycol, diethylene glycol, and triethylene glycol, and triethylene glycol, diethylene glycol, diethylene glycol, diethylene glycol, diethylene glycol, diethylene glycol, and triethylene glycol, diethylene glycol, and triethylene glycol, diethylene glycol, and triethylene glycol, and triethylene glycol, diethylene glycol, diethylene glycol, diethylene glycol, and triethylene glycol, and treaty and posses; or R= phenyl or alkyl C7 or less; or		•		_	<u> </u>		
□ Tetrachloroethylene (Perchloroethylene) 127-18-4 glycol, diethylene glycol, and triethylene glycol R- □ Titanium tetrachloride 7550-45-0 (OCH2CH2)n-OR' where n = 1, 2, or 3: R = alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or OR' consisting of carboxylic acid ester, sulfate, phosphate, nitrate or sulfonate. □ Toluene-2,4- diamine 95-80-7 □ 2,4-Toluene diisocyanate 95-53-4 □ 0-Toluidene 95-53-4 □ 1,2,4-Trichlorobenzene 120-82-1 □ 1,2,4-Trichloroethane 79-00-5 □ 1,1,2-Trichloroethylene 79-01-6 □ 2,4,5-Trichlorophenol 95-95-4 □ 2,2,4-Trimethylpentane 121-44-8 □ 1,7 iffluralin 1582-09-8 □ 2,2,4-Trimethylpentane 540-84-1 □ 2,2,4-Trimethylpentane 540-84-1 □ 2,2,4-Trimethylpentane 540-84-1 □ 2,1,1,2 iffluralin 108-05-4 □ 2,2,4-Trimethylpentane 540-84-1 □ 2,2,4-Trimethylpentane 540-84-1 □ 2,2,4-Trimethylpentane 540-84-1 □ 2,2,4-Trimethylpentane 540-84-1 □ 3,0-1 10,0-1 □ 3,0-1 10,0-1 □ 3,0-1 <td< td=""><td></td><td>- </td><td></td><td>П</td><td>☑ Glycol ether:</td><td>s (include mono- and di- es</td><td>ters of ethylene</td></td<>		- 		П	☑ Glycol ether:	s (include mono- and di- es	ters of ethylene
□ Titanium tetrachloride 7550-45-0 (OCH2CH2)n-OR' where n = 1, 2, or 3: R = alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or CR' consisting of carboxylic acid ester, sulfate, phosphate, nitrate or sulfonate. □ 1,2,4-Trichlorobenzene 120-82-1 Fine mineral fibers (includes glass microfibers, glass wool fibers, rock wool fibers and slag wool				_	•	,	•
□ Toluene 108-88-3 □ Toluene-2,4- diamine 95-80-7 □ 2,4-Toluene diisocyanate 584-84-9 □ o-Toluidene 95-53-4 □ 1,2,4-Trichlorobenzene 120-82-1 □ 1,1,2-Trichloroethane 79-00-5 □ Trichloroethylene 79-01-6 □ 2,4,5-Trichlorophenol 95-95-4 □ Triethylamine 121-44-8 □ Triffluralin 1582-09-8 □ Vinyl acetate 108-05-4 □ Vinyl bromide 593-60-2 less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or OR' consisting of carboxylic acid ester, sulfate, phosphate, nitrate or sulfonate. less; or R= phenyl or alkyl substituted phenyl; R' = H or alkyl C7 or less; or OR' consisting of carboxylic acid ester, sulfate, phosphate, nitrate or sulfonate. □ Fine mineral fibers (includes glass microfibers, glass wool fibers, rock wool fibers and slag wool fibers, each characterized as "respirable" (fiber diameter < 3.5 micrometers) and possessing an aspect ratio (fiber length divided by fiber diameter) > 3) Polycyclic Organic Matters (POM) (includes organic compounds with more than one benzene ring, and which have a boiling point greater than or equal to 100 C) Radionuclides (a type of atom which spontaneously undergoes radioactive decay)							0,
□ Toluene-2,4- diamine 95-80-7 □ 2,4-Toluene diisocyanate 584-84-9 □ 0-Toluidene 95-53-4 □ 1,2,4-Trichlorobenzene 120-82-1 □ 1,1,2-Trichloroethane 79-00-5 □ Trichloroethylene 79-01-6 □ 2,4,5-Trichlorophenol 95-95-4 □ Triethylamine 121-44-8 □ Triffluralin 1582-09-8 □ Vinyl acetate 108-05-4 □ Vinyl bromide 593-60-2 alkyl C7 or less; or OR' consisting of carboxylic acid ester, sulfate, phosphate, nitrate or sulfonate. Fine mineral fibers (includes glass microfibers, glass wool fibers, and slag wool fibers, each characterized as "respirable" (fiber diameter < 3.5 micrometers) and possessing an aspect ratio (fiber length divided by fiber diameter) > 3) Polycyclic Organic Matters (POM) (includes organic compounds with more than one benzene ring, and which have a boiling point greater than or equal to 100 C) Radionuclides (a type of atom which spontaneously undergoes radioactive decay)							
□ 2,4-Toluene diisocyanate 584-84-9 ester, Sulfate, phosphate, nitrate or sulfohate. □ 0-Toluidene 95-53-4 □ Fine mineral fibers (includes glass microfibers, glass wool fibers, rock wool fibers and slag wool fibers, each characterized as "respirable" (fiber diameter < 3.5 micrometers) and possessing an aspect ratio (fiber length divided by fiber diameter) > 3) □ 1,1,2-Trichloroethane 79-00-5 micrometers) and possessing an aspect ratio (fiber length divided by fiber diameter) > 3) □ 2,4,5-Trichlorophenol 95-95-4 □ Polycyclic Organic Matters (POM) (includes organic compounds with more than one benzene ring, and which have a boiling point greater than or equal to 100 C) □ 1,2,4-Trimethylpentane 121-44-8 C) □ 2,2,4-Trimethylpentane 540-84-1 □ Radionuclides (a type of atom which spontaneously undergoes radioactive decay)					,	,	,
