

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: 659520

Document: Toxics Use Reduction Act (TURA) Reporting

Size of File: 4312.75K

Status of Transaction: Submitted

Date and Time Created: 3/29/2023:2:28:39 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.



Form S Cover Sheet

Reporting Year CLEAN HARBORS OF B Facility Name 34839 DEP Facility ID Number

2013

#### Section 1: General Information

Im	po	rta	nt:
	~~		

When filling out forms on the computer, use only the tab key Facility Name and Address:

a. Name		
b. Street Address		
BRAINTREE	MA	021840000
c. City	d. State	e. Zip Code
If YES, attach a statement substantiat	ting the claim. This copy is: Saniti	zed 🔲 Unsanitized 🗌
Are all chemicals only used to treat wa (if yes, then there are no production un	ting the claim. This copy is: Saniti stewater? Yes No 🗹 hits associated with this facility).	zed 📃 Unsanitized 📃
If YES, attach a statement substantiat Are all chemicals only used to treat wa (if yes, then there are no production un	ting the claim. This copy is: Saniti Istewater? Yes No 🗹 hits associated with this facility). 02184CLNHR38	zed Unsanitized
If YES, attach a statement substantiat Are all chemicals only used to treat wa (if yes, then there are no production un i. Taxpayer Identification Number	ting the claim. This copy is: Saniti Istewater? Yes No its associated with this facility).	zed Unsanitized 5QU entory (TRI) Identification Numbe

#### **Section 2: Certification Statement**

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

David P. Cabral, P.E., TURP, BCEE	7/1/2014
a. Authorized Signature	b. Date (MM/DD/YYYY)
DAVID	CABRAL
c. First Name (Print)	d. Last Name (Print)
COMPLIANCE MANAGER	cabral.david@cleanharbors.com
e. Position/Title	f. Email Address





Form S Cover Sheet

2013 Reporting Year CLEAN HARBORS OF B Facility Name 34839 DEP Facility ID Number

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

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

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

a.1	a.2
•	CAS # of chemical not reportable (if applicable) Chemical Name
	a3. Explanation of why the chemical Is [1] [2] [3] [4] [5] [6] [7]
a.4	a.5
	CAS # of chemical substituted for TURA chemical Chemical Name
г	
b.1[	b.2
	CAS # of chemical not reportable (if applicable) Chemical Name
	b.3 Explanation of why the chemical Is [1] [2] [3] [4] [5] [6] [7]
b.4	b.5
	CAS # of chemical substituted for TURA chemical Chemical Name
c.1	CAS # of chamical not reportable (if applicable)
	CAS # of chemical hot reportable (if applicable) Chemical Name
	c.3 Explanation of why the chemical Is [1] [2] [3] [4] [5] [6] [7]
c.4	c.5
	CAS # of chemical substituted for TURA chemical Chemical Name
d.1	d.2 CAS # of chamical not reportable (if applicable)
	CAS # of chemical not reportable (if applicable) Chemical Name
	d.3 Explanation of why the chemical Is [1] [2] [3] [4] [5] [6] [7]
d 4	
u.4	CAS # of chemical substituted for TURA chemical Chemical Name
e 1	e 2
0.1	CAS # of chemical not reportable (if applicable) Chemical Name
	not reportable (check codes): $[1]$ $[2]$ $[3]$ $[4]$ $[5]$ $[6]$
e.4	e.5
	CAS # of chemical substituted for TURA chemical Chemical Name
f.	Do you have more chemicals not subject to reporting this year? Yes No 🖌



Form S Cover Sheet

2013 Reporting Year CLEAN HARBORS OF B Facility Name 34839 DEP Facility ID Number

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

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

If there has been a substantial change in a PRODUCTION UNIT from the previous reporting year, the PRODUCTION UNIT must be given a new, unique number.

2	PRODUCTION UNIT must be given a new, unique number.
a. Production Unit #	b. Describe the Process:
Is this production unit IN USE for the reporting year of this submittal?	STABILIZATION OF LEAD
✓ Yes No	c. Describe the Product:
	DECHARACTERIZED WASTE.

Enter up to four (4) six-digit NAICS Codes that best describe the Product from this Production Unit:

<b>562211</b> d. NAICS Code	e. NAICS Code	f. NAICS Code	g. NAICS Code
h. Check the appro	priate description for the uni	t of product:	
🗌 area 📃 dollar	hours 🗌 kilowatt 🗌 le	ngth 🗌 N/A 🗌 number [	volume 🖌 weight
Production Process St	ep Information For This Pr	oduction Unit	

i. Enter the production process codes (listed in the reporting guidance) for each process step that involves a TURA-listed chemical as an input, output or throughput. To ensure eDEP works properly make sure this list is complete before proceeding.

