

#### **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: **CLEANHARBORS** 

Transaction ID: 745852

Document: Toxics Use Reduction Act (TURA) Reporting

Size of File: 4799.56K

Status of Transaction: Submitted

Date and Time Created: 3/29/2023:2:27:12 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

2014	
Reporting	Year
CLEAN	HARBORS OF B
Facility Na	me
34839	

**DEP Facility ID Number** 

#### **Section 1: General Information**

#### Important:

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





h.

Facility Name and Address:

CLEAN HARBORS OF BRAINTREE INC		
a. Name		
1 HILL AVE		
b. Street Address		
BRAINTREE	MA	021840000
c. City	d. State	e. Zip Code
Are you making a trade secret claim for any in Form S(s)? Yes ☐ No ☑	formation submitted in th	iis COVER SHEET and/or
If YES, attach a statement substantiating the cl	aim. This copy is: Sanitiz	red Unsanitized Unsanitized
Are all chemicals only used to treat wastewater (if yes, then there are no production units assoc		
	02184CLNHR385	iQU
i. Taxpayer Identification Number	j. Toxics Release Inve	ntory (TRI) Identification Number
(Federal Employer Identification Number or FEIN)		

#### **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 S. Medina	6/1/2015
a. Authorized Signature	b. Date (MM/DD/YYYY)
DAVID	MEDINA
c. First Name (Print)	d. Last Name (Print)
COMPLIANCE MANAGER	medinad@cleanharbors.com
e. Position/Title	f. Email Address

frmscov.doc • 04/03 Form Name • Page 1 of 4



### Form S Cover Sheet

2014
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	## · ·	
•	CAS # of chemical not reportable (if applicable)  Chemical Name	
	a3. Explanation of why the chemical Is not reportable (check codes):	
a.4		
	CAS # of chemical substituted for TURA chemical Chemical Name	
_		
b.1		
	CAS # of chemical not reportable (if applicable)  Chemical Name	
_	b.3 Explanation of why the chemical Is not reportable (check codes):	
b.4		
	CAS # of chemical substituted for TURA chemical Chemical Name	
c.1		
	CAS # of chemical not reportable (if applicable)  Chemical Name	
_	c.3 Explanation of why the chemical Is not reportable (check codes):	
c.4		
	CAS # of chemical substituted for TURA chemical Chemical Name	
d.1		
	CAS # of chemical not reportable (if applicable)  Chemical Name	
	d.3 Explanation of why the chemical Is [1] [2] [3] [4] [5] [6] [7]	
ا 4 ام	not reportable (cneck codes):	
d.4	d.4d.5 d.5	
	ONO II OI ONOMICAI SUBSTITUTE OF TOTAL OF CHICINICAL MAINE	
e.1	e.1 e.2	
5.1	CAS # of chemical not reportable (if applicable)  Chemical Name	
	e.3 Explanation of why the chemical Is [1] [2] [3] [4] [5] [6] [7]	
	e.3 Explanation of why the chemical Is not reportable (check codes):	
e.4		
	CAS # of chemical substituted for TURA chemical Chemical Name	
f.	f. Do you have more chemicals not subject to reporting this year? Yes No 🗸	

FormScov\_309.doc • 02/10 Form Name • Page 2 of 4



### Form S Cover Sheet

2014
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

3	P	RODUCTION UNIT	must b	be given a new, unio	que nur	nber.		
a. Production Unit #	_b.	Describe the Proce	ss:					
Is this production unit IN USE for the reporting year of this submittal?	STO	DRAGE, HANDLIN	G AND	TRANSFER OF V	VASTE			
		Describe the Produ	ct:					
✓ Yes No	POI	JNDS OF WASTE	STORE	ĒD				
E	nter	up to four (4) six-dig	jit NAI	CS Codes that best	describ	e the Product from	this Pro	oduction Unit:
	563	2211	Г				]	
		NAICS Code	e	e. NAICS Code		f. NAICS Code	J	g. NAICS Code
<b>P</b> i.	<b>rodu</b> Er a	ction Process Ste	p Infor	rmation For This P s codes (listed in th an input, output or th	<b>Product</b> e repor	ting guidance) for e	ach pro	olume  weight cess step that involves properly make sure
			7		7		7	
	1.	GG-04 Process Code	2.	Process Code	<u>3</u> .	Process Code	<b>⊿</b> 4.	Process Code
	5.	Process Code	6.	Process Code	7.	Process Code	8.	Process Code
	9.	Process Code	10.	Process Code	<sub>11.</sub>	Process Code	12.	Process Code
	13.	Process Code	] <sub>14.</sub>	Process Code	<sup>⊥</sup> 15.	Process Code	<sup>⊥</sup> 16.	Process Code
	17.	Process Code	] <sub>18.</sub>	Process Code	<sup>⊥</sup> 19.	Process Code	<sup>⊥</sup> 20.	Process Code
	21.	Process Code	22.	Process Code	23.	Process Code	<u> </u>	Process Code