□ o-Toluidene 95-53-4 wool fibers, rock wool fibers and slag wool fibers, each characterized as "respirable" (fiber diameter < 3.5 micrometers) and possessing an aspect ratio (fiber length divided by fiber diameter) > 3) □ 1,1,2-Trichloroethane 79-00-5 micrometers) and possessing an aspect ratio (fiber length divided by fiber diameter) > 3) □ 2,4,5-Trichlorophenol 95-95-4 □ Polycyclic Organic Matters (POM) (includes organic compounds with more than one benzene ring, and which have a boiling point greater than or equal to 100 C) □ 1,1,2-Trichloroethane 79-00-5 micrometers) and possessing an aspect ratio (fiber length divided by fiber diameter) > 3) □ 2,4,5-Trichlorophenol 95-95-4 □ Polycyclic Organic Matters (POM) (includes organic compounds with more than one benzene ring, and which have a boiling point greater than or equal to 100 C) □ 2,2,4-Trimethylpentane 540-84-1 □ Radionuclides (a type of atom which spontaneously undergoes radioactive decay)		•		_	•	• • •	
□ 1,2,4-Trichlorobenzene 120-82-1 Wool floers, rock wool floers and stag wool floers, each characterized as "respirable" (fiber diameter < 3.5 micrometers) and possessing an aspect ratio (fiber length divided by fiber diameter) > 3) □ 2,4,5-Trichlorophenol 95-95-4 □ Polycyclic Organic Matters (POM) (includes organic compounds with more than one benzene ring, and which have a boiling point greater than or equal to 100 compounds. □ 1,1,2-Trichlorophenol 95-95-4 □ Polycyclic Organic Matters (POM) (includes organic compounds with more than one benzene ring, and which have a boiling point greater than or equal to 100 compounds. □ 2,2,4-Trimethylpentane 540-84-1 □ Radionuclides (a type of atom which spontaneously undergoes radioactive decay)		•		Ш		`	
□ 1,1,2-Trichloroethane 79-00-5 characterized as Tespirable (fiber diameter) < 3.5 micrometers) and possessing an aspect ratio (fiber length divided by fiber diameter) > 3) □ 2,4,5-Trichlorophenol 95-95-4 □ Polycyclic Organic Matters (POM) (includes organic compounds with more than one benzene ring, and which have a boiling point greater than or equal to 100 C) □ 1,1,2-Trichlorophenol 95-95-4 □ Polycyclic Organic Matters (POM) (includes organic compounds with more than one benzene ring, and which have a boiling point greater than or equal to 100 C) □ 2,2,4-Trimethylpentane 540-84-1 C) □ Vinyl acetate 108-05-4 □ Radionuclides (a type of atom which spontaneously undergoes radioactive decay)		-					
□ Trichloroethylene 79-01-6 length divided by fiber diameter) > 3) □ 2,4,5-Trichlorophenol 95-95-4 □ Polycyclic Organic Matters (POM) (includes organic compounds with more than one benzene ring, and which have a boiling point greater than or equal to 100 C) □ Trifluralin 1582-09-8 which have a boiling point greater than or equal to 100 C) □ 2,2,4-Trimethylpentane 540-84-1 □ Radionuclides (a type of atom which spontaneously undergoes radioactive decay)	_						
□ □ 2,4,5-Trichlorophenol 95-95-4 □ Polycyclic Organic Matters (POM) (includes organic compounds with more than one benzene ring, and which have a boiling point greater than or equal to 100 C) □ □ Trifluralin 1582-09-8 which have a boiling point greater than or equal to 100 C) □ □ 2,2,4-Trimethylpentane 540-84-1 □ Radionuclides (a type of atom which spontaneously undergoes radioactive decay)							t fatto (fiber
□ □ Triethylamine 121-44-8 compounds with more than one benzene ring, and which have a boiling point greater than or equal to 100 C) □ □ 2,2,4-Trimethylpentane 540-84-1 □ C) □ □ Vinyl acetate 108-05-4 □ Radionuclides (a type of atom which spontaneously undergoes radioactive decay)		•		П	•	•	ides organic
□ □ Trifluralin 1582-09-8 which have a boiling point greater than or equal to 100 □ □ 2,2,4-Trimethylpentane 540-84-1 □ C) □ □ Vinyl acetate 108-05-4 □ Radionuclides (a type of atom which spontaneously undergoes radioactive decay)		•		_		• , ,	•
□ □ 2,2,4-Trimethylpentane 540-84-1 □ Radionuclides (a type of atom which spontaneously □ Vinyl bromide 593-60-2 □ Radioactive decay)							· · ·
☐ ☑ Vinyl acetate 108-05-4 ☐ Radionuclides (a type of atom which spontaneously undergoes radioactive decay)		_				311 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	1
☐ Vinyl bromide 593-60-2 undergoes radioactive decay)		• • • • • • • • • • • • • • • • • • • •			☐ Radionuclide	es (a type of atom which sp	ontaneously
El Villy Biolitido					undergoes ra	adioactive decay)	-
	H	☑ Vinyl chloride	75-01-4		-	••	