1.	GG-01 Process Code	2.	Process Code	3.	Process Code	4.	Process Code
5.	Process Code	6.	Process Code	7.	Process Code	8.	Process Code
9.	Process Code	10.	Process Code	11.	Process Code	12.	Process Code
13.	Process Code	14.	Process Code	15.	Process Code	16.	Process Code
17.	Process Code	18.	Process Code	19.	Process Code	20.	Process Code
21.	Process Code	22.	Process Code	23.	Process Code	24.	Process Code



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



2013
Reporting Year
<b>CLEAN HARBORS OF B</b>
Facility Name
34839
DEP Facility ID Number

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

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

j. Produc	tion Unit	Number:	2 Pro	od. Unit #							
k. TURA	Chemica	al	<b>74</b> CA	<b>39921</b> S #			LE Ch	EAD emical Nar	ne		
Check "/	All" or the	number	s that cor	respond	to the pr	ocess co	des ente	red in i.			All. 🖌
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.
13.	14.	15.	16.	17.	18.	19.	20.	21.	22.	23.	24.
			42	20202							
I. TURA	Chemica	I	CA	30303 S #				hemical Na		ED BIPF	IENTLS
Check "/	All" or the	number	s that cor	respond	to the pr	ocess co	des ente	red in i.			All. 🖌
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.
13.	14.	15.	16.	17.	18.	19.	20.	21.	22.	23.	24.
m. TURA	Chemic	al		0.4							
			CA	.5 #			C	nemical Na	ime		_
Check "A	All" or the	e number	s that cor	respond	to the pr	ocess co	des ente	red in i.			AII. 🔄
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.
13.	14.	15.	16.	17.	18.	19.	20.	21.	22.	23.	24.
n. TURA	Chemica	al	CA	S #			[	hemical Na	ime		
Check "/	All" or the	number	s that cor	respond	to the pr	ocess co	des ente	red in i.			All.
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.
13.	14.	15.	16.	17.	18.	19.	20.	21.	22.	23.	24.
o. Are th chem	ere more	e eport for	Yes	V No		p. Have produ	additiona	al s been	Yes	V No	



**Form S Cover Sheet** 

2013 Reporting Year CLEAN HARBORS OF B Facility Name 34839 DEP Facility ID Number

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

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

If there has been a substantial change in a PRODUCTION UNIT from the previous reporting year, the PRODUCTION UNIT must be given a new, unique number.

b. Describe the Process:
STORAGE, HANDLING AND TRANSFER OF WASTE
c. Describe the Product:
POUNDS OF WASTE STORED

Enter up to four (4) six-digit NAICS Codes that best describe the Product from this Production Unit:

<b>562211</b> d. NAICS Code	e. NAICS Code	f. NAICS Code	g. NAICS Code
h. Check the appro	priate description for the uni	it of product:	
🗌 area 📃 dollar	hours 🗌 kilowatt 🗌 le	ength 🗌 N/A 🗌 number [	volume 🖌 weight
Production Process St	ep Information For This Pr	oduction Unit	

i. Enter the production process codes (listed in the reporting guidance) for each process step that involves a TURA-listed chemical as an input, output or throughput. To ensure eDEP works properly make sure this list is complete before proceeding.

1.	GG-04 Process Code	2.	Process Code	3.	Process Code	4.	Process Code
5.	Process Code	6.	Process Code	7.	Process Code	8.	Process Code
9.	Process Code	10.	Process Code	11.	Process Code	12.	Process Code
13.	Process Code	14.	Process Code	15.	Process Code	16.	Process Code
17.	Process Code	18.	Process Code	19.	Process Code	20.	Process Code
<u>2</u> 1.	Process Code	22.	Process Code	23.	Process Code	24.	Process Code

2



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



2013
Reporting Year
<b>CLEAN HARBORS OF B</b>
Facility Name
34839
DEP Facility ID Number

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

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

j. Produc	tion Unit	Number:	<b>3</b> Pro	od. Unit #							
k. TURA	Chemica	ıl	<b>74</b> CA	<b>39921</b> S #			LE Ch	EAD emical Nar	me		
Check "All" or the numbers that correspond to the process codes entered in i.					All. 🖌						
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.
13.	14.	15.	16.	17.	18.	19.	20.	21.	22.	23.	24.
I TURA	Chemica	I	13	36363			P	OLYCHL	ORINAT	ED BIPH	IENYLS
			CA	S #			C	nemical Na	ame		
Check "A	All" or the	number	s that cor	respond	to the pro	ocess co	des entei	red in i.			All. 🖌
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.
13.	14.	15.	16.	17.	18.	19.	20.	21.	22.	23.	24.
m. TURA	Chemic	al	87	2504					L-2-PYR	ROLIDO	NE
m. TURA	Chemic	al	<b>87</b> CA	2 <b>504</b> S #			<b>1</b> -	METHY hemical Na	L-2-PYR	ROLIDOI	NE
m. TURA Check "A	Chemic	al number	87 CA s that cor	2 <b>504</b> S # rrespond	to the pro	ocess co	des enter	METHY hemical Na red in i.	<b>L-2-PYR</b> ame	ROLIDOI	AII. 🗸
m. TURA Check "A 1.	Chemic All" or the 2. 🗌	al number 3. 🗌	87 CA s that cor 4	2 <b>504</b> S # rrespond 5.	to the pro	ocess co 7. 🗌	des enter 8.	METHY hemical Na red in i. 9.	L-2-PYR ame 10	<b>ROLIDOI</b> 11. 🗌	NE All. 🗸 12. 🗌
m. TURA Check "A 1 13	Chemic All" or the 2 14	al • number: 3 15	87 CA s that cor 4 16	2 <b>504</b> S # respond 5 17	to the pro 6 18	0cess co 7. 🗌 19. 🗌		METHY hemical Na red in i. 9.	L-2-PYRI ame 10 22	11 23	NE
m. TURA Check "A 1 13	Chemic All" or the 2 14	al number: 3 15	87 CA s that cor 4 16	2 <b>504</b> S # respond 5 17	to the pro 6 18	7 19	1-     C	METHY hemical Na red in i. 9 21	L-2-PYRI ame 10 22	11 23	NE AII. ✔ 12 24
m. TURA Check "A 1 13 n. TURA	Chemic All" or the 2 14 Chemica	al number: 3 15 al	87 CA s that cor 4 16 16 CA	2504 S # respond 5 17 7211 S #	to the pro 6 18	7 19		METHY hemical Na red in i. 9 21 THYLEN hemical Na	L-2-PYRI ame 10 22 IE GLYC ame	11 23 OL	NE
m. TURA Check "A 1 13 n. TURA Check "A	Chemic All" or the 2 14 Chemica	al number: 3 15 al	87 CA s that cor 4 16 16 10 CA	2504 S # respond 5 17 77211 S # respond	to the pro 6 18 to the pro	00000000000000000000000000000000000000	des enter 8. 20. E Cl des enter	METHY hemical Na red in i. 9 21 THYLEN hemical Na red in i.	L-2-PYRI ame 10 22 IE GLYC ame	11 23 OL	NE AII.
m. TURA Check "/ 1 13 n. TURA Check "/ 1	Chemic All" or the 2 14 Chemica All" or the 2	al 9 number: 3 15 al 9 number: 3	87 CA s that cor 4 16 16 16 CA s that cor 4	2504 S # respond 5 17 77211 S # respond 5	to the pro 6 18 to the pro 6	DCESS CO 7 19 DCESS CO 7		METHY hemical Na red in i. 9 21 THYLEN hemical Na red in i. 9	L-2-PYRI ame 10 22 IE GLYC ame 10	11 23 OL	NE AII.
m. TURA Check "/ 1 13 n. TURA Check "/ 1 13	Chemic: All" or the 2 14 Chemica All" or the 2 14	al number: 3 15 al number: 3 15	87 CA s that cor 4 16 s that cor 4 16	2504 S # respond 5 17 7211 S # respond 5 17 17	to the pro 6 18 to the pro 6 18	7.         19.         000000000000000000000000000000000000		METHY hemical Na red in i. 9 21 THYLEN hemical Na red in i. 9 21	L-2-PYRI ame 10 22 IE GLYC ame 10 22	11.         23.         OL         11.         23.	NE AII. ✓ 12. □ 24. □ AII. ✓ 12. □ 24. □



