Massachusetts Department of Environmental Protection

eDEP Transaction Copy

Here is the file you requested for your records.

To retain a copy of this file you must save and/or print.

Username:	**DAVID_P_CABRAL**
Transaction ID:	**558125**
Document:	**AQ Source Registration Package**
Size of File:	**2930.76K**
Status of Transaction:	**Submitted**
Date and Time Created:	**3/29/2023:4:26:04 PM**

Note: This file only includes forms that were part of your transaction as of the date and time indicated above. If you need a more current copy of your transaction, return to eDEP and select to “Download a Copy” from the Current Submittals page.

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

Source Registration Overview

Create or Amend a Source Registration Forms Package

2012
Year of Record

1190564
Facility AQ identifier

Click "?" icons for important notes

A. Create a Source Registration Package

1. Select existing or new facility:

☑ **Existing** Facilities: To create a complete package for **2012** check box.

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

IMPORTANT !

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

2. Validate this form:

How do you **replace** units ?

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

B. Amend a Source Registration

1. If you need to correct or add to a previously submitted Source Registration for **2012** check the boxes in the list below to select the forms/units you wish to work on. Check here to add new units: ☐

How do you amend a prior year's Source Registration ?

2. Validate this form:

Facility Name: **CLEAN HARBORS OF BRAINTREE INC**

Our records indicate that this facility has: **24** Emission Units (points) and **7** 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).

How does the new numbering system differ from the old ?

	Emission unit name (from prior submittals)	Facility's ID#	DEP#	AP form	Last update
☑	HURST BOILER, 2.091 MMBTU/HR, NO. 2 FUEL OIL-0.3 S	2	2	AP-1	2011
☑	CLEAVER BROOKS BOILER (NO.2 FUEL OIL, 0.3S)	3	3	AP-1	2011
☑	CUMMINS GENERATOR #2 (NT855G2, DIESEL)	50	50	AP-1	2011
☑	CATERPILLAR GENERATOR #1	55	55	AP-1	2011
☑	2 LENNOX FURNACES SR 20Q5-140/154	64	64	AP-1	2011
☑	2 DRUM CRUSHING LINES	5	5	AP-2	2011
☑	STACK 1 POINT 1 SEGMENT	1	1	AP-3	2011
☐	AG TANK A1-9,800 GAL NOT USED IN 2009	6	6	AP-4	2011
☐	AG TANK A3-9,800 GAL	8	8	AP-4	2011
☑	AG TANK A6- 9,000 GAL WASTE STREAM A-23	11	11	AP-4	2011
☑	AG TANK A7- 9,000 GAL WASTE STREAM A-23	12	12	AP-4	2011
☑	AG TANK A8 - 5,000 GAL TANK	13	13	AP-4	2011
☑	AG TANK A9- 5,000 GAL WASTE STREAM A21	14	14	AP-4	2011

Additional units (if any) listed on following pages

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

Source Registration Overview

Create or Amend a Source Registration Forms Package

2012
Year of Record

1190564
Facility AQ identifier

	Emission unit name (from prior submittals)	Facility's ID#	DEP#	AP form	Last update
☐	AG TANK A17B - 750 GAL	18	18	AP-4	2011
☑	AG TANK A22 (2,400 GAL), PCB	23	23	AP-4	2011
☑	AG TANK A23 (2,400 GAL), PCB	24	24	AP-4	2011
☑	AG TANK A24 (2,400 GAL), PCB	25	25	AP-4	2011
☑	AG TANK A25 (1,000 GAL), PCB	26	26	AP-4	2011
☑	AG TANK A13 (4,000 GAL), DIESEL LOW SULF	51	51	AP-4	2011
☑	AG TANK A12 (6,300 GAL), NO. 2 FUEL OIL	52	52	AP-4	2011
☑	AG TANK B1- POLYOLEFIN WASTEWATER NO VOCS	53	53	AP-4	2011
☑	AG TANK B2- POLYOLEFIN TANK WASTEWATER NO VOCS	54	54	AP-4	2011
☑	AG TANK B4- POLYOLEFIN H WASTEWATER NO VOCS	57	57	AP-4	2011
☑	AG TANK B7- POLYOLEFIN H TANKS WASTEWATER NO VOCS	60	60	AP-4	2011
☑	STACK #1- INCINERATOR #1-VENT-O-MATIC	1	1	AP-STAC	2011
☑	STACK #2- HURST BOILER, NO. 2 FUEL OIL	2	2	AP-STAC	2011
☑	1 STACK - BOILER #1-CLEAVER BROOKS, NO 2 FUEL OIL	3	3	AP-STAC	2011
☑	2 DRUM CRUSHING LINES	5	5	AP-STAC	2011
☑	1 STACK GENERATOR (2)- CUMMINS AND CATERPILLAR	7	7	AP-STAC	2011
☑	1 STACK-2 FURNACES - LENNOX	9	9	AP-STAC	2011
☑	CUT OFF ROOM	10	10	AP-STAC	2011
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					

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

Source Registration Overview

Create or Amend a Source Registration Forms Package

2012
Year of Record

1190564
Facility AQ identifier

	Emission unit name	Facility's ID#	DEP#	AP form	Last update
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					
☐					

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

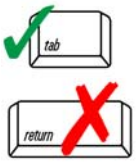
BWP AQ AP-SR

Source Registration

2012
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.



A. Facility Information

1. Facility - the site or works at which the regulated activity occurs:

CLEAN HARBORS OF BRAINTREE INC
a. Facility Name

1 HILL AVE
b. Facility Street Address Line 1

c. Facility Street Address Line 2

BRAINTREE | MA | 021840000
d. City/Town | e. State | f. Zip Code

7813807100 | **7813807193**
g. Facility Phone Number | h. Facility Fax Number

2. Mailing address: ☑ same address as facility address

1 HILL AVE
a. Facility Mailing Address / PO Box Line 1

b. Facility Mailing Address / PO Box Line 2

BRAINTREE | **MA** | **021840000**
c. City/Town | d. State | e. Zip Code

3. Facility type – check one:

☐ Utility ☑ Private ☐ Tribal ☐ Federal ☐ State ☐ Local Government

4. ORIS Facility Code - for large electrical utilities only:

ORIS Facility Code

5. ID numbers:

34839
a. DEP Account number / FMF Facility #

1190564
b. Facility AQ identifier – SSEIS ID number

6. Location (check box to enter either UTM **OR** Lat/Long) :

How to find **location data** ?

☐ a. UTM coordinates

c. UTMHorizontal - meters | d. UTM Vertical - meters

e. UTM Zone

Valid Ranges:

☑ b. Latitude/Longitude

42.235971
f. Latitude 42.9^0 - 41.2^0

70.972946
g. Longitude – West
73.5^0 - 69.8^0
Enter positive values only.

A. Facility Information (cont.)

7. North American Industry Classification System (NAICS) 6 digits:

a. (Primary)	b.	c.	d.
562211			

8. Facility description (what is being produced and how it is being produced at this facility – update as needed):

CLEAN HARBORS OF BRAINTREE INC. IS A HAZARDOUS WASTE TSDF. NO PRODUCTION AT THIS FACILITY.

9. Facility's normal hours of operation:

a. Start time	b. End Time	c. Continuous - 24 x 7 x 52
12:00 AM	**12:00 AM**	☑

d. Which days is the facility open? ☑ S ☑ M ☑ T ☑ W ☑ T ☑ F ☑ S

10. Number of employees: **20**

11. Facility Owner: ☐ same address as facility mailing address (will copy address into fields below)

Who is an **Owner** ?

Please contact your DEP Regional Office if the ownership of this facility has changed.

CLEAN HARBORS OF BRAINTREE INC
a. Owner or Corporation Name

1 HILL AVE
b. Mailing Address Line 1 (for owner or corporation)

ATTN: COMPLIANCE MANAGER
c. Mailing Address Line 2

d. City/Town	e. State	f. Zip Code
BRAINTREE	**MA**	**021841363**

USA
g. Country

h. Owner Phone Number	i. Extension	j. Owner Fax Number
7813807100	**7134**	**7813807193**

cabral.david@cleanharbors.com
k. Owner E-mail Address

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

A. Facility Information (cont.)

12. Facility **contact** information:
☐ same address as facility address
☐ same address as facility mailing address

DAVID P. — a. Facility Contact **First** Name
CABRAL, P.E., TURP, BCEE — Contact **Last** Name
CLEAN HARBORS OF BRAINTREE, INC. — b. Mailing Address Line 1
1 HILL AVENUE — c. Mailing Address Line 2
BRAINTREE — d. City/Town
MA — e. State
021841363 — f. Zip Code
USA — g. Country
cabral.david@cleanharbors.com — h. E-mail Address
7813807100 — i. Phone Number
7134 — j. Extension
7813807193 — k. Fax Number

13. **Air emissions information** contact:
☑ same as facility contact name and address
☐ same address as facility address

DAVID P. — a. Air emissions contact **First** Name
CABRAL, P.E., TURP, BCEE — Air emissions contact **Last** Name
CLEAN HARBORS OF BRAINTREE, INC. — b. Mailing Address Line 1
1 HILL AVENUE — c. Mailing Address Line 2
BRAINTREE — d. City/Town
MA — e. State
021841363 — f. Zip Code
USA — g. Country
cabral.david@cleanharbors.com — h. E-mail Address
7813807100 — i. Phone Number
7134 — j. Extension
7813807193 — k. Fax Number

B. Preparer

1. Identification information for **preparer** of this submittal:
☐ same as facility air emissions contact name and address
☐ same as facility contact name and address
☐ same address as facility address

DAVID — a. Preparer **First** Name
MEDINA — Preparer **Last** Name
CLEAN HARBORS ENVIRONMENTAL SERVICES — b. Mailing Address Line 1
42 LONGWATER DRIVE — c. Mailing Address Line 2
NORWELL — d. City/Town
MA — e. State
020619149 — f. Zip Code
USA — g. Country
medinad@cleanharbors.com — h. E-mail Address
7817925174 — i. Phone Number
j. Extension
7817921030 — k. Fax Number

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.

Responsible official – complete all fields below:

DAVID P.
a. Print **First** Name

CABRAL, P.E., TURP, BCEE
b. Print **Last** Name

COMPLIANCE MANAGER
c. Title

7813807100
d. Phone Number

cabral.david@cleanharbors.com
e. E-mail Address

What if you are not a Responsible Official ?

Signed under the pains and penalties of perjury:

David P. Cabral
Signature of Responsible Official

5/8/2013
Date

eDEP enters these fields automatically on submission.

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

BWP AQ AP-TES

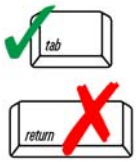
Total Emissions Statement & Hazardous Air Pollutant List

2012
Year of record

1190564
Facility AQ identifier

A. Annual Total Emissions Statement

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 INC
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**	**CO**
Actual for previous year eDEP only:	.0342 Tons	.0233 Tons	.4046 Tons	.4078 Tons	.0944 Tons
Actual for year of record:	**0.02** Tons	**0.0197** Tons	**0.2412** Tons	**0.3790** Tons	**0.0552** Tons
Potential emissions at max capacity uncontrolled:	**10.0495** Tons	**9.4205** Tons	**16.5201** Tons	**143.5519** Tons	**35.7008** Tons
Facility-wide restrictions on: Facility-wide max allowed emissions – annual:	Tons	Tons	Tons	**17.3** Tons	Tons
Facility-wide max allowed emissions – short term:	Pounds	Pounds	Pounds	**9400** Pounds	Pounds
Short term period:				MONTH	
Basis: DEP approval number or regulation:				MBR-95-RES-047	

Pollutant:	**VOC**	**HOC**	***Reserved***	**NH3**	☐ ***Reserved***
Actual for previous year eDEP only:	.0202 Tons	0 Tons	0 Tons	.023 Tons	Tons
Actual for year of record:	**0.0122** Tons	**0** Tons	**0** Tons	**0.0137** Tons	Tons
Potential emissions at max capacity uncontrolled:	**41.8513** Tons	**0** Tons	**0** Tons	**0.8320** Tons	
Facility-wide restrictions only: Facility-wide max allowed emissions – annual:	**36.2** Tons	Tons	Tons	Tons	Tons
Facility-wide max allowed emissions – short term:	**23600.0000** Pounds	Pounds	Pounds	Pounds	Pounds
Short term period:	MONTH				
Basis: DEP approval number or regulation:	MBR-95-RES-047				

A. Annual Total Emissions Statement (cont.)

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

a.	**EXEMPT**	**111252.0000**	GALLONS	YEAR
	DEP approval # (most recent)	Amount of restriction	Restriction units	Per unit time
	NO. 2 FUEL OIL 0.3 PERCENT SULFUR			
	Description of fuel, raw material or product restricted			

b.	**MBR-89-COM-31**	**300.0000**	HOUR	YEAR
	DEP approval # (most recent)	Amount of restriction	Restriction units	Per unit time
	NO. 2 FUEL OIL 0.3 PERCENT SULFUR			
	Description of fuel, raw material or product restricted			

c.	**MBR-86-COM-027**	**376680.0000**	GALLONS	YEAR
	DEP approval # (most recent)	Amount of restriction	Restriction units	Per unit time
	NO. 2 FUEL OIL 0.3 PERCENT SULFUR			
	Description of fuel, raw material or product restricted			

B. Greenhouse Gas List

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

1. Please indicate which – if any - of the following greenhouse gas chemicals are used and/or emitted by checking the appropriate box:

Use	Emitted		Use	Emitted	
☐	☐	Nitrous oxide N2O	☐	☐	Hydrofluorocarbons (HFC's)
☐	☐	Sulfur Hexafluoride (SF6)	☐	☐	Perfluorocarbons (PFCs)

C. Hazardous Air Pollutant (HAP) List

HAP thresholds – what to report and what not to report here

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

☑ yes - indicate which chemicals are used and which are emitted by checking the appropriate boxes
☐ no - skip to section D.