Do you need an 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

2009 Year of record 1190564 Facility AQ identifier

D. Hazardous Air Pollutant Emissions

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:
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.



Bureau of Waste Prevention - Air Quality

BWP AQ AP-TES

Total Emissions Statement & Hazardous Air Pollutant List

2009 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: XYLENES (MIXTURE OF O,		METHANOL	
HAP emissions?	CAS # for individual HAPs if applicable:	1330207	67561	
	Actual for previous year eDEP only:	.017 Tons	.341 Tons	Tons
	Actual for year of record:	0.0000	0.2980	
	Actual for year of fecolu.	Tons	Tons	Tons
	Potential emissions at max capacity uncontrolled:	12.8 Tons	12.8 Tons	Tons
		18.6	18.6	TORS
Φ	Maximum allowed emissions – annual:	Tons	Tons	Tons
wid	Maximum allowed	5000	5000.0000	
ity– only	emissions – short term:	Pounds	Pounds	Pounds
er facility-wide limits only	Short term period:	MONTH	MONTH	
?	Basis for max allowed – DEP approval # or regulation:	MBR-95-RES-047	MBR-95-RES-047	
		HAP	НАР	HAP
	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
<u> </u>	Maximum allowed emissions – annual:	Tons	Tons	Tons
er f acility-wide limits only	Maximum allowed emissions – short term:	Pounds	Pounds	Pounds
er facility — Iimits only	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.



Bureau of Waste Prevention - Air Quality

BWP AQ AP-TES

Total Emissions Statement & Hazardous Air Pollutant List

2009 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:	1.004	
		Tons	_
	b. Actual for year of record:	0.8210	
		Tons	
	c. Potential at max capacity uncontrolled:	53.6	
		Tons	
	d. Max allowed emissions – annual:	18.6	Facility-wide restriction only
		Tons	
	e. Max allowed emissions – short term:	10600	Facility-wide restriction only
		Pounds	
	f. Short term period:	MONTH	_
?	g. Basis for max allowed emissions:	MBR-95-RES-047	DEP approval # or regulation