# Form S

2013 Reporting Year CLEAN HARBORS OF BR Facility Name 34839 DEP Facility ID Number 1-METHYL-2-PYRROLIDO Chemical Name

Chemical Use Facility-Wide and by Production Units

Section 1: Facility-Wide Use of Listed Chemical

#### Important:

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

8	7250	)4	
а	ΜΔ Γ	DEP CAS	t

b Chemical Name (Dioxin should be in

b. Chemical Name (Dioxin should be in grams, decimal points may be used)

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

0	83433
c. Manufactured	d. Processed
30674	0
e. Otherwise Used	f. Generated as Byproduct
0	0
g. Shipped In Or As Product	h. Production Ratio

#### **Section 2: Materials Balance**

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

0	0
a. Chemical Was Recycled On Site	b. Chemical Was Consumed Or Transformed
114107	0
c. Chemical Was Held In Inventory	d. Chemical Is a Compound
0	
e. Other	

f. Check yes if anything non-routine occured at your facility during the reporting year that affected the data reported, if there is not a materials balance, and/or if the Prod. Ratio is <0.2 or >10.

✓ Yes*	🗌 No	*If your answer is Yes, you may	explain in Section 4.m. on Page 3.
--------	------	---------------------------------	------------------------------------

#### Section 3: Chemicals Used in Waste Treatment Units

a. Is this chemical used to treat waste or control pollution?

🗌 Yes	No*	*If your answer is No.	, skip ahead to Section 4.
-------	-----	------------------------	----------------------------

b. Enter the amount of the chemical (in pounds) used to treat waste or control pollution.

Pounds		

c. Did the use of this chemical for waste treatment or pollution control increase or decrease by 10 percent or more compared with the previous reporting year?

c.1 Yes\* 🖌 No \*If your answer is Yes, you may explain in Section 4.m. on Page 3.

c.2 Yes 🖌 No	Are there more chemicals to report? to treat waste or control pollution).	(Use ONLY if ALL chemicals are used
--------------	---	-------------------------------------