What is a HAP ?

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

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	117-81-7	☐	☑	1,4-Dioxane (1,4-Diethyleneoxide)	123-91-1
☐	☐	Bis(chloromethyl)ether	542-88-1	☐	☐	1,2-Diphenylhydrazine	122-66-7
☐	☑	Bromoform	75-25-2	☐	☑	Epichlorohydrin (1-Chloro-2,3-epoxypropane)	106-89-8
☐	☐	1,3-Butadiene	106-99-0	☐	☑	1,2-Epoxybutane (1,2-Butylene oxide)	106-88-7
☐	☐	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-Dibromoethane)	106-93-4
☐	☑	Carbonyl sulfide	463-58-1	☐	☑	Ethylene dichloride (1,2-Dichloroethane)	107-06-2
☐	☑	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-Dichloroethane)	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-Trichloroethane)	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 (Dichloromethane)	75-09-2
☐	☐	Dimethyl phthalate	131-11-3	☐	☐	Methylene diphenyl diisocyanate(MDI)	101-68-8
☐	☑	Dimethyl sulfate	77-78-1	☐	☐	4,4-Methylenedianiline	101-77-9
☐	☐	4,6-Dinitro-o-cresol and salts	534-52-1	☐	☑	Naphthalene	91-20-3
☐	☐	2,4-Dinitrophenol	51-28-5	☐	☐	Nitrobenzene	98-95-3

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

Use	Emitted	CAS #
☐	☐ 4-Nitrobiphenyl	92-93-3
☐	☐ 4-Nitrophenol	100-02-7
☐	☐ 2-Nitropropane	79-46-9
☐	☐ N-Nitrosodimethylamine	62-75-9
☐	☐ N-Nitrosomorpholine	59-89-2
☐	☐ N-Nitroso-N-methylurea	684-93-5
☐	☐ Parathion	56-38-2
☐	☐ Pentachloronitrobenzene (Quintozene)	82-68-8
☐	☐ Pentachlorophenol	87-86-5
☐	☑ Phenol	108-95-2
☐	☑ p-Phenylenediamine	106-50-3
☐	☐ Phosgene	75-44-5
☐	☐ Phosphine	7803-51-2
☐	☐ Phosphorous	7723-14-0
☐	☑ Phthalic anhydride	85-44-9
☐	☑ PCBs	1336-36-3
☐	☐ 1,3- Propane sultone	1120-71-4
☐	☐ beta-Propiolactone	57-57-8
☐	☐ Propionaldehyde	123-38-6
☐	☐ Propoxur (Baygon)	114-26-1
☐	☐ Propylene dichloride (1,2 Dichloropropane)	78-87-5
☐	☐ Propylene oxide	75-56-9
☐	☐ 1,2-Propylenimine (2-Methyl aziridine)	75-55-8
☐	☑ Quinoline	91-22-5
☐	☐ Quinone	106-51-4
☐	☑ Styrene	100-42-5
☐	☐ Styrene oxide	96-09-3
☐	☐ 2,3,7,8-Tetrachlorodibenzo-p-dioxin	1746-01-6
☐	☐ 1,1,2,2-Tetrachloroethane	79-34-5
☐	☑ 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
☐	☐ 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
☐	☐ Trifluralin	1582-09-8
☐	☐ 2,2,4-Trimethylpentane	540-84-1
☐	☑ Vinyl acetate	108-05-4
☐	☐ Vinyl bromide	593-60-2
☐	☑ Vinyl chloride	75-01-4
☐	☑ Vinylidene chloride (1,1-Dichloroethylene)	75-35-4
☐	☑ Xylene (mixed isomers)	1330-20-7
☐	☑ m-Xylene	108-38-3
☐	☑ o-Xylene	95-47-6
☐	☑ p-Xylene	106-42-3
☐	☑ Antimony	7440-36-0
	Arsenic compounds:	
☐	☑ Arsenic	7440-38-2
☐	☑ Arsine	7784-42-1
	Other Metals:	
☐	☑ Beryllium	7440-41-7
☐	☑ Cadmium	7440-43-9
☐	☑ Chromium	7440-47-3
☐	☑Cobalt	7440-48-4
☐	☑ Lead	7439-92-1
☐	☑ Manganese	7439-96-5
☐	☑ Mercury	7439-97-6
☐	☑ Nickel	7440-02-0
☐	☐ Selenium	7782-49-2
☐	☐ Coke oven emissions	
☐	☑ Cyanide compounds (XCN where X=H or any other group where a formal dissociation may occur)	
☐	☐ Hydrogen cyanide	74-90-8
☐	☑ 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 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)	

D. Hazardous Air Pollutant Emissions

Do you need an operating permit?

1. Does the facility have the potential to emit (PTE) 10 tons of any single listed Hazardous Air Pollutant (HAP)?

   ☑ yes ☐ no

Are you subject to TURA ?

2. Does the facility have the potential to emit (PTE) a total of 25 tons of any combination of listed Hazardous Air Pollutants (HAPs)?

   ☑ yes ☐ no

3. Does the facility have a restriction on total HAPS?

   ☑ yes ☐ no

4. Are you required to report HAP emissions here for any other reason? (e.g., a permit condition)

   ☐ yes ☑ no

5. If you answered "yes" to any of the questions 1- 4 above you need to report your single largest HAP emissions and your total HAP emissions for the year. You also need to report emissions for any HAP for which you have an emissions restriction. eDEP will generate additional pages needed to enter that data. If you wish to submit additional HAP data, you may add them to the HAP pages that follow or in the attachments and notes sections below.

E. Notes and Attachments

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

2. **Attachments:**

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

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

BWP AQ AP-TES

Total Emissions Statement & Hazardous Air Pollutant List

2012
Year of record

1190564
Facility AQ identifier

F. Hazardous Air Pollutant Emissions

Read First

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.

Where do you enter TOTAL HAP emissions ?

	HAP	HAP	HAP
HAP name:	ETHYLENE GLYCOL	METHANOL	TOLUENE
CAS # for individual HAPs if applicable:	107211	67561	108883
Actual for previous year eDEP only:	0 Tons	.111 Tons	.07 Tons
Actual for year of record:	0.0410 Tons	0.1720 Tons	0.0350 Tons
Potential emissions at max capacity uncontrolled:	12.8000 Tons	12.8 Tons	12.8 Tons
Enter facility-wide limits only: Maximum allowed emissions – annual:	18.6000 Tons	18.6 Tons	18.6 Tons
Maximum allowed emissions – short term:	5000.0000 Pounds	5000 Pounds	5000 Pounds
Short term period:	MONTH	MONTH	MONTH
Basis for max allowed – DEP approval # or regulation:	MBR-95-RES-047	MBR-95-RES-047	MBR-95-RES-047

	HAP	HAP	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
Enter facility-wide limits only: Maximum allowed emissions – annual:	Tons	Tons	Tons
Maximum allowed emissions – short term:	Pounds	Pounds	Pounds
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? ☐ yes ☑ no

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

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

BWP AQ AP-TES

Total Emissions Statement & Hazardous Air Pollutant List

2012
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:	.897 Tons	
b. Actual for year of record:	**0.8099** Tons	
c. Potential at max capacity uncontrolled:	**53.6000** Tons	
d. Max allowed emissions – annual:	**18.6** Tons	Facility-wide restriction only
e. Max allowed emissions – short term:	**10600** Pounds	Facility-wide restriction only
f. Short term period:	**MONTH**	
g. Basis for max allowed emissions:	**MBR-95-RES-047**	DEP approval # or regulation

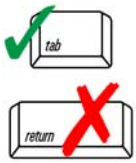
Massachusetts Department of Environmental Protection
Bureau of Waste Prevention – Air Quality

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
64
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. Equipment Description

1. Facility identifiers:

CLEAN HARBORS OF BRAINTREE INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. Emission unit identifiers:

2 LENNOX FURNACES SR 20Q5-140/154
a. Facility's choice of emission unit name – edit as needed

64
b. Facility's emission unit number / code – edit as needed

64
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 Approvals ? ☑ 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

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

6. Emission unit installation date and decommission date:

6/1/1994
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 replaced since the last report.

7. Emission unit replacement:

a. Is this unit replacing another emission unit?

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

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

8. Additional state reporting requirements:

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

☑ yes - specify reporting frequency below ☐ no – skip to question 8c

b. Reporting frequency - check all that apply:

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

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

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

☐ NESHAP ☐ NSPS ☐ MACT

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

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
64
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

How to report on combined units ?

9. Equipment: EPA Unit Type Code (eDEP only): **FURNACE**

a. Type: ☐ boiler ☑ furnace ☐ engine ☐ other: (Describe "other" equipment type)

If engine, is this an emergency generator? ☐ yes ☑ no

LENNOX
b. Manufacturer

SR20Q5-140
c. Model number

0.3070
d. Max input rating MMBtu/hr (must be greater than 0)

1
e. Number of burners (enter "0" if not applicable)

What to do if data unknown or not available ?

f. Type of burner – check one: ☐ rotary ☑ mech. atomizer ☐ steam atomizer ☐ air atomizer ☐ traveling grate ☐ hand fired ☐ other:

"other" burner type

BECKETT
g. Burner manufacturer

AFG
h. Burner model number

6/1/1995
i. Burner installation date (mm/dd/yyyy)

10. Hours of operation for the emission unit: a. ☐ check if continuously operated – 24 x 7 x 52

0
b. Number of hours per day

0
c. Number of days per week

0
d. Number of weeks per year

e. Percent of total annual operation that occurs in each calendar quarter:

0	0	0	0
Q1	Q2	Q3	Q4

Sum of Q1+Q2+Q3+Q4 must = 100%, or 0% if the unit was not operated for any quarter

11. Ozone season operation schedule – May 1 through September 30:

0
a. Ozone season hours per day

0
b. Ozone season days per week

0
c. Weeks operated in ozone season

12. Emission release point – select one: Engines click here for instructions:

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

Physical Stacks:
☑ vertical stack
☐ vertical with rain cap/sleeve

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

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

9 1 STACK-2 FURNACES - LENNOX
Facility's stack identifier from STACK form – to change stack name use STACK form

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

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

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
64
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

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

☐ yes – answer a through i ☑ no – skip to question 15

☐ **Check here** if you need to report more than 3 air pollution control devices on this unit. eDEP will add another page of control devices after this form.

How to **delete** a control ?

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

Leave **f**, **g**, **h** blank if not applicable.

	Air pollution control device 1	Air pollution control device 2	Air pollution control device 3
a. Type		Type	Type
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:

	Air pollution control device 1	Air pollution control device 2	Air pollution control device 3
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-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record

64
DEP EU# (old Point #)

1190564
Facility AQ identifier

A. Equipment Description (cont.)

How to **delete** a monitor?

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

☐ yes – answer a through l ☑ no – skip to section B

Do not leave blank – if unknown write 'unknown' or estimate (a. – e.)

Leave **f**, **g**, **h** blank if not applicable.

	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:
	Describe “other”	Describe “other”	Describe “other”
b. Manufacturer:			
c. Model number:			
d. Monitor ID #:	Facility’s Designation	Facility’s Designation	Facility’s Designation
e. Installation date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
f. DEP approval #:			
g. DEP approval date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
h. Decommission date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
i. Recorder ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
j. Audible alarm ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
k. Data system ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
l. 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 Protection
Bureau of Waste Prevention – Air Quality

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record

64
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

FURNACES #1(2)-LENNOX SR 20Q5 #2 OIL-
Fuel name

1
DEP Fuel #

How does eDEP handle multiple fuels?

☐ **Add a NEW fuel:** Check the box if you need to add a fuel that you did **not** report on previously (eDEP will add a blank Sect. B form to your package).

When to NOT check this box ?

☐ **Delete this fuel:** check box if you stopped using this fuel in this unit p*ermanently*. 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.

a. Source Classification Code (SCC) (see instructions):

10500105
SC Code (call DEP if SC code will not validate)

INDUS.SPACE HEAT-DISTILLATE OIL
SCC Code Description – filled by eDEP

b. Type of fuel – check one:

☑ no.2 ☐ no.4 ☐ no.6

☐ diesel ☐ coal ☐ natural gas

☐ jet fuel ☐ other - describe:

Note: The option to have eDEP calculate your emissions is not available if your fuel type is "other".

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
Percent by weight

Note for e: Enter the **Maximum Fuel Rate** at which the unit can burn fuel (its absolute uncontrolled design capacity). Do not enter the normal operation rate nor any restricted (allowable) rate.

e. Maximum hourly fuel rate for all firing burners:

0.0022 (Amount) | 1000 GALLONS (Units per hour)

Enter "0" if unit decommissioned prior to this Year of Record.

f. Do you have fuel or usage restrictions?