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

### **Form S Cover Sheet**

2014
Reporting Year
CLEAN HARBORS OF 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).

	re (i.e. bu	y i nein	w correst	วงกฉร เง	tne proce	ess code	entered i	n i.1).			
j. Produc	tion Unit	Number	. 3								
j. i roddo	don one	1 Tallibon	FIC	od. Unit #				- A D			
k. TURA	Chemica	al		<b>I39921</b> IS#				EAD emical Nar	me		
									110		_
Check "A	All" or the	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.
			_								
ı. TURA (	Chemica	ı		36363						ED BIPH	HENYLS
1. 10104	Criemica		CA	AS#			С	hemical Na	ime		
Check "A	All" or the	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.
872504							1.	METHY	-2-DVR	וחטו	NE
m. TURA	Chemic	al		<b>'2504</b> \S #				·METHYI hemical Na		ROLIDOI	NE
				S#	to the pro	ocess co	C	hemical Na		ROLIDOI	NE All.
Check "A	All" or the	number	CA s that cor	respond			des ente	hemical Na red in i.	ime		All.
			CA	S#	to the pr	ocess co	C	hemical Na		ROLIDOI	
Check "A	All" or the	number	CA s that cor	respond			des ente	hemical Na red in i.	ime		All.
Check "A	All" or the	number	S that cor	respond	6.	7.	des ente	nemical Na red in i. 9	10	11.	All. 🗸
1. 13. 13.	All" or the 2 14	3 15	S that cor	respond	6.	7.	des ente	ned in i.  9.   21.	10	11	All. 🗸
Check "A	All" or the 2 14	3 15	CA s that cor 4.	respond  5.   17.	6.	7.	des ente	ned in i.  9.   21.	10 22	11	All. 🗸
Check "A 1 13 n. TURA	All" or the  2.   14.   Chemica	e number 3 15	CA s that cor 4.	5	6	7 19	des ente	ned in i.  9  21  THYLEN hemical Na	10 22	11	All. 🗸
Check "A 1 13 n. TURA	All" or the  2.   14.   Chemica	e number 3 15	S that cor	5	6	7 19	des ente	ned in i.  9  21  THYLEN hemical Na	10 22	11	All. 🗸 12. 🗌 24. 📗
Check "A  1. 13. 13. 14  n. TURA  Check "A	All" or the  2.   14.   Chemica  All" or the	al number	s that cor  4.   16.   CA  TO  CA	5	6	7.	des enter	red in i.  9  21  THYLEN hemical Na red in i.	10 22  IE GLYC  ime	11.	All.   24.   All.    All.   All.   All.   All.   All.   All.   All.   All.   All.    All.   All.   All.   All.   All.   All.   All.    All.   All.   All.   All.   All.   All.   All.   All.   All.   All.   All.    All.   All.   All.   All.   All.   All.   All.   All.   All.    All.   All.   All.   All.   All.   All.   All.   All.   All.    All.    All.   All.   All.   All.    All.    All.    All.    All.    All.    All.    All.    All.    All.    All.    All.    All.    All.    All.    All.     All.    All.      All.      All.

FormScs\_310 Page 2 of 2



### **Form S Cover Sheet**

2014
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. Otherwise check the numbered boxes below that correspond to the process codes entered in i. above (i.e. box 1 below corresponds to the process code entered in i.1). Make sure this section is complete before proceeding.

the p	orocess o	ode ente			odes ente sure this		complet				3 10
j. Produc	tion Unit	Number:	<b>3</b>	od. Unit #							
				39976			М	ERCURY			
k. TURA	Chemica	al		S#				emical Na			
Check "A	All" or the	number	s that cor	respond	to the pro	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.
ı. TURA (	Chemica	l	CA	S#				nemical Na	ame		
Check "A	All" or the	number	s that cor	respond	to the pro	ocess co	des ente	ed 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.
TUDA	Chomio	ol.									
m. TURA	Chemic	al	CA	S#			CI	nemical Na	ame		
					to the pre	ocess co	Cl des enter		ame		All.
					to the pro	ocess co			ame	11.	All
Check "A	All" or the	number	s that cor	respond			des ente	red in i.		11 23	
Check "A	All" or the	numbers	s that cor	respond 5.	6.	7.	des enter	red in i.	10.		12.
1. 13. 13.	All" or the 2 14	3 15	s that cor	respond 5.	6.	7.	des enter	red in i.	10.		12.
Check "A	All" or the 2 14	3 15	4.	respond 5.	6.	7.	8 20	red in i.	10		12.
Check "A 1 13 n. TURA	All" or the  2.   14.   Chemica	3 15	s that cor 4.	5	6.	7.	8 20	9. 21. 21. nemical Na	10		12.
Check "A 1 13 n. TURA	All" or the  2.   14.   Chemica	3 15	s that cor 4.	5	6.	7.	8	9. 21. 21. nemical Na	10		12 24
Check "A  1.   13.   1.   TURA  Check "A	All" or the  2.   14.   Chemica  All" or the	3 15 al	s that cor  4.   16.   CA  S that cor	5. 17. 17. S#	6	7.	8. 20. Co	9. 21. 21. enemical Named in i.	10	23.	12.