	Ma Bu Ch	Assachusetts Department of Environmental Protection areau of Waste Prevention - Toxics Use Reduction Report <b>OXICS USE Report - Form S</b> memical Use Facility-Wide and by Production Units	2013 Reporting Year CLEAN HARBORS OF BR Facility Name 34839 DEP Facility ID Number 1-METHYL-2-PYRROLIDO Chemical Name		
	Se	ection 4: Toxics Use by Production Unit			
<b>003</b> a. Production Unit #	b.	Quantity of Chemical Code:			
Use		1. ≤ 5,000 lbs2. > 5,000 ≤ 10,000 lbs	3. > 10,000 lbs. ≤ 100,000 lbs.		
		✓ 4. > 100,000 lbs. ≤ 500,000 lbs. 5. > 500,000 lbs.			
	C.	Did the use of this chemical in this production unit increase or decreat compared with the previous reporting year and/or did you implement Yes No* *If your answer is No, skip ahead to g. below	se by 10 percent or more toxics use reduction? /.		
		Process code(s) where most significant changes occurred (up to three in descending order)       Type of Change (Enter "I" for Increase, "D" for Decrease)       Technique C (up to three per "D" for Decrease)         GG-03       I       2.       3a.         e.1.       2.       3a.         f1       2       3a.	ode(s) process code, enter in order of importance) 3b. 3c. 3b. 3c. 3b. 3c. 3b. 3c.		
Byproduct	g.	Was byproduct generated for this chemical less than 1 percent of use	e in this production unit? Page 3.		
	h.	Did the byproduct generated for this chemical in this production unit is percent or more compared with the previous reporting year and/or did reduction?         Yes       No*       *If your answer is No, skip ahead to m.         Process code(s) where most significant changes occurred (up to three in descending order)       Type of Change (Enter "I" for Increase, "D" for Decrease)       Technique C (up to three per "D" for Decrease)         i.1.       2.       3a.         i.1.       3a.       3a.	ncrease or decrease by 10 d you implement toxics use on Page 3. ode(s) process code, enter in order of importance) 3b. 3b. 3b. 3b. 3c. 3c. 3b. 3c. 3b. 3c. 3b. 3c. 3b. 3c. 3b. 3c. 3b. 3c. 3b. 3c. 3c. 3b. 3c. 3b. 3c. 3b. 3c. 3b. 3c. 3b. 3c. 3c. 3b. 3c. 3b. 3c. 3c. 3b. 3c. 3c. 3c. 3b. 3c. 3c. 3c. 3c. 3c. 3c. 3c. 3c		
	I.	k.1.       2.       3a.         Are there more production units that use this chemical?	3b. 3c. ⊇Yes ✔ No		



# **Toxics Use Report - Form S**

Chemical Use Facility-Wide and by Production Units



### Section 4: Toxics Use by Production Unit (continued)

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

THIS CHEMICAL WAS RECEIVED INTO OUR FACILITY FROM OUR CUSTOMERS. CLEAN HARBORS OF BRAINTREE REPACKAGED IT AND SENT THIS OFF TO CLEAN HARBORS RECYCLING SERVICES FOR RECYCLING.



Chemical Use Facility-Wide and by Production Units

Section 1: Facility-Wide Use of Listed Chemical

# Form S

2013 Reporting Year CLEAN HARBORS OF BR Facility Name 34839 DEP Facility ID Number LEAD Chemical Name



computer, use

to move your cursor - do not

use the return

kev.

only the tab key

7439921 a. MA DEP CAS # LEAD b. Chemical Name (Dioxin should be in grams, decimal points may be used)

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

0	0	
c. Manufactured	d. Processed	
86846	0	
e. Otherwise Used f. Generated as Byproduct		
0	3.02	
g. Shipped In Or As Product	h. Production Ratio	

#### **Section 2: Materials Balance**

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

0	0	
a. Chemical Was Recycled On Site	b.	Chemical Was Consumed Or Transformed
86846	0	
c. Chemical Was Held In Inventory	d.	Chemical Is a Compound
0		
e. Other		

f. Check yes if anything non-routine occured at your facility during the reporting year that affected the data reported, if there is not a materials balance, and/or if the Prod. Ratio is <0.2 or >10.

Yes*	V No	*If your answer is Yes, you may explain in Section 4.m. on Page 3.

#### Section 3: Chemicals Used in Waste Treatment Units

a. Is this chemical used to treat waste or control pollution?

🗌 Yes	No*	*If your answer is No.	, skip ahead to Section 4.
-------	-----	------------------------	----------------------------

b. Enter the amount of the chemical (in pounds) used to treat waste or control pollution.

Pounds	

c. Did the use of this chemical for waste treatment or pollution control increase or decrease by 10 percent or more compared with the previous reporting year?

c.1 Yes\* 🖌 No \*If your answer is Yes, you may explain in Section 4.m. on Page 3.

c.2 Yes 🖌 No	Are there more chemicals to report? to treat waste or control pollution).	(Use ONLY if ALL chemicals are used
--------------	---	-------------------------------------

	Ma Bu T Ch	Assachusetts Department of Environmental Protection of Waste Prevention - Toxics Use Reduction Formation <b>Oxics Use Report - Form</b> Demical Use Facility-Wide and by Production Units	ection Report I S	2013 Reporting Year CLEAN HARE Facility Name 34839 DEP Facility ID N LEAD Chemical Name	BORS OF BR
	Se	ction 4: Toxics Use by Production Unit			
002 a. Production Unit #	b.	Quantity of Chemical Code:			
Use		<ul> <li>✓ 1. ≤ 5,000 lbs.</li> <li>☑ 2. &gt; 5,000 ≤ 10,000</li> </ul>	lbs. 3	. > 10,000 lbs. ≤	100,000 lbs.
		4. > 100,000 lbs. ≤ 500,000 lbs5. > 500,000 lbs.			
	C.	Did the use of this chemical in this production unit increase of compared with the previous reporting year and/or did you important of the previous reporting year and/or did you important of the previous reporting year and/or did you important of the previous reporting year and/or did you important of the previous reporting year and/or did you important of the previous reporting year and/or did you important of the previous reporting year and/or did you important of the previous reporting year and/or did you important of the previous reporting year and/or did you important of the previous reporting year and/or did you important of the previous reporting year and/or did you important of the previous reportant of the previous reporting year and/or did you important of the previous reportant of the previous reporting year and/or did you important of the previous reportant of the previous repo	or decrease plement tox g. below.	by 10 percent c ics use reductio	n?
		Process code(s) where most significant changes occurred (up to three in descending order)Type of Change (Enter "I" for Increase, "D" for Decrease)Tech (up to to "D" for Decrease)d.1.2.3a.e.1.2.3a.f.1.2.3a.	nnique Code three per pro	e(s) cess code, enter in 3b. 3b. 3b. 3b.	order of importance) 3c. 3c. 3c. 3c. 3c. 3c.
Byproduct	g.	Was byproduct generated for this chemical less than 1 perce	ent of use in o m. on Pag	this production ge 3.	unit?
	h.	Did the byproduct generated for this chemical in this product percent or more compared with the previous reporting year a reduction?         Yes       No*         *If your answer is No, skip ahe         Process code(s) where most significant changes occurred (up to three in descending order)       Type of Change (Enter "I" for Increase, "D" for Decrease)       Tech (up to three in descending order)         i.1.       2.       3a.         j.1.       2.       3a.         k.1.       2.       3a.	ion unit incr ind/or did yo ead to m. or nnique Code o three per pro	rease or decrease ou implement to n Page 3. e(s) cess code, enter in 3b. 3b. 3b. 3b. 3b.	se by 10 xics use order of importance) 3c. 3c. 3c. 3c. 3c.
313.doc • rev. 1/07	I.	Are there more production units that use this chemical?		✓ Yes Form	No S • Page 2 of 3