☑ yes ☐ no - skip to question 2

g. DEP approval number for restrictions:

EXEMPT
Most recent for this fuel

h. Annual use restriction (amount or hours):
For this fuel

19.2720 (Quantity) | 1000 GALLONS (Units)

i. Short term use restriction (amount or hours):
For this fuel

0.0022 (Quantity) | 1000 GALLONS (Units)

Per: ☐ month ☐ week ☐ day ☑ hour

CAUTION: check your amount vs.units

2. Annual usage:

Enter "0" if not used in the year of record

0.0000 (a. Amount – year of record) | 1000 GALLONS (b. Units)

0 **1000 GALLONS**
c. Total annual usage for prior year of record – eDEP only

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

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
64
DEP EU# (old Point #)
1190564
Facility AQ identifier

B. Fuels and Emissions (cont.)

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

Read First

Calculations: The form will automatically calculate the **actual** and **potential** emissions UNLESS you check a box to manually enter emissions for each specific pollutant. Click the "?" icon for information to help you decide how to use this feature:

Part 75 Requirements

Pollutant:	☐ PM10	☐ PM2.5	☐ SO2	☐ NO2
Actual for previous year eDEP only:	0 Tons	0 Tons	0 Tons	0 Tons
Actual for year of record:	**0** Tons	**0** Tons	**0** Tons	**0** Tons
Potential emissions at max capacity uncontrolled:	**0.0237** Tons	**0.0059** Tons	**0.1910** Tons	**0.1927** Tons
Emission factor:	**2.46**	**0.6150**	**143.60**	**20**
in pounds per unit:	1000 GALLONS	1000 GALLONS	1000 GALLONS	1000 GALLONS
For this fuel only Maximum allowed emissions – annual:	Tons	Tons	Tons	**1.1** Tons
Maximum allowed emissions – short term:	Pounds	Pounds	Pounds	**.091** Pounds MONTH
Short term period (or MMBtu):				
Basis – DEP approval number or regulation:				EXEMPT

other:

Pollutant:	☐ CO	☐ VOC	☐ NH3	specify
Actual for previous year eDEP only:	0 Tons	0 Tons	0 Tons	Tons
Actual for year of record:	**0** Tons	**0** Tons	**0** 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	
For this fuel only 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:				

B. Fuels and Emissions (cont.)

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

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

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

C. Notes and Attachments

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

THIS UNIT WAS NOT USED IN CALENDAR YEAR 2012

2. **Attachments**:

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

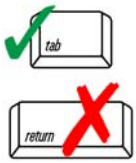
Massachusetts Department of Environmental Protection
Bureau of Waste Prevention – Air Quality

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
55
DEP EU# (old Point #)
1190564
Facility AQ identifier

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



A. Equipment Description

1. Facility identifiers:

CLEAN HARBORS OF BRAINTREE INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. Emission unit identifiers:

CATERPILLAR GENERATOR #1
a. Facility's choice of emission unit name – edit as needed

55
b. Facility's emission unit number / code – edit as needed

55
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
a. Most recent approval number

5/4/1989
b. DEP approval date (mm/dd/yyyy)

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

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

Reason for exemption

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

6. Emission unit installation date and decommission date:

5/4/1989
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 replaced since the last report.

7. Emission unit replacement:

a. Is this unit replacing another emission unit?

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

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

8. Additional state reporting requirements:

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

☑ yes - specify reporting frequency below ☐ no – skip to question 8c

b. Reporting frequency - check all that apply:

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

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

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

☐ NESHAP ☐ NSPS ☐ MACT

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

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
55
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

How to report on combined units ?

9. Equipment: EPA Unit Type Code (eDEP only): **RECIPROCATING IC ENGINE**

a. Type: ☐ boiler ☐ furnace ☑ engine ☐ other: (Describe "other" equipment type)

If engine, is this an emergency generator? ☐ yes ☑ no

b. Manufacturer	c. Model number
CATERPILLAR	3412DIT

d. Max input rating MMBtu/hr (must be greater than 0)	e. Number of burners (enter "0" if not applicable)
5.3480	1

What to do if data unknown or not available ?

f. Type of burner – check one:
☐ rotary ☑ mech. atomizer ☐ steam atomizer
☐ air atomizer ☐ traveling grate ☐ hand fired
☐ other: ("other" burner type)

g. Burner manufacturer	h. Burner model number
CATERPILLR	N/A

i. Burner installation date (mm/dd/yyyy): 6/1/1989

10. Hours of operation for the emission unit: a. ☐ check if continuously operated – 24 x 7 x 52

b. Number of hours per day	c. Number of days per week	d. Number of weeks per year
1	1	11

e. Percent of total annual operation that occurs in each calendar quarter:

Q1	Q2	Q3	Q4
33.3	26.7	22.7	17.3

Sum of Q1+Q2+Q3+Q4 must = 100%, or 0% if the unit was not operated for any quarter

11. Ozone season operation schedule – May 1 through September 30:

a. Ozone season hours per day	b. Ozone season days per week	c. Weeks operated in ozone season
1	1	5

12. Emission release point – select one: Engines click here for instructions:

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

Physical Stacks:
☑ vertical stack
☐ vertical with rain cap/sleeve

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

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

7 1 STACK GENERATOR (2)- CUMMINS AND CATERPILLAR

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

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

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

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
55
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

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

☐ yes – answer a through i ☑ no – skip to question 15

☐ **Check here** if you need to report more than 3 air pollution control devices on this unit. eDEP will add another page of control devices after this form.

How to **delete** a control ?

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

Leave **f**, **g**, **h** blank if not applicable.

	Air pollution control device 1	Air pollution control device 2	Air pollution control device 3
a. Type		Type	Type
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:

	Air pollution control device 1	Air pollution control device 2	Air pollution control device 3
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-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
55
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

How to **delete** a monitor?

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

☐ yes – answer a through l ☑ no – skip to section B

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

Leave **f, g, h** blank if not applicable.

	Monitor 1	**Monitor 2**	**Monitor 3**
a. Monitor type:	check only one: ☐ CEM ☐ Opacity ☐ other - describe: Describe "other"	check only one: ☐ CEM ☐ Opacity ☐ other - describe: Describe "other"	check only one: ☐ CEM ☐ Opacity ☐ other - describe: Describe "other"
b. Manufacturer:			
c. Model number:			
d. Monitor ID #:	Facility's Designation	Facility's Designation	Facility's Designation
e. Installation date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
f. DEP approval #:			
g. DEP approval date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
h. Decommission date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
i. Recorder ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
j. Audible alarm ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
k. Data system ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
l. Monitored pollutants (check all that apply):	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe: Describe "other"	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe: Describe "other"	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe: Describe "other"

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

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
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 #

How does eDEP handle multiple fuels?

☐ **Add a NEW fuel:** Check the box if you need to add a fuel that you did **not** report on previously (eDEP will add a blank Sect. B form to your package).

☐ **Delete this fuel:** check box if you stopped using this fuel in this unit p*ermanently*. 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
SCC Code Description – filled by eDEP

b. Type of fuel – check one:

☐ no.2 ☐ no.4 ☐ no.6

☑ diesel ☐ coal ☐ natural gas

☐ jet fuel ☐ other - describe:

Note: The option to have eDEP calculate your emissions is not available if your fuel type is "other".

Describe "other" fuel

c. Sulfur content for oils and coal (0 – 2.2):

.0401
Percent by weight

d. Ash content for oils and coal (0 -10):

0
Percent by weight

Note for e: Enter the **Maximum Fuel Rate** at which the unit can burn fuel (its absolute uncontrolled design capacity). Do not enter the normal operation rate nor any restricted (allowable) rate.

e. Maximum hourly fuel rate for all firing burners:

0.0380 Amount
1000 GALLONS Units per hour

Enter "0" if unit decommissioned prior to this Year of Record.

f. Do you have fuel or usage restrictions?

☑ yes ☐ no - skip to question 2

g. DEP approval number for restrictions:

MBR-89-COM-31
Most recent for this fuel

h. Annual use restriction (amount or hours):
For this fuel

300 Quantity
HOUR Units

i. Short term use restriction (amount or hours):
For this fuel

24 Quantity
HOUR Units

Per: ☐ month ☐ week ☑ day ☐ hour

2. Annual usage:

Enter "0" if not used in the year of record

CAUTION: check your amount vs.units

0.2850 a. Amount – year of record
1000 GALLONS b. Units

.608 **1000 GALLONS**
c. Total annual usage for prior year of record – eDEP only

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

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
55
DEP EU# (old Point #)
1190564
Facility AQ identifier

B. Fuels and Emissions (cont.)

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

Read First

Calculations: The form will automatically calculate the **actual** and **potential** emissions UNLESS you check a box to manually enter emissions for each specific pollutant. Click the "?" icon for information to help you decide how to use this feature:

Part 75 Requirements

Pollutant:	☐ PM10	☐ PM2.5	☐ SO2	☐ NO2
Actual for previous year eDEP only:	0.0129 Tons	0.0129 Tons	0.0036 Tons	0.1837 Tons
Actual for year of record:	**0.0061** Tons	**0.0061** Tons	**0.0017** Tons	**0.0861** Tons
Potential emissions at max capacity uncontrolled:	**7.0737** Tons	**7.0737** Tons	**6.6077** Tons	**100.5298** Tons
Emission factor:	**42.50**	**42.50**	**39.70**	**604**
in pounds per unit:	1000 GALLONS	1000 GALLONS	1000 GALLONS	1000 GALLONS
For this fuel only Maximum allowed emissions – annual:	Tons	Tons	Tons	**3.5** 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	MBR-89-COM-31

other:

Pollutant:	☐ CO	☐ VOC	☐ NH3	specify
Actual for previous year eDEP only:	0.0396 Tons	0.0142 Tons	0.0129 Tons	Tons
Actual for year of record:	**0.0185** Tons	**0.0066** Tons	**0.0061** Tons	Tons
Potential emissions at max capacity uncontrolled:	**21.6372** Tons	**8.2055** Tons	**0.4827** Tons	Tons
Emission factor:	**130**	**49.30**	**2.90**	
in pounds per unit:	1000 GALLONS	1000 GALLONS	1000 GALLONS	
For this fuel only 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	

B. Fuels and Emissions (cont.)

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

a. Typical day VOC emissions – pounds per day	b. Typical day NOx emissions –pounds per day
1.0645	**13.8869**
☐ check to enter your own values	☐ check to enter your own values

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

C. Notes and Attachments

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

2. **Attachments**:

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

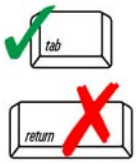
Massachusetts Department of Environmental Protection
Bureau of Waste Prevention – Air Quality

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
50
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. Equipment Description

1. Facility identifiers:

CLEAN HARBORS OF BRAINTREE INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. Emission unit identifiers:

CUMMINS GENERATOR #2 (NT855G2, DIESEL)
a. Facility's choice of emission unit name – edit as needed

50
b. Facility's emission unit number / code – edit as needed

50
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:

EXEMPT
a. Most recent approval number

5/4/1989
b. DEP approval date (mm/dd/yyyy)

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

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

BELOW THRESHOLDS IN 310 CMR 7.02 (2)(B) 7 AND 15
Reason for exemption

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

6. Emission unit installation date and decommission date:

8/1/1999
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 replaced since the last report.

7. Emission unit replacement:

a. Is this unit replacing another emission unit?

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

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

8. Additional state reporting requirements:

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

☑ yes - specify reporting frequency below ☐ no – skip to question 8c

b. Reporting frequency - check all that apply:

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

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

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

☐ NESHAP ☐ NSPS ☐ MACT

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

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
50
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

How to report on combined units ?

9. Equipment: EPA Unit Type Code (eDEP only): **RECIPROCATING IC ENGINE**

a. Type: ☐ boiler ☐ furnace ☑ engine ☐ other: _____ Describe "other" equipment type

If engine, is this an emergency generator? ☐ yes ☑ no

CUMMINGS
b. Manufacturer

125-DGEA
c. Model number

1.6880
d. Max input rating MMBtu/hr (must be greater than 0)

e. Number of burners (enter "0" if not applicable)

What to do if data unknown or not available ?

f. Type of burner – check one: ☐ rotary ☐ mech. atomizer ☐ steam atomizer ☐ air atomizer ☐ traveling grate ☐ hand fired ☐ other: _____ "other" burner type

g. Burner manufacturer

h. Burner model number

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

10. Hours of operation for the emission unit: a. ☐ check if continuously operated – 24 x 7 x 52

1
b. Number of hours per day

1
c. Number of days per week

10
d. Number of weeks per year

e. Percent of total annual operation that occurs in each calendar quarter:

29.6	22.2	40.7	7.5
Q1	Q2	Q3	Q4

Sum of Q1+Q2+Q3+Q4 must = 100%, or 0% if the unit was not operated for any quarter

11. Ozone season operation schedule – May 1 through September 30:

1
a. Ozone season hours per day

1
b. Ozone season days per week

5
c. Weeks operated in ozone season

12. Emission release point – select one: Engines click here for instructions:

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

Physical Stacks:
☑ vertical stack
☐ vertical with rain cap/sleeve

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

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

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

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

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

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
50
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

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

☐ yes – answer a through i ☑ no – skip to question 15

☐ **Check here** if you need to report more than 3 air pollution control devices on this unit. eDEP will add another page of control devices after this form.

How to **delete** a control ?

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

Leave **f**, **g**, **h** blank if not applicable.

	Air pollution control device 1	Air pollution control device 2	Air pollution control device 3
a. Type		Type	Type
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"

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

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record

50
DEP EU# (old Point #)

1190564
Facility AQ identifier

A. Equipment Description (cont.)

How to **delete** a monitor?

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

☐ yes – answer a through l ☑ no – skip to section B

Do not leave blank – if unknown write ‘unknown’ or estimate

Leave **f**, **g**, **h** blank if not applicable.

	Monitor 1	**Monitor 2**	**Monitor 3**
a. Monitor type:	check only one: ☐ CEM ☐ Opacity ☐ other - describe: Describe “other”	check only one: ☐ CEM ☐ Opacity ☐ other - describe: Describe “other”	check only one: ☐ CEM ☐ Opacity ☐ other - describe: Describe “other”
b. Manufacturer:			
c. Model number:			
d. Monitor ID #:	Facility’s Designation	Facility’s Designation	Facility’s Designation
e. Installation date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
f. DEP approval #:			
g. DEP approval date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
h. Decommission date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
i. Recorder ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
j. Audible alarm ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
k. Data system ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
l. Monitored pollutants (check all that apply):	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe: Describe “other”	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe: Describe “other”	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe: Describe “other”

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

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record

50
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 #2-CUMMINS #NT855G2- #2 OI
Fuel name

1
DEP Fuel #

How does eDEP handle multiple fuels?