# **Toxics Use Report - Form S**

Chemical Use Facility-Wide and by Production Units

2013 Reporting Year CLEAN HARBORS OF BR Facility Name 34839 DEP Facility ID Number LEAD Chemical Name

### Section 4: Toxics Use by Production Unit (continued)

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

"THE FACILITY OPERATES AS A TSDF. WASTE VOLUMES VARY FROM YEAR TO YEAR BASED ON OUR CUSTOMERS BUSINESS NEEDS, EMERGENCY RESPONSES TO SPILLS OR CLEANUP FROM NATURAL DISASTERS (FLOODS). JSRNA: THE FACILITY OPERATES AS A TSDF. WASTE VOLUMES VARY FROM YEAR TO YEAR BASED ON OUR CUSTOMERS BUSINESS NEEDS, EMERGENCY RESPONSES TO SPILLS OR CLEANUP FROM NATURAL DISASTERS (FLOODS).



Chemical Use Facility-Wide and by Production Units

Section 1: Facility-Wide Use of Listed Chemical

# Form S

2013 Reporting Year CLEAN HARBORS OF BR Facility Name 34839 DEP Facility ID Number POLYCHLORINATED BIPH Chemical Name

### to move your cursor - do not use the return key.

Important:

forms on the computer, use

When filling out

only the tab key

#### 1336363 a. MA DEP CAS #

**POLYCHLORINATED BIPHENYLS** b. Chemical Name (Dioxin should be in grams, decimal points may be used)

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

0	0	
c. Manufactured	d. Processed	
86846	0	
e. Otherwise Used	f. Generated as Byproduct	
0	3.02	
g. Shipped In Or As Product	h. Production Ratio	

#### **Section 2: Materials Balance**

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

0	0
a. Chemical Was Recycled On Site	b. Chemical Was Consumed Or Transformed
86846	0
c. Chemical Was Held In Inventory	d. Chemical Is a Compound
0	
e. Other	

f. Check yes if anything non-routine occured at your facility during the reporting year that affected the data reported, if there is not a materials balance, and/or if the Prod. Ratio is <0.2 or >10.

Yes*	V No	*If your answer is Yes, you may explain in Section 4.m. on Page 3.

#### Section 3: Chemicals Used in Waste Treatment Units

a. Is this chemical used to treat waste or control pollution?

🗌 Yes	No*	*If your answer is No.	, skip ahead to Section 4.
-------	-----	------------------------	----------------------------

b. Enter the amount of the chemical (in pounds) used to treat waste or control pollution.

Pounds	

c. Did the use of this chemical for waste treatment or pollution control increase or decrease by 10 percent or more compared with the previous reporting year?

c.1 Yes\* V No \*If your answer is Yes, you may explain in Section 4.m. on Page 3.

c.2 Yes 🖌 No	Are there more chemicals to report? to treat waste or control pollution).	(Use ONLY if ALL chemicals are used
--------------	---	-------------------------------------

	Ma Bu T Ch	<b>SSACHUSETTS Department</b> reau of Waste Prevention - <b>OXICS USE Re</b> emical Use Facility-Wide a	<b>of Environmental</b> Toxics Use Reduct <b>Eport - Fo</b> and by Production U	Protection tion Report orm S nits	2013 Reporting Year CLEAN HAR Facility Name 34839 DEP Facility ID N POLYCHLOF Chemical Name	BORS OF BR
	Se	ction 4: Toxics Use by Pr	roduction Unit			
002 a. Production Unit #	b.	Quantity of Chemical Code:				
Use		✓ 1. ≤ 5,000 lbs.	<b>2</b> . > 5,000 ≤ 1	0,000 lbs. 🔲 3	8. > 10,000 lbs.	≤ 100,000 lbs.
		4. > 100,000 lbs. ≤ 500,000	) lbs. 🔲 5. > 500,000 ll	bs.		
	C.	Did the use of this chemical in the compared with the previous rep	this production unit incre porting year and/or did y ir answer is No, skip ahe	ease or decrease ou implement to ead to g. below.	e by 10 percent xics use reducti	or more on?
		Process code(s) where most significant changes occurred (up to three in descending order) d.1.	Type of Change (Enter "I" for Increase, "D" for Decrease) 2.	Technique Cod (up to three per pro 3a.	le(s) ocess code, enter in 3b.	order of importance)
		e.1.	2.	3a.	3b.	3c.
		f.1.	2.	3a.	3b.	3c.
Byproduct	g. h.	Was byproduct generated for the pyproduct generated for the byproduct generated for percent or more compared with reduction?	his chemical less than 1 Ir answer is Yes, skip al or this chemical in this pr the previous reporting	percent of use in nead to m. on Pa roduction unit inc year and/or did y	n this production ge 3. crease or decrea ou implement to	n unit? ase by 10 oxics use
		Yes V No*	If your answer is No, sk	ip ahead to m. o	n Page 3.	
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique Cod (up to three per pro	le(s) ocess code, enter in	order of importance)
		i.1.	2.	3a.	3b.	3c.
		k.1.	2.	3a.	3b.	3c.
313.doc•rev 1/07	l.	Are there more production units	s that use this chemical'	?	Yes	No



**Toxics Use Report - Form S** 

Chemical Use Facility-Wide and by Production Units

2013 Reporting Year CLEAN HARBORS OF BR Facility Name 34839 DEP Facility ID Number POLYCHLORINATED BIPH Chemical Name

### Section 4: Toxics Use by Production Unit (continued)

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

THE FACILITY OPERATES AS A TSDF. WASTE VOLUMES VARY FROM YEAR TO YEAR BASED ON OUR CUSTOMERS BUSINESS NEEDS, EMERGENCY RESPONSES TO SPILLS OR CLEANUP FROM NATURAL DISASTERS (FLOODS). JSRNA: THE FACILITY OPERATES AS A TSDF. WASTE VOLUMES VARY FROM YEAR TO YEAR BASED ON OUR CUSTOMERS BUSINESS NEEDS, EMERGENCY RESPONSES TO SPILLS OR CLEANUP FROM NATURAL DISASTERS (FLOODS).



# Form S

34839 Chemical Use Facility-Wide and by Production Units

2013 Reporting Year **CLEAN HARBORS OF BR** Facility Name DEP Facility ID Number ETHYLENE GLYCOL **Chemical Name** 

#### Section 1: Facility-Wide Use of Listed Chemical

Important:

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

107211	
a. MA DEP CAS #	

ETHYLENE GLYCOL

b. Chemical Name (Dioxin should be in grams, decimal points may be used)

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

0	112749
c. Manufactured	d. Processed
245512	0
e. Otherwise Used	f. Generated as Byproduct
0	0
g. Shipped In Or As Product	h. Production Ratio

#### Section 2: Materials Balance

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

0		
a. Chemical Was Recycled On Site	Chemical Was Consumed Or Tra	nsformed
358261		
c. Chemical Was Held In Inventory	Chemical Is a Compound	
0		
e. Other		

f. Check yes if anything non-routine occured at your facility during the reporting year that affected the data reported, if there is not a materials balance, and/or if the Prod. Ratio is <0.2 or >10.

✓ Yes*	No No	*If your answer is Yes y	you may explain in Section 4 m on Page 3
100		ii your unower io reo, y	you may explain in occurrent. On rage of

#### Section 3: Chemicals Used in Waste Treatment Units

Is this chemical used to treat waste or control pollution? a.

	Yes	~	No*	*If your answer is No,	skip ahead to Section 4.
--	-----	---	-----	------------------------	--------------------------

Enter the amount of the chemical (in pounds) used to treat waste or control pollution. b.

Pounds		

c. Did the use of this chemical for waste treatment or pollution control increase or decrease by 10 percent or more compared with the previous reporting year?

c.1 [ \*If your answer is Yes, you may explain in Section 4.m. on Page 3. Yes\* V No

Are there more chemicals to report? (Use ONLY if ALL chemicals are used c.2 Yes V No to treat waste or control pollution).

	Ma Bu T Ch	reau of Waste Prevention OXICS USE R emical Use Facility-Wide a	t of Environmental - Toxics Use Reduc eport - Fo and by Production U	Protection etion Report orm S Inits	2013 Reporting Year CLEAN HARBORS OF BR Facility Name 34839 DEP Facility ID Number ETHYLENE GLYCOL Chemical Name
	Se	ction 4: Toxics Use by P	roduction Unit		
<b>3</b> a. Production Unit #	b.	Quantity of Chemical Code:			
Use		1. ≤ 5,000 lbs.	2. > 5,000 ≤ 1	10,000 lbs. 🔲 3	3. > 10,000 lbs. ≤ 100,000 lbs.
		✓ 4. > 100,000 lbs. ≤ 500,00	0 lbs. 🔲 5. > 500,000 l	bs.	
	C.	Did the use of this chemical in compared with the previous re	this production unit incr porting year and/or did y ur answer is No, skip ah	ease or decrease you implement to: lead to g. below.	e by 10 percent or more xics use reduction?
		Process code(s) where most significant changes occurred (up to three in descending order) GG-03 d.1. e.1. f.1.	Type of Change (Enter "I" for Increase, "D" for Decrease) [ 2. 2. 2. 2.	Technique Coo (up to three per pro <b>80</b> 3a. 3a. 3a. 3a.	de(s) ocess code, enter in order of importance) 3b. 3c. 3b. 3c. 3b. 3c. 3b. 3c. 3b. 3c.
Byproduct	g.	Was byproduct generated for Yes* No *If yo	this chemical less than <i>f</i> ur answer is Yes, skip a	1 percent of use in head to m. on Pa	n this production unit?
	h.	Did the byproduct generated f percent or more compared with reduction?	or this chemical in this p h the previous reporting *If your answer is No, sl	roduction unit inc year and/or did y kip ahead to m. o	crease or decrease by 10 you implement toxics use n Page 3.
	I.	Process code(s) where most significant changes occurred (up to three in descending order) i.1. j.1. k.1. Are there more production unit	Type of Change (Enter "I" for Increase, "D" for Decrease) 2. 2. 2. 2.	Technique Coc (up to three per pro- 3a. 3a. 3a. 3a.	de(s) cocess code, enter in order of importance) 3b. 3c. 3b. 3c. 3b. 3c. 3b. 3c. Wes No