☐ **Add a NEW fuel:** Check the box if you need to add a fuel that you did **not** report on previously (eDEP will add a blank Sect. B form to your package).

☐ **Delete this fuel:** check box if you stopped using this fuel in this unit p*ermanently*. 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
SCC Code Description – filled by eDEP

b. Type of fuel – check one:

☐ no.2 ☐ no.4 ☐ no.6

☑ diesel ☐ coal ☐ natural gas

☐ jet fuel ☐ other - describe:

Note: The option to have eDEP calculate your emissions is not available if your fuel type is "other".

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
Percent by weight

Note for e: Enter the **Maximum Fuel Rate** at which the unit can burn fuel (its absolute uncontrolled design capacity). Do not enter the normal operation rate nor any restricted (allowable) rate.

e. Maximum hourly fuel rate for all firing burners:

0.0120 Amount
1000 GALLONS Units per hour

Enter "0" if unit decommissioned prior to this Year of Record.

f. Do you have fuel or usage restrictions?

☑ yes ☐ no - skip to question 2

g. DEP approval number for restrictions:

EXEMPT 7.02
Most recent for this fuel

h. Annual use restriction (amount or hours):
For this fuel

300 Quantity
HOUR Units

i. Short term use restriction (amount or hours):
For this fuel

24 Quantity
DAY Units

Per: ☐ month ☐ week ☑ day ☐ hour

2. Annual usage:

Enter "0" if not used in the year of record

CAUTION: check your amount vs.units

0.1620 a. Amount – year of record
1000 GALLONS b. Units

.12 **1000 GALLONS**
c. Total annual usage for prior year of record – eDEP only

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

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
50
DEP EU# (old Point #)
1190564
Facility AQ identifier

B. Fuels and Emissions (cont.)

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

Read First

Calculations: The form will automatically calculate the **actual** and **potential** emissions UNLESS you check a box to manually enter emissions for each specific pollutant. Click the "?" icon for information to help you decide how to use this feature:

Part 75 Requirements

Pollutant:	☐ PM10	☐ PM2.5	☐ SO2	☐ NO2
Actual for previous year eDEP only:	0.0026 Tons	0.0026 Tons	0.0007 Tons	0.0362 Tons
Actual for year of record:	**0.0034** Tons	**0.0034** Tons	**0.0010** Tons	**0.0489** Tons
Potential emissions at max capacity uncontrolled:	**2.2338** Tons	**2.2338** Tons	**2.0866** Tons	**31.7462** Tons
Emission factor:	**42.50**	**42.50**	**39.70**	**604**
in pounds per unit:	1000 GALLONS	1000 GALLONS	1000 GALLONS	1000 GALLONS
For this fuel only 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

Pollutant:	☐ CO	☐ VOC	☐ NH3	other: specify
Actual for previous year eDEP only:	0.0078 Tons	0.0028 Tons	0.0026 Tons	Tons
Actual for year of record:	**0.0105** Tons	**0.0038** Tons	**0.0034** Tons	Tons
Potential emissions at max capacity uncontrolled:	**6.8328** Tons	**2.5912** Tons	**0.1524** Tons	Tons
Emission factor:	**130**	**49.30**	**2.90**	
in pounds per unit:	1000 GALLONS	1000 GALLONS	1000 GALLONS	
For this fuel only 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		

B. Fuels and Emissions (cont.)

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

a. Typical day VOC emissions – pounds per day	b. Typical day NOx emissions –pounds per day
0.8414	**10.8269**
☐ check to enter your own values	☐ check to enter your own values

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

C. Notes and Attachments

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

2. **Attachments**:

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

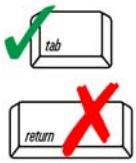
Massachusetts Department of Environmental Protection
Bureau of Waste Prevention – Air Quality

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
3
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. Equipment Description

1. Facility identifiers:

CLEAN HARBORS OF BRAINTREE INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. Emission unit identifiers:

CLEAVER BROOKS BOILER (NO.2 FUEL OIL, 0.3S)
a. Facility's choice of emission unit name – edit as needed

3
b. Facility's emission unit number / code – edit as needed

3
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
a. Most recent approval number

9/11/1986
b. DEP approval date (mm/dd/yyyy)

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

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

Reason for exemption

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

6. Emission unit installation date and decommission date:

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 replaced since the last report.

7. Emission unit replacement:

a. Is this unit replacing another emission unit?

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

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

8. Additional state reporting requirements:

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

☑ yes - specify reporting frequency below ☐ no – skip to question 8c

b. Reporting frequency - check all that apply:

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

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

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

☑ NESHAP ☐ NSPS ☐ MACT

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

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
3
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

How to report on combined units ?

9. Equipment: EPA Unit Type Code (eDEP only): **BOILER**

a. Type: ☑ boiler ☐ furnace ☐ engine ☐ other:
Describe "other" equipment type

If engine, is this an emergency generator? ☐ yes ☑ no

CLEAVER BROOKS
b. Manufacturer

CB800-150
c. Model number

What to do if data unknown or not available ?

2.80
d. Max input rating MMBtu/hr (must be greater than 0)

1
e. Number of burners (enter "0" if not applicable)

f. Type of burner – check one: ☐ rotary ☑ mech. atomizer ☐ steam atomizer ☐ air atomizer ☐ traveling grate ☐ hand fired ☐ other:
"other" burner type

CL BROOKS
g. Burner manufacturer

CB800-150-150
h. Burner model number

9/1/1986
i. Burner installation date (mm/dd/yyyy)

10. Hours of operation for the emission unit: a. ☐ check if continuously operated – 24 x 7 x 52

5
b. Number of hours per day

4
c. Number of days per week

8
d. Number of weeks per year

e. Percent of total annual operation that occurs in each calendar quarter:

100.0	0	0.0	0.0
Q1	Q2	Q3	Q4

Sum of Q1+Q2+Q3+Q4 must = 100%, or 0% if the unit was not operated for any quarter

11. Ozone season operation schedule – May 1 through September 30:

0
a. Ozone season hours per day

0
b. Ozone season days per week

0
c. Weeks operated in ozone season

12. Emission release point – select one:

Engines click here for instructions:

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

Physical Stacks:
☑ vertical stack
☐ vertical with rain cap/sleeve

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

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

3 1 STACK - BOILER #1-CLEAVER BROOKS, NO 2 FUEL OIL
Facility's stack identifier from STACK form – to change stack name use STACK form

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

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

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
3
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

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

☐ yes – answer a through i ☑ no – skip to question 15

☐ **Check here** if you need to report more than 3 air pollution control devices on this unit. eDEP will add another page of control devices after this form.

How to **delete** a control ?

	Air pollution control device 1	Air pollution control device 2	Air pollution control device 3
a. Type		Type	Type
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)

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

Leave **f**, **g**, **h** blank if not applicable.

i. Percent overall efficiency - enter for all pollutants that the device was designed to control:

	Air pollution control device 1	Air pollution control device 2	Air pollution control device 3
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-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record

3
DEP EU# (old Point #)

1190564
Facility AQ identifier

A. Equipment Description (cont.)

How to **delete** a monitor?

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

☐ yes – answer a through l ☑ no – skip to section B

Do not leave blank – if unknown write ‘unknown’ or estimate (a–e)

Leave **f, g, h** blank if not applicable.

	Monitor 1	**Monitor 2**	**Monitor 3**
a. Monitor type:	check only one: ☐ CEM ☐ Opacity ☐ other - describe: Describe “other”	check only one: ☐ CEM ☐ Opacity ☐ other - describe: Describe “other”	check only one: ☐ CEM ☐ Opacity ☐ other - describe: Describe “other”
b. Manufacturer:			
c. Model number:			
d. Monitor ID #:	Facility’s Designation	Facility’s Designation	Facility’s Designation
e. Installation date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
f. DEP approval #:			
g. DEP approval date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
h. Decommission date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
i. Recorder ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
j. Audible alarm ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
k. Data system ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
l. Monitored pollutants (check all that apply):	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe: Describe “other”	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe: Describe “other”	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe: Describe “other”

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

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record

3
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

BOILER #1-CLEAVER BROOKS #2 OIL-0.3 PE
Fuel name

1
DEP Fuel #

How does eDEP handle multiple fuels?

☐ **Add a NEW fuel:** Check the box if you need to add a fuel that you did **not** report on previously (eDEP will add a blank Sect. B form to your package).

☐ **Delete this fuel:** check box if you stopped using this fuel in this unit p*ermanently*. 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):

10200501
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 ☐ no.4 ☐ no.6

☐ diesel ☐ coal ☐ natural gas

☐ jet fuel ☐ other - describe:

Note: The option to have eDEP calculate your emissions is not available if your fuel type is "other".

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
Percent by weight

Note for e: Enter the **Maximum Fuel Rate** at which the unit can burn fuel (its absolute uncontrolled design capacity). Do not enter the normal operation rate nor any restricted (allowable) rate.

e. Maximum hourly fuel rate for all firing burners:

0.02 Amount
1000 GALLONS Units per hour

Enter "0" if unit decommissioned prior to this Year of Record.

f. Do you have fuel or usage restrictions?

☑ yes ☐ no - skip to question 2

g. DEP approval number for restrictions:

MBR-95-RES-047
Most recent for this fuel

h. Annual use restriction (amount or hours):
For this fuel

376680 Quantity
GALLONS Units

i. Short term use restriction (amount or hours):
For this fuel

31390 Quantity
GALLONS Units

Per: ☑ month ☐ week ☐ day ☐ hour

2. Annual usage:

Enter "0" if not used in the year of record

CAUTION: check your amount vs.units

0.4000 a. Amount – year of record
1000 GALLONS b. Units

9.248 **1000 GALLONS**
c. Total annual usage for prior year of record – eDEP only

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
3
DEP EU# (old Point #)
1190564
Facility AQ identifier

B. Fuels and Emissions (cont.)

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

Read First

Calculations: The form will automatically calculate the **actual** and **potential** emissions UNLESS you check a box to manually enter emissions for each specific pollutant. Click the "?" icon for information to help you decide how to use this feature:

Part 75 Requirements

Pollutant:	☐ PM10	☐ PM2.5	☐ SO2	☐ NO2
Actual for previous year eDEP only:	0.0092 Tons	0.0038 Tons	0.1970 Tons	0.0925 Tons
Actual for year of record:	**0.0004** Tons	**0.0002** Tons	**0.0085** Tons	**0.0040** Tons
Potential emissions at max capacity uncontrolled:	**0.1883** Tons	**0.0471** Tons	**3.6907** Tons	**4.5202** Tons
Emission factor:	**1**	**0.25**	**142**	**24**
in pounds per unit:	1000 GALLONS	1000 GALLONS	1000 GALLONS	1000 GALLONS
For this fuel only 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-86-COM-027	MBR-86-COM-027	MBR-86-COM-027	MBR-86-COM-027

Pollutant:	☐ CO	☐ VOC	☐ NH3	other: specify
Actual for previous year eDEP only:	0.0231 Tons	0.0016 Tons	0.0037 Tons	Tons
Actual for year of record:	**0.0010** Tons	**0.0001** Tons	**0.0002** Tons	Tons
Potential emissions at max capacity uncontrolled:	**0.9417** Tons	**0.0377** Tons	**0.1507** Tons	Tons
Emission factor:	**5**	**0.20**	**0.80**	
in pounds per unit:	1000 GALLONS	1000 GALLONS	1000 GALLONS	
For this fuel only 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-86-COM-027		MBR-86-COM-027	

B. Fuels and Emissions (cont.)

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

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

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

C. Notes and Attachments

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

2. **Attachments**:

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

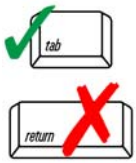
Massachusetts Department of Environmental Protection
Bureau of Waste Prevention – Air Quality

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
2
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. Equipment Description

1. Facility identifiers:

CLEAN HARBORS OF BRAINTREE INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. Emission unit identifiers:

HURST BOILER, 2.091 MMBTU/HR, NO. 2 FUEL OIL-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

2
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 Approvals ? ☑ 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

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

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

7. Emission unit replacement:

a. Is this unit replacing another emission unit?

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

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

8. Additional state reporting requirements:

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

☑ yes - specify reporting frequency below ☐ no – skip to question 8c

b. Reporting frequency - check all that apply:

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

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

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

☑ NESHAP ☐ NSPS ☐ MACT

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

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
2
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

How to report on combined units ?

9. Equipment: EPA Unit Type Code (eDEP only): **BOILER**

a. Type: ☑ boiler ☐ furnace ☐ engine ☐ other:
Describe "other" equipment type

If engine, is this an emergency generator? ☐ yes ☑ no

HURST
b. Manufacturer

4VT-50BHP
c. Model number

What to do if data unknown or not available ?

2.0910
d. Max input rating MMBtu/hr (must be greater than 0)

1
e. Number of burners (enter "0" if not applicable)

f. Type of burner – check one: ☐ rotary ☑ mech. atomizer ☐ steam atomizer ☐ air atomizer ☐ traveling grate ☐ hand fired ☐ other:
"other" burner type

HURST
g. Burner manufacturer

30
h. Burner model number

5/1/2003
i. Burner installation date (mm/dd/yyyy)

10. Hours of operation for the emission unit: a. ☐ check if continuously operated – 24 x 7 x 52

24
b. Number of hours per day

7
c. Number of days per week

24
d. Number of weeks per year

e. Percent of total annual operation that occurs in each calendar quarter:

94.3	0.0	0.0	5.7
Q1	Q2	Q3	Q4

Sum of Q1+Q2+Q3+Q4 must = 100%, or 0% if the unit was not operated for any quarter

11. Ozone season operation schedule – May 1 through September 30:

0
a. Ozone season hours per day

0
b. Ozone season days per week

0
c. Weeks operated in ozone season

12. Emission release point – select one:

Engines click here for instructions:

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

Physical Stacks:
☑ vertical stack
☐ vertical with rain cap/sleeve

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

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

2 STACK #2- HURST BOILER, NO. 2 FUEL OIL
Facility's stack identifier from STACK form – to change stack name use STACK form

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

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

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
2
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

How to **delete** a control ?