# **Toxics Use Report - Form S**

Chemical Use Facility-Wide and by Production Units

2013 Reporting Year CLEAN HARBORS OF BR Facility Name 34839 DEP Facility ID Number ETHYLENE GLYCOL Chemical Name

### Section 4: Toxics Use by Production Unit (continued)

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

ETHYLENE GLYCOL IN REPORTING YEAR 2013 WAS RECEIVED FROM GENERATORS FROM OFF SITE AND BULKED UP AND SENT TO FCC ENVIRONMENTAL LLC IN ROCKVILLE VA. FOR RECYCLE.



**Toxics Use Fee Worksheet and Invoice** 

2013 Reporting Year CLEAN HARBORS OF B Facility Name 34839

DEP Facility ID Number

#### Important:

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



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

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

Use the following schedule to determine your fee for the **2013** reporting year.

# Full Time Employee Equivalents	Base Fee	Maximum Fee
≥ 10 and < 50 ≥ 50 and < 100 ≥ 100 and < 500 ≥ 500	\$1,850 \$2,775 \$4,625 \$9,250	\$5,550 \$7,400 \$14,800 \$31,450
f. Determine your base fee by referring to the 2nd	column above.	1850
g. Enter # of Form Ss you are filing that are not hig hazard chemicals:	h hazard or low	4
h. Enter # of Form Ss you are filing for high hazard	l chemicals:	0
i. Enter # of Form Ss you are filing for low hazard of	chemicals:	0
j. ADD LINES g and h and multiply the result by \$1	,100.	4400
k. Add LINES f and LINE j.		6250
I. Enter the amount from LINE i or from the 3rd col (Maximum Fee) WHICHEVER IS LESS	umn of the schedule	5550

Your fee is the amount entered in LINE I. Payment of the fee will be processed later in the eDEP filing process. If the Check option is selected, print this Worksheet as documentation and send a copy with your check to MassDEP PO Box 4062, Boston MA 02211. Payment is due by Sept. 1. If your payment is not received by Sept. 1, a second invoice including the \$1000 late fee mandated by MGL 211 will be sent.



Plan Summary	Submittal
Selection Form	

2013
Planning Year
<b>CLEAN HARBORS OF</b>
Facility Name
34839
DEP Facility ID Number

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

Select either 1, 2 (a-e), 3 (a-b) or 4 as allowed per 310 CMR 50.40, 50.80 and 50.90.

- 1 This facility is submitting an Environmental Management Systems Progress Report.
- 2 This facility is submitting a Resource Conservation Plan Summary Form(s) for the following asset(s):

#### SELECT 1 or MORE

- 2a 🗌 Energy
- 2b 🗌 Water
- 2c Materials that contribute to solid waste
- 2d 
  Toxic substances on the TURA list used below threshold amounts
- 2e Chemical substances exempt from TURA reporting
- 3 C This facility is submitting Toxics Use Reduction Plan Summary Form(s), or if all chemicals used and reported at the facility have either been eliminated or reduced below reporting thresholds, select 3a or 3b below:

#### SELECT 3a or 3b

- 3a I This facility has no exceptions to Toxics Use Reduction planning requirements.
- 3b This facility has eliminated or reduced below threshold the following chemicals indicate CAS# Chemical Name, Method, and Steps taken. (below)

#### **Toxics Use Reduction Plan Summary Exceptions:**

1	2	3	4
CAS#	Chemical Name	Method*	By taking the following steps:
		ER	
3b.a.1	3b.a.2		3b.a.4
		ER	
3b.b.1	3b.b.2		3b.b.4
		ER	
3b.c.1	3b.c.2		3b.c.4
		ER	
3b.d.1	3b.d.2		3b.d.4
		ER	
3b.e.1	3b.e.2		3b.e.4
		ER	
3b.f.1	3b.f.2		3b.f.4

3b.h Do you have additional chemicals to list? Yes ☐ No ✔ If filing on paper, please attach an additonal sheet to continue.

4 This facility is scheduled to close:

Date (mm/dd/yyyy)

I am aware that there are penalties for submitting false information, including possible fines.

a Signature of Senior Management Official	

DAVID CABRAL

c Print Name of Senior Management Official

7/1/2014 b Date (mm/dd/yyyy) CABRAL.DAVID@CLEANHARBORS.COM d E-Mail Address



Important: When filling out forms on the computer, use

# Massachusetts Department of Environmental Protection

Bureau of Waste Prevention – Toxics Use Reduction Report

# Plan Summary Form

2013 Planning Year **CLEAN HARBORS OF B** Facility Name 34839 MassDEP Facility ID Number

A separate form for each covered toxic is required.

only the tab key
to move your
cursor - do not
use the return
key.
tab

### A. Facility-Wide Data

LEAD
A.1 Chemical Name
7439921
A 2 CAS #

The two year projected changes should be reported as the difference between the amount projected to be reported year after next, and the amount reported on the Form S submitted with this Plan Summary. Report a negative number if a reduction is projected. Byproduct

Two Fear Projected Changes (Total ibs.).	