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

☐ yes – answer a through i ☑ no – skip to question 15

☐ **Check here** if you need to report more than 3 air pollution control devices on 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**
Do not leave blank – if unknown write 'unknown' or estimate	a. Type	Type	Type
	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)
Leave **f**, **g**, **h** blank if not applicable.	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"

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

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
2
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

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

How to **delete** a monitor?

☐ yes – answer a through l ☑ no – skip to section B

Do not leave blank – if unknown write ‘unknown’ or estimate

Leave **f**, **g**, **h** blank if not applicable.

	Monitor 1	**Monitor 2**	**Monitor 3**
a. Monitor type:	check only one: ☐ CEM ☐ Opacity ☐ other - describe: Describe “other”	check only one: ☐ CEM ☐ Opacity ☐ other - describe: Describe “other”	check only one: ☐ CEM ☐ Opacity ☐ other - describe: Describe “other”
b. Manufacturer:			
c. Model number:			
d. Monitor ID #:	Facility’s Designation	Facility’s Designation	Facility’s Designation
e. Installation date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
f. DEP approval #:			
g. DEP approval date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
h. Decommission date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
i. Recorder ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
j. Audible alarm ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
k. Data system ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
l. Monitored pollutants (check all that apply):	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe: Describe “other”	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe: Describe “other”	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe: Describe “other”

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

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record

2
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

BOILER #2-HURST #30 - #2 OIL-0.3 SULFU
Fuel name

1
DEP Fuel #

How does eDEP handle multiple fuels?

☐ **Add a NEW fuel:** Check the box if you need to add a fuel that you did **not** report on previously (eDEP will add a blank Sect. B form to your package).

☐ **Delete this fuel:** check box if you stopped using this fuel in this unit p*ermanently*. 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):

10200501
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 ☐ no.4 ☐ no.6

☐ diesel ☐ coal ☐ natural gas

☐ jet fuel ☐ other - describe:

Note: The option to have eDEP calculate your emissions is not available if your fuel type is "other".

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):

0.0
Percent by weight

Note for e: Enter the **Maximum Fuel Rate** at which the unit can burn fuel (its absolute uncontrolled design capacity). Do not enter the normal operation rate nor any restricted (allowable) rate.

e. Maximum hourly fuel rate for all firing burners:

0.0155 Amount
1000 GALLONS Units per hour

Enter "0" if unit decommissioned prior to this Year of Record.

f. Do you have fuel or usage restrictions?

☑ yes ☐ no - skip to question 2

g. DEP approval number for restrictions:

EXEMPT
Most recent for this fuel

h. Annual use restriction (amount or hours):
For this fuel

91980.0000 Quantity
GALLONS Units

i. Short term use restriction (amount or hours):
For this fuel

9271.0000 Quantity
GALLONS Units

Per: ☑ month ☐ week ☐ day ☐ hour

2. Annual usage:

Enter "0" if not used in the year of record

CAUTION: check your amount vs.units

10.0890 a. Amount – year of record
1000 GALLONS b. Units

9.544 **1000 GALLONS**
c. Total annual usage for prior year of record – eDEP only

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

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
2
DEP EU# (old Point #)
1190564
Facility AQ identifier

B. Fuels and Emissions (cont.)

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

Read First

Calculations: The form will automatically calculate the **actual** and **potential** emissions UNLESS you check a box to manually enter emissions for each specific pollutant. Click the "?" icon for information to help you decide how to use this feature:

Part 75 Requirements

Pollutant:	☐ PM10	☐ PM2.5	☐ SO2	☐ NO2
Actual for previous year eDEP only:	0.0095 Tons	0.0040 Tons	0.2033 Tons	0.0954 Tons
Actual for year of record:	**0.0101** Tons	**0.01** Tons	**0.23** Tons	**0.24** Tons
Potential emissions at max capacity uncontrolled:	**0.4820** Tons	**0.0120** Tons	**0.9441** Tons	**1.5630** Tons
Emission factor:	**1.000000**	**0.25**	**142**	**24**
in pounds per unit:	1000 GALLONS	1000 GALLONS	1000 GALLONS	1000 GALLONS
For this fuel only				
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

Pollutant:	☐ CO	☐ VOC	☐ NH3	other: specify
Actual for previous year eDEP only:	0.0239 Tons	0.0016 Tons	0.0038 Tons	Tons
Actual for year of record:	**0.0252** Tons	**0.0017** Tons	**0.0040** Tons	Tons
Potential emissions at max capacity uncontrolled:	**0.2409** Tons	**0.0096** Tons	**0.0385** Tons	Tons
Emission factor:	**5**	**0.20**	**0.80**	
in pounds per unit:	1000 GALLONS	1000 GALLONS	1000 GALLONS	
For this fuel only				
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	

BWP AQ AP-1

Emission Unit – Fuel Utilization Equipment

2012
Year of record
2
DEP EU# (old Point #)
1190564
Facility AQ identifier

B. Fuels and Emissions (cont.)

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

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

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

C. Notes and Attachments

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

2. **Attachments**:

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

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

BWP AQ AP-2

Emission Unit – Process Description

2012
Year of record

5
DEP EU# (old Point #)

1190564
Facility AQ identifier

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

A. Emission Unit – Process Description

1. Facility identifiers:

CLEAN HARBORS OF BRAINTREE INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. Emission unit identifiers:

2 DRUM CRUSHING LINES
a. Facility's choice of emission unit name – edit as needed

5
b. Facility's emission unit number / code – edit as needed

5
c. DEP emissions unit # (old SSEIS Point #)

d. Combined Units – enter number of individual units

3. DEP approvals – leave blank if not applicable:

MBR-87-IND-191
a. Most recent approval number

1/13/1988
b. DEP approval date (mm/dd/yyyy)

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

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

Reason for exemption

How to report on combined units ?

6. Equipment manufacturer and model number and type:

GREENBECK
a. Manufacturer

18 SWB
b. Model number

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.

BWP AQ AP-2

Emission Unit – Process Description

2012
Year of record
5
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Emission Unit – Process Description (cont.)

8. Emission unit replacement:

a. Is this unit replacing another emission unit?

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

DEP's emission unit number and facility unit name

9. Additional state reporting requirements:

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

☑ yes – specify reporting frequency below ☐ no – skip to question 9c

b. Reporting frequency – check all that apply:

☐ Monthly ☐ Quarterly ☐ Semi-annual ☑ Annual ☑ RES

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

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

☐ NESHAP ☐ NSPS ☐ MACT

10. Hours of operation for the emission unit: a. ☐ check if continuously operated – 24 x 7 x 52

0	**0**	**0**
b. Number of hours per day	c. Number of days per week	d. Number of weeks per year

e. Percent of total annual operation that occurs in each calendar quarter:

0	**0**	**0**	**0**
Q1	Q2	Q3	Q4

Sum of Q1+Q2+Q3+Q4 must = 100%
(or 0% if the unit was not operated for any quarter)

11. Ozone season schedule – May 1 through September 30:

0	**0**	0
a. Ozone season hours per day	b. Ozone season days per week	c. Weeks operated in ozone season

12. Emission release point – select one:

Non-Stack Release Points:	Physical Stacks:
☐ fugitive ☐ horizontal vent	☑ vertical stack
☐ gooseneck ☐ downward facing vent	☐ vertical with rain cap/sleeve
☐ vertical stack/vent less than 10ft	

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

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

5 2 DRUM CRUSHING LINES

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

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

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

BWP AQ AP-2

Emission Unit – Process Description

2012
Year of record
5
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Emission Unit – Process Description (cont.)

14. Is there **monitoring equipment** on this emissions unit or its related control devices ?
☐ yes – answer a through l ☑ no – skip to Question 15

How to **delete** a monitor

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

Leave **f, g, h** blank if not applicable.

	Monitor 1	**Monitor 2**	**Monitor 3**
a. Monitor type:	check only one: ☐ CEMs ☐ opacity ☐ fuel flow meter ☐ time recorder ☐ temperature recorder ☐ pressure ☐ other – describe: Describe "other"	check only one: ☐ CEMs ☐ opacity ☐ fuel flow meter ☐ time recorder ☐ temperature recorder ☐ pressure ☐ other – describe: Describe "other"	check only one: ☐ CEMs ☐ opacity ☐ fuel flow meter ☐ time recorder ☐ temperature recorder ☐ pressure ☐ other – describe: Describe "other"
b. Manufacturer:			
c. Model #:			
d. Monitor ID #:	Facility's Designation	Facility's Designation	Facility's Designation
e. Installation date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
f. DEP approval #:			
g. DEP approval date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
h. Decommission date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
i. Recorder ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
j. Audible alarm ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
k. Data system ?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
l. Monitored pollutants - check all that apply:	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe: Describe "other"	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe: Describe "other"	☐ PM 10 ☐ PM 2.5 ☐ SO2 ☐ CO ☐ VOC ☐ NO2 ☐ NH3 ☐ Mercury ☐ Oxygen ☐ CO2 ☐ H2S ☐ HCL ☐ Opacity ☐ other – describe: Describe "other"

A. Emission Unit – Process Description (cont.)

15. Are there air pollution control devices on this emissions unit?

☐ yes – answer a through i ☑ no – skip to Section B

☐ **Check here** if you need to report more than 3 air pollution control devices on this unit. eDEP will add another page of control devices after this form.

How to **delete** a control

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

Leave **f**, **g**, **h** blank if not applicable.

	Air pollution control device 1	Air pollution control device 2	Air pollution control device 3
a. Type		Type	Type
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:

	Air pollution control device 1	Air pollution control device 2	Air pollution control device 3
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

Emission Unit – Process Description

2012
Year of record
5
DEP EU# (old Point #)
1190564
Facility AQ identifier

B. Emissions for Raw Materials/Finished Products

☐ **Add a NEW material / product:** Check the box if you need to add a material or product that you did **not** report on previously (eDEP will add a blank Sect. B form to your package).

☐ **Delete this material/product:** check the box if you stopped using this material or making this product in this unit p*ermanently*. You must still report data for this year of record even if amount is "0" – the material / product will be removed from the unit in the next report cycle.

1. Operation description:

RCRA EMPTY DRUMS

a. Raw material or finished product name:
Number of segments for this unit (previous records): 1

How does eDEP handle multiple raw materials or finished products ?

b. Is material/product an input or output ?

☑ input ☐ output

1
DEP #

c. Process description:

2 DRUM CRUSHING LINES DRUMS

d. Source Classification Code (SCC):
(see instructions)

39999998
SC Code (call DEP if SC Code will not validate)
MISC INDUSTRIAL PROCESS
SCC Description – filled by eDEP upon validation

e. Maximum process rate for material/product:

120
Amount
1000 EACH
Units per hour

Note: Definition of Maximum process rate

f. If organic material, give weight % of:

VOC
HOC
HYC

g. Total actual raw material used or finished product produced for year of record:

Enter "0" if not used in the year of record

0.0000
Amount
1000 EACH
Units
0
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.l

i. DEP approval number for restrictions:

Most recent approval number for this material or product

j. Short term raw material/finished product restriction – if none, leave blank:

Quantity (amount or hours)
Units

Per: ☐ month ☐ week ☐ day ☐ hour

k. Annual material/product restriction – if none, leave blank:

Quantity (amount or hours)
Units

l. Indicate which air pollution control devices from Section A, Question 15 control this material/product by listing the facility-designated control device ID # for each unit that applies:

Device ID #
Device ID #
Device ID #
Device ID #
Device ID #
Device ID #

How to make a new air pollution control device appear in these drop menus?

☐ check here if ALL air pollution control devices on the unit apply to this material/product

BWP AQ AP-2

Emission Unit – Process Description

2012 — Year of record
5 — 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 Actual and Potential emissions means that you are certifying that there were less than 0.0001 (or zero) tons of emissions for each blank.

Pollutant	PM10	PM2.5	SO2	NO2	CO
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::					
For this material or product only (leave blank if none) Max allowed – annual:	Tons	Tons	Tons	Tons	Tons
Max allowed – short term:	Pounds	Pounds	Pounds	Pounds	Pounds
Short term period:					
Basis: DEP approval number or regulation:					

Important: Reporting now required for t-Butyl Acetate

Pollutant	VOC	HOC	*Reserved*	NH3	**Other:** specify
Actual for previous year eDEP only:	0 Tons	Tons	Tons	Tons	Tons
Actual for year of record:	**0.0000** Tons	Tons	Tons	Tons	Tons
Potential emissions at maximum capacity uncontrolled:	**12** Tons	Tons	Tons	Tons	Tons
Emission factor:	**0.11**				
In pounds per unit:	1000 EACH				
For this material or product only (leave blank if none) Max allowed – annual:	Tons	Tons	Tons	Tons	Tons
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

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.

THE DRUM CRUSHING UNIT WAS NOT USED IN CALENDAR YEAR 2012

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-3

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

2012
Year of record

1
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 – Incinerator Information

1. Facility identifiers:

CLEAN HARBORS OF BRAINTREE INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. Emission unit identifiers:

STACK 1 POINT 1 SEGMENT
a. Facility's choice of emission unit name – edit as needed

1
b. Facility's emission unit number / code – edit as needed

1
c. DEP emissions unit # – SSEIS point #

3. DEP approvals – leave blank if not applicable:

MBR-89-INC-003
a. Most recent approval number

5/17/1993
b. DEP approval date (mm/dd/yyyy)

How to **delete** a unit ?

4. Emission unit installation and decommission dates:

5/1/1989
a. Installation date – estimate if unknown (mm/dd/yyyy)

4/7/1998
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 number 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 exceedance reporting)

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

☐ NESHAP ☐ NSPS ☐ MACT

A. Emission Unit – Incinerator Information (cont.)

Note: This section is not for afterburners or other pollution control equipment.

7. Incinerator description:

a. Type: ☐ commercial ☐ industrial ☐ medical ☐ municipal ☐ sludge ☑ other: **INCINERATOR**
Specify "other" incinerator type

VENT-O -MATIC
b. Manufacturer:

CAE500
c. Model number

d. Maximum operating capacity: **350**
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:

☐ Type 0 Waste – dry rubbish, trash
☐ Type 1 Waste – rubbish
☐ Type 2 Waste – mix of rubbish & garbage
☐ Type 3 Waste – garbage
☑ Type 4 Waste – infectious/medical waste
☐ Type 5 Waste – industrial (liquid)
☐ Type 6 Waste – industrial (solid)
☐ other:

Specify Other Waste Type

9. Source Classification Code (SCC) (see instructions): **50200505**
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**
Square Feet

15. Automatic feeder? ☑ yes ☐ no

BWP AQ AP-3

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

2012
Year of record
1
DEP EU# (old Point#)
1190564
Facility AQ identifier

A. Emission Unit – Incinerator Information (cont.)

16. Hours of operation for the emission unit: a. ☐ check if continuously operated – 24 x 7 x 52

b. Number of hours per day	c. Number of days per week	d. Number of weeks per year
0	0	0

e. Percent of total annual operation that occurs in each calendar quarter:

Q1	Q2	Q3	Q4
0	0	0	0

Sum of Q1+Q2+Q3+Q4 must = 100%
or 0 if the unit was not operated for any quarter

17. Ozone season schedule – May 1 through September 30:

a. Ozone season hours per day	b. Ozone season days per week	c. Weeks operated in ozone season
0	0	0

18. Emission release point – select one:

Non-Stack Release Points:	Physical Stacks:
☐ fugitive ☐ horizontal vent ☐ gooseneck ☐ downward facing vent ☐ vertical stack/vent less than 10ft	☑ vertical stack ☐ vertical with rain cap/sleeve

If Non-Stack release point, skip to question 20.

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

1 STACK #1- INCINERATOR #1-VENT-O-MATIC

Facility's stack identifier from STACK form – to change stack name use the STACK form
If the stack for this unit is not listed, save and exit this form now and complete a new Stack form **before** returning to this form.

20. Temperature – degrees in Fahrenheit

	Primary Chamber		Secondary Chamber	
	Lower	Upper	Lower	Upper
a. Operating range:	50	100		
b. Permitted range:	50	100		

21. Retention time in seconds

	Lower	Upper
a. Operating retention time:		
b. Permitted retention time:		

A. Emission Unit – Incinerator Information (cont.)

22. **Primary** chamber auxiliary burners:

a. Type of burner – check one: ☐ rotary ☐ mech. atomizer ☐ steam atomizer ☐ air atomizer ☐ traveling grate ☐ hand fired ☑ other:

MECH ATOMIZER
Specify "other" burner type

CARLIN
b. Burner manufacturer

201-CRD
c. Burner model number

0.77
d. Maximum rating MMBtu / hr

e. Source Classification C code (SCC): (see instructions)

50290005
SC Code (call DEP if SC code will not validate)
AUX.FUEL/NO EMSNS-DISTILLATE OIL
SC Code Description – filled by eDEP upon validation

f. Type of fuel – check one: ☐ no.2 ☐ no.4 ☐ no.6 ☐ diesel ☐ natural gas ☑ other – describe:

AUX FUEL
Describe "other "fuel

g. Sulfur content for oils (0-2.2):

Percent by weight

h. Maximum hourly fuel rate for all firing burners:

0.1750
Amount

1000 GALLONS
Units per hour

i. Total actual fuel used for year of record: (Enter "0" if not used in the year of record)

0.0000
Amount – year of record

1000 GALLONS
Units

0
Prior year – eDEP only

1000 GALLONS
Units

j. Do you have fuel or usage restrictions? ☑ yes ☐ no – skip to question 23

k. DEP approval number for fuel restrictions: MBR-89-INC-003
Most recent for this fuel

l. Annual usage restriction (for this fuel):

183.96
Quantity

1000 GALLONS
Units

m. Short term use restriction (for this fuel):

15.33
Quantity

1000 GALLONS
Units

Per: ☑ month ☐ week ☐ day ☐ hour

A. Emission Unit – Incinerator Information (cont.)

23. **Secondary** chamber auxiliary burners:

Is there a secondary chamber? ☐ Yes ☑ No – if no skip to Question 24

a. Type of burner – check one: ☐ rotary ☐ mech. atomizer ☐ steam atomizer ☐ air atomizer ☐ traveling grate ☐ hand fired ☐ other:

Specify "other" burner type

b. Burner manufacturer

c. Burner model number

d. Maximum rating MMBtu/hr

e. Source Classification C code (SCC):
(see instructions)

SC Code (call DEP if SC code will not validate)

SC Code Description – filled by eDEP upon validation

f. Type of fuel – check one: ☐ 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 burners:

Amount | Units per hour

i. Total actual fuel used for year of record:
(Enter "0" if not used in the year of record)

Amount – year of record | Units

Prior year – eDEP only | Units

j. Do you have fuel usage restrictions? ☐ yes ☑ no – skip to question 24

k. DEP approval number for fuel restrictions:

Most recent for this fuel

l. Annual usage restriction (for this fuel):

Quantity | Units

m. Short term fuel use restriction (for this fuel):

Quantity | Units

Per: ☐ month ☐ week ☐ day ☐ hour

A. Emission Unit – Incinerator Information (cont.)

24. Is there an air pollution control device/s on this emissions unit? ☐ **Check here** if you need to report more than 3 air pollution control devices on this unit. eDEP will add another page of control devices after this form.

☑ yes – answer a through i ☐ no – skip to question 25

How to **delete** a control?

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

Leave **f**, **g**, **h** blank if not applicable.

	Air pollution control device	**Air pollution control device**	**Air pollution control device**
	DRY SCRUBBER	SODIUM-ALKALI SCRUBBING	FABRIC FILTER
a. Type	**0**	**0**	**0**
b. Manufacturer	**0**	**0**	**0**
c. Model number	**3-CAE500**	**2-CAE500**	**1-CAE500**
d. Facility's ID for this device	**4/1/1989**	**4/1/1989**	**4/1/1989**
e. Installation date (mm/dd/yyyy)			
f. DEP approval # (most recent)			
g. DEP approval date (mm/dd/yyyy)			
h. Decommission date (mm/dd/yyyy)			

i. Percent overall efficiency – enter for all pollutants that the device was designed to control:

PM 10	**99** % Overall eff.	**99** % Overall eff.	**99** % Overall eff.
PM 2.5	**0** % Overall eff.	**0** % Overall eff.	**0** % Overall eff.
SO2	**0** % Overall eff.	**0** % Overall eff.	**0** % Overall eff.
CO	**0** % Overall eff.	**0** % Overall eff.	**0** % Overall eff.
VOC	**0** % Overall eff.	**0** % Overall eff.	**0** % Overall eff.
NO2	**0** % Overall eff.	**0** % Overall eff.	**0** % Overall eff.
NH3	**0** % Overall eff.	**0** % Overall eff.	**0** % Overall eff.
HOC	**0** % Overall eff.	**0** % Overall eff.	**0** % Overall eff.
HYC	**0** % Overall eff.	**0** % Overall eff.	**0** % Overall eff.
Hg	**0** % Overall eff.	**0** % Overall eff.	% Overall eff.
Pb	**0** % Overall eff.	**0** % Overall eff.	**0** % Overall eff.
Other	**99** % Overall eff.	**99** % Overall eff.	**99** % Overall eff.
	TOTAL SUSPENDED PARTICULATES	TOTAL SUSPENDED PARTICULATES	TOTAL SUSPENDED PARTICULATES
	Specify "Other"	Specify "Other"	Specify "Other"

A. Emission Unit – Incinerator Information (cont.)

25. Is there **monitoring equipment** on this emissions unit:
☑ yes – answer a through l ☐ no – skip to section B

How to **delete** a monitor?

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

Leave **f**, **g**, **h** blank if not applicable.

	Monitor 1	Monitor 2	Monitor 3
a. Monitor type:	check only one: ☐ CEMs ☐ opacity ☐ fuel flow meter ☐ time recorder ☐ temperature recorder ☐ pressure ☑ other – describe:	check only one: ☐ CEMs ☐ opacity ☐ fuel flow meter ☐ time recorder ☐ temperature recorder ☐ pressure ☐ other – describe:	check only one: ☐ CEMs ☐ opacity ☐ fuel flow meter ☐ time recorder ☐ temperature recorder ☐ pressure ☐ other – describe:
	DYNATROL Describe "other"	Describe "other"	Describe "other"
b. Manufacturer:	**DYNATROL**		
c. Model number:	**NO. 110M**		
d. Monitor ID #:	**1** Facility's Designation	Facility's Designation	Facility's Designation
e. Installation date:	**5/17/1990** (mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
f. DEP approval #:	**MBR-91-INC-003B**		
g. DEP approval date:	**5/17/1993** (mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
h. Decommission date:	(mm/dd/yyyy)	(mm/dd/yyyy)	(mm/dd/yyyy)
i. Recorder?	☐ yes ☑ no	☐ yes ☐ no	☐ yes ☐ no
j. Audible alarm?	☑ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
k. Data system?	☐ yes ☑ no	☐ yes ☐ no	☐ yes ☐ no
l. 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 Protection
Bureau of Waste Prevention – Air Quality

BWP AQ AP-3

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

2012
Year of record
1
DEP EU# (old Point#)
1190564
Facility AQ identifier

B. Emissions

1. Total emissions for this emissions unit – tons per year:

Important: Leaving blanks for Actual and Potential emissions means that you are certifying that there were less than 0.0001 (or zero) tons of emissions for each blank.

Pollutant	PM10	PM2.5	SO2	NO2	CO
Actual for previous year eDEP only:	0 Tons	0 Tons	0 Tons	0 Tons	0 Tons
Actual for year of record:	0.0000 Tons	0.0000 Tons	0.0000 Tons	0.0000 Tons	0.0000 Tons
Potential emissions at maximum capacity uncontrolled:	.048 Tons	.048 Tons	3 Tons	5 Tons	6 Tons
Emission factor:					
Emission factor units in pounds per:					
For the entire unit only (leave blank if none) Maximum allowed emissions – annual:	Tons	Tons	Tons	Tons	Tons
Maximum allowed emissions – short term:	Pounds	Pounds	Pounds	Pounds	Pounds
Short term period (or MMBtu):					
Basis: DEP approval number or regulation:	MBR-91-INC-003B		MBR-91-INC-003B	MBR-91-INC-003B	MBR-91-INC-003B

Pollutant	VOC	HOC	*Reserved*	NH3	**Other:** Specify
Actual for previous year eDEP only:	0 Tons	Tons	Tons	Tons	Tons
Actual for year of record:	0.0000 Tons	Tons	Tons	Tons	Tons
Potential emissions at maximum capacity uncontrolled:	19 Tons	Tons	Tons	Tons	Tons
Emission factor:					
Emission factor units in pounds per:					
For the entire unit only (leave blank if none) Maximum allowed emissions – annual:	Tons	Tons	Tons	Tons	Tons
Maximum allowed emissions – short term:	Pounds	Pounds	Pounds	Pounds	Pounds
Short term period (or MMBtu):					
Basis – DEP approval number or regulation:	MBR-91-INC-003B				

NOTE for Ozone Season Emissions

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

0
a. Typical day VOC emissions – pounds per day

☐ check to enter your own values

0
b. Typical day NOx emissions – pounds per day

☐ check to enter your own values

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. NOTIFICATION TO MA DEP IN A LETTER DATED APRIL 7, 1998.

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-4

Emission Unit – Organic Material Storage

2012
Year of record
60
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 INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. Emission unit identifiers:

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

60
b. Facility's emission unit number / code – edit as needed

60
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:

3/1/2011
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.

How to **delete** a unit ?

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

5. Unit descriptions:

a. Description: ☑ above ground ☐ below ground

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

Specify other

19.13
c. Height / Length – feet

9.25
d. Diameter – feet

6506.0000
e. Capacity – gallons

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

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012
Year of record
60
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7. Material stored (at start of year):

WASTEWATER NO VOCS NOT APPLICABLE TO REPORT
a. Name of material

b. CAS number if single chemical

50300701
c. SC Code for standing / breathing loss

Click "?" icon for **SC Code help**

LIQUID WASTE GENERAL
d. SC Code description – filled by eDEP

52
f. Temperature – typical storage temp. in °Fahrenheit

0
e. Vapor pressure in PSI at 25º C

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

d. SC Code description – filled by eDEP

e. Vapor pressure in PSI at 25º C

f. Temperature – typical storage temp. in ºFahrenheit

g. Annual throughput in gallons

h. RVP – gasoline only

i. Total oxygen percent – gasoline only

j. Oxygenate name – gasoline only

B. Notes and Attachments

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

DID NOT LIST ANNUAL THROUGHPUT. WASTE WATER TANK, NOT APPLICABLE TO HAP/ VOC.

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.

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012
Year of record
57
DEP EU# (old Point #)
1190564
Facility AQ identifier

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

Important: When filling out forms on 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 INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. 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 unit number / code – edit as needed

57
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:

3/1/2011
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.

How to **delete** a unit ?