0

A.3 Use

Use

A.4 B

A.5 Is this chemical used only in wastewater treatment?

//

Yes – skip to Section C. No – go to Section B.

### **B.** Options Considered & Selected to Implement

**B.1 Options Considered This Year** 

NONE

B.2 Options Selected to Implement over the next Two Years

NONE

### C.Reason for not implementing option(s) selected in prior plan

You may also the following section to provide more information about your TUR Plans and/or progress. If you did NOT implement options previously selected for implementation, explain why.

NO OPTIONS FOR LEAD IDENTIFIED IN 2012 TUR PLAN



# Massachusetts Department of Environmental Protection

Bureau of Waste Prevention - Toxics Use Reduction Report

# **Plan Summary Form**

2013 Planning Year CLEAN HARBORS OF B Facility Name 34839 MassDEP Facility ID Number

A	separate	form	for	each	covered	toxic	is	required	

	Α.	Facility-Wide Data		
Important:		POLYCHLORINATED BIPHENYLS		
forms on the		A.1 Chemical Name		
computer. use		1336363		
only the tab key		A.2 CAS #		
cursor - do not	The t	wo year projected changes should be reported		Two Year Projected Changes (Total lbs.):
use the return	as the	e difference between the amount projected to		75311
	be re	ported year after next, and the amount reported	Use	A.3 Use
tab	Repo	rt a negative number if a reduction is projected.	Byproduct	0 A 4 Byproduct
return	A.5	Is this chemical used only in wastewa	ter treatment?	Yes – skip to Section C. No – go to Section B.

### **B.** Options Considered & Selected to Implement

B.1 Options Considered This Year

NONE.

B.2 Options Selected to Implement over the next Two Years

NONE.

### C.Reason for not implementing option(s) selected in prior plan

You may also the following section to provide more information about your TUR Plans and/or progress. If you did NOT implement options previously selected for implementation, explain why.

2012 OPTION: MINIMIZE STORM WATER INTRUSION INTO PCB STORAGE UNITS. TUR COMMITTEE AGREES THAT THIS OPTION SUCCESSFULLY IMPLEMENTED; EMPLOYEES DO GOOD JOB ELIMINATING STORM WATER INTRUSION INTO MIXTUB AND ROLLOFFS.



# Massachusetts Department of Environmental Protection

Bureau of Waste Prevention - Toxics Use Reduction Report

# **TUR Plan Summary**

2013 Planning Year

CLEAN HARBORS OF BR Facility Name

34839

DEP Facility ID Number

### A. Planner Certification

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

#### Important:

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



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

#### David P. Cabral, P.E., TURP, BCEE

1. Signature of Toxics Use Reduction Planner
7/1/2014

2. Date (mm/dd/yyyy)

DAVID P. CABRAL, P.E., TURP, BCEE

3. Print Name of Toxics Use Reduction Planner

CABRAL.DAVID@CLEANHARBORS.COM

4. E-Mail Address

X261660 5. TUR Planner I.D. Number

### **B. Management Certification**

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

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

#### David P. Cabral, P.E., TURP, BCEE

1. Signature of Senior Management Official

7/1/2014

2. Date (mm/dd/yyyy)

DAVID P. CABRAL, P.E., TURP, BCEE

3. Print Name of Senior Management Official

CABRAL.DAVID@CLEANHARBORS.COM

4. E-Mail Address



# Massachusetts Department of Environmental Protection

Bureau of Waste Prevention – Toxics Use Reduction Report

# **Plan Summary Form**

2013 Planning Year CLEAN HARBORS OF B Facility Name 34839 MassDEP Facility ID Number

Δ	sonarato	form	for each	covered	toxic is	horiupar
A	separale	101111	IUI Each	covereu	10/10/13	requireu.

	A	. Facility-Wide Data		
Important: When filling out forms on the computer, use only the tab key		ETHYLENE GLYCOL A.1 Chemical Name 107211 A.2 CAS #		
to move your cursor - do not use the return key.	The f as th be re on th Repo	wo year projected changes should be reported e difference between the amount projected to ported year after next, and the amount reported e Form S submitted with this Plan Summary. ort a negative number if a reduction is projected.	Use Byproduct	Two Year Projected Changes (Total Ibs.):
return	A.5	Is this chemical used only in wastewa	ter treatment?	Yes – skip to Section C. ✓ No – go to Section B.

### **B.** Options Considered & Selected to Implement

B.1 Options Considered This Year

NONE. ETHYLENE GLYCOL NOT REPORTED IN LAST YEAR'S FORM R OR FORM S.

B.2 Options Selected to Implement over the next Two Years

NONE. FACILITY IS A TSDF; SOURCE OF ETHYLENE GLYCOL IS CUSTOMER WASTE. DIFFICULT TO PREDICT FUTURE QUANTITIES OF WASTE RECEIVED.

### C.Reason for not implementing option(s) selected in prior plan

You may also the following section to provide more information about your TUR Plans and/or progress. If you did NOT implement options previously selected for implementation, explain why.

N/A; THIS IS A CHEMICAL NOT LISTED IN THE 2012 TUR PLAN.