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

5. Unit descriptions:

a. Description: ☑ above ground ☐ below ground

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

Specify other

19.25
c. Height / Length – feet

9.25
d. Diameter – feet

6506.0000
e. Capacity – gallons

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

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012
Year of record
57
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

b. CAS number if single chemical

50300701
c. SC Code for standing / breathing loss

Click "?" icon for **SC Code help**

LIQUID WASTE GENERAL
d. SC Code description – filled by eDEP

52
f. Temperature – typical storage temp. in °Fahrenheit

0
e. Vapor pressure in PSI at 25º C

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

d. SC Code description – filled by eDEP

e. Vapor pressure in PSI at 25º C

f. Temperature – typical storage temp. in ºFahrenheit

g. Annual throughput in gallons

h. RVP – gasoline only

i. Total oxygen percent – gasoline only

j. Oxygenate name – gasoline only

B. Notes and Attachments

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

DID NOT LIST ANNUAL THROUGHPUT. WASTE WATER TANK, NOT APPLICABLE TO HAP/ VOC.

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.

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012
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.

A. Equipment Description

1. Facility identifiers:

CLEAN HARBORS OF BRAINTREE INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. Emission unit identifiers:

AG TANK B2- POLYOLEFIN TANK WASTEWATER NO VOCS
a. Facility's choice of emission unit name – edit as needed

54
b. Facility's emission unit number / code – edit as needed

54
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:

3/1/2011
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.

How to **delete** a unit ?

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

5. Unit descriptions:

a. Description: ☑ above ground ☐ below ground

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

Specify other

19.13
c. Height / Length – feet

9.25
d. Diameter – feet

6506.0000
e. Capacity – gallons

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

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012
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

b. CAS number if single chemical

50300701
c. SC Code for standing / breathing loss

Click "?" icon for **SC Code help**

LIQUID WASTE GENERAL
d. SC Code description – filled by eDEP

52
f. Temperature – typical storage temp. in °Fahrenheit

0
e. Vapor pressure in PSI at 25º C

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

d. SC Code description – filled by eDEP

e. Vapor pressure in PSI at 25º C

f. Temperature – typical storage temp. in ºFahrenheit

g. Annual throughput in gallons

h. RVP – gasoline only

i. Total oxygen percent – gasoline only

j. Oxygenate name – gasoline only

B. Notes and Attachments

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

DID NOT LIST ANNUAL THROUGHPUT. WASTE WATER TANK, NOT APPLICABLE TO HAP/ VOC.

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.

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012
Year of record
53
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 INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. Emission unit identifiers:

AG TANK B1- POLYOLEFIN WASTEWATER NO VOCS
a. Facility's choice of emission unit name – edit as needed

53
b. Facility's emission unit number / code – edit as needed

53
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:

3/1/2011
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.

How to **delete** a unit ?

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

5. Unit descriptions:

a. Description: ☑ above ground ☐ below ground

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

Specify other

19.13
c. Height / Length – feet

9.25
d. Diameter – feet

6506.0000
e. Capacity – gallons

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

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012
Year of record
53
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7. Material stored (at start of year):

CORROSIVES NO VOCS NOT APPLIBABLE TO REPORT
a. Name of material

b. CAS number if single chemical

50300701
c. SC Code for standing / breathing loss

Click "?" icon for **SC Code help**

LIQUID WASTE GENERAL
d. SC Code description – filled by eDEP

52
f. Temperature – typical storage temp. in °Fahrenheit

0.0000
e. Vapor pressure in PSI at 25º C

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

d. SC Code description – filled by eDEP

e. Vapor pressure in PSI at 25º C

f. Temperature – typical storage temp. in ºFahrenheit

g. Annual throughput in gallons

h. RVP – gasoline only

i. Total oxygen percent – gasoline only

j. Oxygenate name – gasoline only

B. Notes and Attachments

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

DID NOT LIST ANNUAL THROUGHPUT. WASTE WATER TANK, NOT APPLICABLE TO HAP/ VOC.

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.

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012
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 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 INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. Emission unit identifiers:

AG TANK A12 (6,300 GAL), NO. 2 FUEL OIL
a. Facility's choice of emission unit name – edit as needed

52
b. Facility's emission unit number / code – edit as needed

52
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:

1/1/1985
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 permanently or replaced since the last report.

How to **delete** a unit ?

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

5. Unit descriptions:

a. Description: ☑ above ground ☐ below ground

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

Specify other

20
c. Height / Length – feet

6
d. Diameter – feet

4000
e. Capacity – gallons

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

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012	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
b. CAS number if single chemical

PETROLEUM STORAGEDIST FUEL NO.2
d. SC Code description – filled by eDEP

52
f. Temperature – typical storage temp. in °Fahrenheit

h. RVP – gasoline only

j. Oxygenate name – gasoline only

40301021
c. SC Code for standing / breathing loss

0.009
e. Vapor pressure in PSI at 25° C

8450.0000
g. Annual throughput in gallons (enter 0 if not used)

i. Total oxygen percent – gasoline only

Click "?" icon for **SC Code help**

8. New material stored (enter new material if contents changed during year of record):

a. Name of material

b. CAS number if single chemical

d. SC Code description – filled by eDEP

f. Temperature – typical storage temp. in ºFahrenheit

h. RVP – gasoline only

j. Oxygenate name – gasoline only

c. SC Code for standing / breathing loss

e. Vapor pressure in PSI at 25º C

g. Annual throughput in gallons

i. Total oxygen percent – gasoline only

B. 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. 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.

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012
Year of record
51
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 INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. Emission unit identifiers:

AG TANK A13 (4,000 GAL), DIESEL LOW SULF
a. Facility's choice of emission unit name – edit as needed

51
b. Facility's emission unit number / code – edit as needed

51
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:

1/1/1985
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 permanently or replaced since the last report.

How to **delete** a unit ?

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

5. Unit descriptions:

a. Description: ☑ above ground ☐ below ground

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

Specify other

25
c. Height / Length – feet

7
d. Diameter – feet

4000
e. Capacity – gallons

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

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012	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
b. CAS number if single chemical

40301021
c. SC Code for standing / breathing loss

PETROLEUM STORAGEDIST FUEL NO.2
d. SC Code description – filled by eDEP

0.009
e. Vapor pressure in PSI at 25º C

52
f. Temperature – typical storage temp. in °Fahrenheit

104612.0000
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

Click "?" icon for **SC Code help**

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

d. SC Code description – filled by eDEP

e. Vapor pressure in PSI at 25º C

f. Temperature – typical storage temp. in ºFahrenheit

g. Annual throughput in gallons

h. RVP – gasoline only

i. Total oxygen percent – gasoline only

j. Oxygenate name – gasoline only

B. Notes and 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. 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.

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012
Year of record
26
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 INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. Emission unit identifiers:

AG TANK A25 (1,000 GAL), PCB
a. Facility's choice of emission unit name – edit as needed

26
b. Facility's emission unit number / code – edit as needed

26
c. DEP emissions unit # – SSEIS point #

d. Combined Units – enter number of individual units

How to **combine units** ?

3. Emission unit installation and decommission dates:

1/1/1987
a. Installation date – estimate if unknown (mm/dd/yyyy)

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

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

How to **delete** a unit ?

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

5. Unit descriptions:

a. Description: ☑ above ground ☐ below ground

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

Specify other

10.5
c. Height / Length – feet

4
d. Diameter – feet

1000
e. Capacity – gallons

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

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012
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

50300899
c. SC Code for standing / breathing loss

b. CAS number if single chemical

WASTE DISP-INDUS /TREATMENT, STORAGE
d. SC Code description – filled by eDEP

e. Vapor pressure in PSI at 25º C

52
f. Temperature – typical storage temp. in °Fahrenheit

0
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

Click "?" icon for **SC Code help**

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

d. SC Code description – filled by eDEP

e. Vapor pressure in PSI at 25º C

f. Temperature – typical storage temp. in ºFahrenheit

g. Annual throughput in gallons

h. RVP – gasoline only

i. Total oxygen percent – gasoline only

j. Oxygenate name – gasoline only

B. Notes and Attachments

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

THIS TANK WAS NOT USED IN CALENDAR YEAR 2012

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.

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012
Year of record
25
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 INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. Emission unit identifiers:

AG TANK A24 (2,400 GAL), PCB
a. Facility's choice of emission unit name – edit as needed

25
b. Facility's emission unit number / code – edit as needed

25
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:

1/1/1983
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.

How to **delete** a unit ?

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

5. Unit descriptions:

a. Description: ☑ above ground ☐ below ground

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

Specify other

10.5
c. Height / Length – feet

7
d. Diameter – feet

2400
e. Capacity – gallons

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

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012	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

	50300899
b. CAS number if single chemical	c. SC Code for standing / breathing loss
WASTE DISP-INDUS /TREATMENT, STORAGE	
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25º C
52	0.0000
f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)
h. RVP – gasoline only	i. Total oxygen percent – gasoline only
j. Oxygenate name – gasoline only	

Click "?" icon for **SC Code help**

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
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25º C
f. Temperature – typical storage temp. in ºFahrenheit	g. Annual throughput in gallons
h. RVP – gasoline only	i. Total oxygen percent – gasoline only
j. Oxygenate name – gasoline only	

B. Notes and Attachments

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

TANK NOT USED IN YEAR 2012

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.

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012
Year of record
24
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 INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. Emission unit identifiers:

AG TANK A23 (2,400 GAL), PCB
a. Facility's choice of emission unit name – edit as needed

24
b. Facility's emission unit number / code – edit as needed

24
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:

1/1/1983
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.

How to **delete** a unit ?

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

5. Unit descriptions:

a. Description: ☑ above ground ☐ below ground

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

Specify other

10.5
c. Height / Length – feet

7
d. Diameter – feet

2400
e. Capacity – gallons

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

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012	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

	50300899
b. CAS number if single chemical	c. SC Code for standing / breathing loss
WASTE DISP-INDUS /TREATMENT, STORAGE	0.030
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25º C
52	0.0000
f. Temperature – typical storage temp. in °Fahrenheit	g. Annual throughput in gallons (enter 0 if not used)
h. RVP – gasoline only	i. Total oxygen percent – gasoline only
j. Oxygenate name – gasoline only	

Click "?" icon for **SC Code help**

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
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25º C
f. Temperature – typical storage temp. in ºFahrenheit	g. Annual throughput in gallons
h. RVP – gasoline only	i. Total oxygen percent – gasoline only
j. Oxygenate name – gasoline only	

B. Notes and Attachments

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

TANK NOT USED IN YEAR 2012

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.

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012
Year of record
23
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 INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. Emission unit identifiers:

AG TANK A22 (2,400 GAL), PCB
a. Facility's choice of emission unit name – edit as needed

23
b. Facility's emission unit number / code – edit as needed

23
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:

1/1/1983
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.

How to **delete** a unit ?

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

5. Unit descriptions:

a. Description: ☑ above ground ☐ below ground

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

Specify other

10.5
c. Height / Length – feet

7
d. Diameter – feet

2400
e. Capacity – gallons

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

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012	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
a. Name of material

1336363
b. CAS number if single chemical

50300899
c. SC Code for standing / breathing loss

WASTE DISP-INDUS /TREATMENT, STORAGE
d. SC Code description – filled by eDEP

0.030
e. Vapor pressure in PSI at 25º C

52
f. Temperature – typical storage temp. in °Fahrenheit

0.0000
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

Click "?" icon for **SC Code help**

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

d. SC Code description – filled by eDEP

e. Vapor pressure in PSI at 25º C

f. Temperature – typical storage temp. in ºFahrenheit

g. Annual throughput in gallons

h. RVP – gasoline only

i. Total oxygen percent – gasoline only

j. Oxygenate name – gasoline only

B. Notes and Attachments

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

TANK WAS NOT USED IN YEAR 2012

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.

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012
Year of record
14
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 INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. Emission unit identifiers:

AG TANK A9- 10,000 GAL WASTE STREAM FB1
a. Facility's choice of emission unit name – edit as needed

14
b. Facility's emission unit number / code – edit as needed

14
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:

3/1/2011
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.

How to **delete** a unit ?

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

5. Unit descriptions:

a. Description: ☑ above ground ☐ below ground

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

Specify other

11.50
c. Height / Length – feet

11.20
d. Diameter – feet

10000.0000
e. Capacity – gallons

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

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012	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 WASTE FUEL
a. Name of material

	50300899
b. CAS number if single chemical	c. SC Code for standing / breathing loss
WASTE DISP-INDUS /TREATMENT, STORAGE	1.040
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25º C
52	224030.0000
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	

Click "?" icon for **SC Code help**

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
CHEMICAL STORAGE	
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25º C
f. Temperature – typical storage temp. in ºFahrenheit	g. Annual throughput in gallons
h. RVP – gasoline only	i. Total oxygen percent – gasoline only
j. Oxygenate name – gasoline only	

B. Notes and 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. 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.

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012
Year of record
13
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 INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. Emission unit identifiers:

AG TANK A8 - 10,000 GAL TANK
a. Facility's choice of emission unit name – edit as needed

13
b. Facility's emission unit number / code – edit as needed

13
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:

3/1/2011
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.

How to **delete** a unit ?

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

5. Unit descriptions:

a. Description: ☑ above ground ☐ below ground

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

Specify other

18.50
c. Height / Length – feet

11.20
d. Diameter – feet

10000.0000
e. Capacity – gallons

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

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012	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

	50300899
b. CAS number if single chemical	c. SC Code for standing / breathing loss
WASTE DISP-INDUS /TREATMENT, STORAGE	0.390
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25º C
52	191899.0000
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	

Click "?" icon for **SC Code help**

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
d. SC Code description – filled by eDEP	e. Vapor pressure in PSI at 25º C
f. Temperature – typical storage temp. in ºFahrenheit	g. Annual throughput in gallons
h. RVP – gasoline only	i. Total oxygen percent – gasoline only
j. Oxygenate name – gasoline only	

B. Notes and 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. 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.

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012
Year of record
12
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 INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. Emission unit identifiers:

AG TANK A7- 9,500 GAL WASTE STREAM AA19 (NMP)
a. Facility's choice of emission unit name – edit as needed

12
b. Facility's emission unit number / code – edit as needed

12
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:

3/1/2011
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.

How to **delete** a unit ?

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

5. Unit descriptions:

a. Description: ☑ above ground ☐ below ground

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

Specify other

17.25
c. Height / Length – feet

12.00
d. Diameter – feet

9500.0000
e. Capacity – gallons

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012
Year of record
12
DEP EU# (old Point #)
1190564
Facility AQ identifier

A. Equipment Description (cont.)

7. Material stored (at start of year):

ORGANIC LEAN WATERS (OIL, GAS WATER MIXTURE)
a. Name of material

b. CAS number if single chemical	50300899 c. SC Code for standing / breathing loss
WASTE DISP-INDUS /TREATMENT, STORAGE d. SC Code description – filled by eDEP	3.250 e. Vapor pressure in PSI at 25º C
52 f. Temperature – typical storage temp. in °Fahrenheit	12420.0000 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	

Click "?" icon for **SC Code help**

8. New material stored (enter new material if contents changed during year of record):

NMP AND WATER
a. Name of material

	50300899 c. SC Code for standing / breathing loss
b. CAS number if single chemical WASTE DISP-INDUS /TREATMENT, STORAGE d. SC Code description – filled by eDEP	0.342 e. Vapor pressure in PSI at 25º C
52 f. Temperature – typical storage temp. in ºFahrenheit	38498.0000 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 additional information that will help DEP understand your submission.

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.

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012
Year of record
11
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 INC
a. Facility name

34839
b. DEP Account number

1190564
c. Facility AQ identifier – SSEIS ID number

2. Emission unit identifiers:

AG TANK A6- 9,500 GAL WASTE STREAM A-31
a. Facility's choice of emission unit name – edit as needed

11
b. Facility's emission unit number / code – edit as needed

11
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:

3/1/2011
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.

How to **delete** a unit ?

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

5. Unit descriptions:

a. Description: ☑ above ground ☐ below ground

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

Specify other

17.25
c. Height / Length – feet

12.00
d. Diameter – feet

9500.0000
e. Capacity – gallons

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

BWP AQ AP-4

Emission Unit – Organic Material Storage

2012
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

b. CAS number if single chemical

40799997
c. SC Code for standing / breathing loss

CHEMICAL STORAGE
d. SC Code description – filled by eDEP

3.250
e. Vapor pressure in PSI at 25º C

52
f. Temperature – typical storage temp. in °Fahrenheit

6978.0000
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

Click "?" icon for **SC Code help**

8. New material stored (enter new material if contents changed during year of record):

OIL AND WATER
a. Name of material

50300899
b. CAS number if single chemical

WASTE DISP-INDUS /TREATMENT, STORAGE
c. SC Code for standing / breathing loss

0.030
d. SC Code description – filled by eDEP

52
e. Vapor pressure in PSI at 25º C

109647.0000
f. Temperature – typical storage temp. in ºFahrenheit

g. Annual throughput in gallons

h. RVP – gasoline only

i. Total oxygen percent – gasoline only

j. Oxygenate name – gasoline only

B. Notes and 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. 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.

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

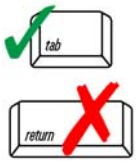
BWP AQ AP-STACK

Physical Vertical Stacks

2012
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 not use the return key.



A. Stack Description

How to report combined units/stacks: see 3b below

1. Facility identifiers:

CLEAN HARBORS OF BRAINTREE INC
a. Facility name

34839
b. DEP Account number

1190564
c. AQ identifier – SSEIS ID number

2. Stack identifiers:

1 STACK-2 FURNACES - LENNOX
a. Facility's choice of stack name – edit as needed

9
b. Facility's stack number – edit as needed

9
c. DEP stack # – old SSEIS stack #

3. Type: a. ☑ vertical ☐ vertical with rain cap/sleeve b. Combined stacks – enter number of individual stacks:

What to do if data is unknown or unavailable ?

4. Dimensions:

28
Height in feet above the ground

0.6
Internal Diameter in feet

5. Gas exit velocity:

15
Low end - feet per second (0.1 – 500)

15
High end - feet per second (0.1 – 500)

6. Exit temperature:

200
Low end - ^{0}Fahrenheit (50 – 1800)

200
High end - ^{0} Fahrenheit (50 – 1800)

7. Stack liner material: ☑ metal ☐ brick refractory ☐ other:

Describe Other

How to **delete** a stack ?

8. Decommission date – if applicable:

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

B. Emission Units Associated with Stack – eDEP Only

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

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

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

C. Notes and Attachments

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

THIS UNIT WAS REMOVED FROM SERVICE IN 2009, IT WAS NOT USED IN CALENDAR YEAR 2012

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

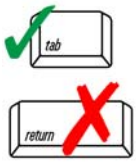
BWP AQ AP-STACK

Physical Vertical Stacks

2012
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 not use the return key.



A. Stack Description

How to report combined units/stacks: see 3b below

1. Facility identifiers:

CLEAN HARBORS OF BRAINTREE INC
a. Facility name

34839
b. DEP Account number

1190564
c. AQ identifier – SSEIS ID number

2. Stack identifiers:

1 STACK GENERATOR (2)- CUMMINS AND CATERPILLAR
a. Facility's choice of stack name – edit as needed

7
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:

What to do if data is unknown or unavailable ?

4. Dimensions:

12
Height in feet above the ground

0.8
Internal Diameter in feet

5. Gas exit velocity:

32
Low end - feet per second (0.1 – 500)

32
High end - feet per second (0.1 – 500)

6. Exit temperature:

1150
Low end - ^{0}Fahrenheit (50 – 1800)

1150
High end - ^{0} Fahrenheit (50 – 1800)

7. Stack liner material: ☑ metal ☐ brick refractory ☐ other:

Describe Other

How to **delete** a stack ?

8. Decommission date – if applicable:

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

B. Emission Units Associated with Stack – eDEP Only

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

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

EU#50-CUMMINS GENERATOR #2 (NT855G2, DIESEL)

EU#55-CATERPILLAR GENERATOR #1

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

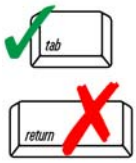
BWP AQ AP-STACK

Physical Vertical Stacks

2012
Year of record
5
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.



A. Stack Description

How to report combined units/stacks: see 3b below

1. Facility identifiers:

CLEAN HARBORS OF BRAINTREE INC
a. Facility name

34839
b. DEP Account number

1190564
c. AQ identifier – SSEIS ID number

2. Stack identifiers:

2 DRUM CRUSHING LINES
a. Facility's choice of stack name – edit as needed

5
b. Facility's stack number – edit as needed

5
c. DEP stack # – old SSEIS stack #

3. Type: a. ☑ vertical ☐ vertical with rain cap/sleeve b. Combined stacks – enter number of individual stacks:

What to do if data is unknown or unavailable ?

4. Dimensions:

54
Height in feet above the ground

1.3
Internal Diameter in feet

5. Gas exit velocity:

54
Low end - feet per second (0.1 – 500)

54
High end - feet per second (0.1 – 500)

6. Exit temperature:

60
Low end - ^{0}Fahrenheit (50 – 1800)

60
High end - ^{0} Fahrenheit (50 – 1800)

7. Stack liner material: ☑ metal ☐ brick refractory ☐ other:

Describe Other

How to **delete** a stack ?

8. Decommission date – if applicable:

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

B. Emission Units Associated with Stack – eDEP Only

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

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

EU#5-2 DRUM CRUSHING LINES

C. Notes and Attachments

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

THIS UNIT WAS NOT USED IN CALENDAR YEAR 2012

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

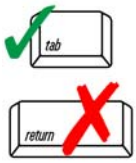
BWP AQ AP-STACK

Physical Vertical Stacks

2012
Year of record
3
DEP Stack #
1190564
Facility AQ identifier

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

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



A. Stack Description

How to report combined units/stacks: see 3b below

1. Facility identifiers:

CLEAN HARBORS OF BRAINTREE INC
a. Facility name

34839
b. DEP Account number

1190564
c. AQ identifier – SSEIS ID number

2. Stack identifiers:

1 STACK - BOILER #1-CLEAVER BROOKS, NO 2 FUEL OIL
a. Facility's choice of stack name – edit as needed

3
b. Facility's stack number – edit as needed

3
c. DEP stack # – old SSEIS stack #

3. Type: a. ☑ vertical ☐ vertical with rain cap/sleeve b. Combined stacks – enter number of individual stacks:

What to do if data is unknown or unavailable ?

4. Dimensions:

35
Height in feet above the ground

1
Internal Diameter in feet

5. Gas exit velocity:

47
Low end - feet per second (0.1 – 500)

47
High end - feet per second (0.1 – 500)

6. Exit temperature:

450
Low end - ^{0}Fahrenheit (50 – 1800)

450
High end - ^{0} Fahrenheit (50 – 1800)

7. Stack liner material: ☑ metal ☐ brick refractory ☐ other:

Describe Other

How to **delete** a stack ?

8. Decommission date – if applicable:

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

B. Emission Units Associated with Stack – eDEP Only

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

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

EU#3-CLEAVER BROOKS BOILER (NO.2 FUEL OIL, 0.3S)

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

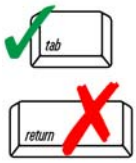
BWP AQ AP-STACK

Physical Vertical Stacks

2012
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 not use the return key.



A. Stack Description

How to report combined units/stacks: see 3b below

1. Facility identifiers:

CLEAN HARBORS OF BRAINTREE INC
a. Facility name

34839
b. DEP Account number

1190564
c. AQ identifier – SSEIS ID number

2. Stack identifiers:

STACK #2- HURST BOILER, NO. 2 FUEL OIL
a. Facility's choice of stack name – edit as needed

2
b. Facility's stack number – edit as needed

2
c. DEP stack # – old SSEIS stack #

3. Type: a. ☑ vertical ☐ vertical with rain cap/sleeve b. Combined stacks – enter number of individual stacks:

What to do if data is unknown or unavailable ?

4. Dimensions:

35
Height in feet above the ground

1
Internal Diameter in feet

5. Gas exit velocity:

50
Low end - feet per second (0.1 – 500)

50
High end - feet per second (0.1 – 500)

6. Exit temperature:

212
Low end - ^{0}Fahrenheit (50 – 1800)

212
High end - ^{0} Fahrenheit (50 – 1800)

7. Stack liner material: ☑ metal ☐ brick refractory ☐ other:

Describe Other

How to **delete** a stack ?

8. Decommission date – if applicable:

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

B. Emission Units Associated with Stack – eDEP Only

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

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

EU#2-HURST BOILER, 2.091 MMBTU/HR, NO. 2 FUEL OIL-0.3 S

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

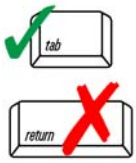
BWP AQ AP-STACK

Physical Vertical Stacks

2012
Year of record
10
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.



A. Stack Description

How to report combined units/stacks: see 3b below

1. Facility identifiers:

CLEAN HARBORS OF BRAINTREE INC
a. Facility name

34839
b. DEP Account number

1190564
c. AQ identifier – SSEIS ID number

2. Stack identifiers:

CUT OFF ROOM
a. Facility's choice of stack name – edit as needed

10
b. Facility's stack number – edit as needed

10
c. DEP stack # – old SSEIS stack #

3. Type: a. ☑ vertical ☐ vertical with rain cap/sleeve b. Combined stacks – enter number of individual stacks:

What to do if data is unknown or unavailable ?

4. Dimensions:

18
Height in feet above the ground

1
Internal Diameter in feet

5. Gas exit velocity:

15
Low end - feet per second (0.1 – 500)

15
High end - feet per second (0.1 – 500)

6. Exit temperature:

70
Low end - ^{0}Fahrenheit (50 – 1800)

70
High end - ^{0} Fahrenheit (50 – 1800)

7. Stack liner material: ☑ metal ☐ brick refractory ☐ other:

Describe Other

How to **delete** a stack ?

8. Decommission date – if applicable:

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

B. Emission Units Associated with Stack – eDEP Only

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

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

C. Notes and Attachments

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

THIS ROOM IS USED TO PUMP FLAMMABLE DRUMS ONLY.

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

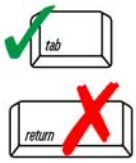
BWP AQ AP-STACK

Physical Vertical Stacks

2012
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.



A. Stack Description

How to report combined units/stacks: see 3b below

1. Facility identifiers:

CLEAN HARBORS OF BRAINTREE INC
a. Facility name

34839
b. DEP Account number

1190564
c. AQ identifier – SSEIS ID number

2. Stack identifiers:

STACK #1- INCINERATOR #1-VENT-O-MATIC
a. Facility's choice of stack name – edit as needed

1
b. Facility's stack number – edit as needed

1
c. DEP stack # – old SSEIS stack #

3. Type: a. ☑ vertical ☐ vertical with rain cap/sleeve b. Combined stacks – enter number of individual stacks:

What to do if data is unknown or unavailable ?

4. Dimensions:

185
Height in feet above the ground

1.2
Internal Diameter in feet

5. Gas exit velocity:

21
Low end - feet per second (0.1 – 500)

21
High end - feet per second (0.1 – 500)

6. Exit temperature:

240
Low end - ^{0}Fahrenheit (50 – 1800)

240
High end - ^{0} Fahrenheit (50 – 1800)

7. Stack liner material: ☑ metal ☐ brick refractory ☐ other:

Describe Other

How to **delete** a stack ?

8. Decommission date – if applicable:

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

B. Emission Units Associated with Stack – eDEP Only

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

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

EU#1-STACK 1 POINT 1 SEGMENT

C. Notes and Attachments

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

INCINERATOR #1-VENT-O-MATIC WAS NOT OPERATED IN 2012

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.