FormScs\_311 Page 1 of 1



### Form S Cover Sheet

2014
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 and the product or service. In this section, please identify the PRODUCTION UNITS at the facility, then use the production unit number to report on chemical use in the Form S.

If there has been a substantial change in a PRODUCTION UNIT from the previous reporting year, the

2	PF	RODUCTION UNIT n	nust b	e given a new, uniq	ue nun	nber.		- · · · · · · · · · · · · · · · · · · ·	
a. Production Unit #	_b.	b. Describe the Process:							
Is this production unit IN USE for the reporting year of this submittal?	STA	ABILIZATION OF LE	AD						
✓ Yes No	C.	Describe the Produc	t:						
	DEC	CHARACTERIZED V	VAST	E.					
								-	
	Enter	up to four (4) six-digi	t NAIC	CS Codes that best of	describ	e the Product from t	his Pro	oduction Unit:	
	562	2211							
		NAICS Code	е	. NAICS Code		f. NAICS Code		g. NAICS Code	
	i. Er a	area dollar ction Process Step	hours Infor	mation For This Pr s codes (listed in the n input, output or the	ength roduct	N/A ☐ number ion Unit ting guidance) for ea	ch pro	cess step that involves	
	1.	GG-01	2.		3.		4		
	1.	Process Code	۷.	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

### **Form S Cover Sheet**

2014
Reporting Year
CLEAN HARBORS OF 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).

abov	e (i.e. bo	ox 1 belov	w corresp	onds to	the proce	ess code	entered i	n i.1).	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	00 0111010	<b>u</b>
j. Produc	tion Unit	Number:	2								
Prod. Unit # <b>7439921</b>					- 4 D						
k. TURA	Chemica	al		S#				EAD emical Nar	me		
			CA	.S #			Cii	emicai ivai	iie		_
Check "A	All" or the	number	s that cor	respond	to the pro	ocess co	des entei	ed 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.
. TUDA	Chomico	ı	13	36363			P	OLYCHL	ORINAT	TED BIPH	HENYLS
ı. TURA (	Snemica	l	CA	S #			CI	nemical Na	ame		
Check "A	All" or the	number	s that cor	respond	to the pro	ocess co	des entei	ed in i.			All. 🗸
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.
13.	14.	15.	16.	17.	18.	19.	20.	21.	22.	23.	24.
m. TURA	Chemic	al	CA	S #				nemical Na	me		
									inc		_
Check "A	All" or the	number	s that cor	respond	to the pro	ocess co	des entei	ed in i.			All.
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.
13.	14.	15.	16.	17.	18.	19.	20.	21.	22.	23.	24.
n. TURA	Chemica	al	CA	S #			CI	nemical Na	ame		
Check "All" or the numbers that correspond to the process codes entered in i.											
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 there more p. Have additional production units been Yes No added to this facility?											



Important: When filling out forms on the computer, use

only the tab key

to move your

use the return

f.

## Massachusetts Department of Environmental Protection Bureau of Waste Prevention – Toxics Use Reduction Report

### Form S

Chemical Use Facility-Wide and by Production Units

2014
Reporting Year
<b>CLEAN HARBORS OF BR</b>
Facility Name
34839
DEP Facility ID Number
1-METHYL-2-PYRROLIDO

**Chemical Name** 

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

эe	ction 1: Facility-vv	ide Ose of Listed Chemical
	872504	1-METHYL-2-PYRROLIDONE
	a. MA DEP CAS #	b. Chemical Name (Dioxin should be in grams, decimal points may be used)

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

0	25551
c. Manufactured	d. Processed
54590	0
e. Otherwise Used	f. Generated as Byproduct
0	0.7
g. Shipped In Or As Product	h. Production Ratio

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

c.2 Yes V No

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					
80141	0					
c. Chemical Was Held In Inventory	d. Chemical Is a Compound					
0						
e. Other						
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*	you may explain in Section 4.m. on Page 3.					

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

Se	ction 3: Chemicals Used in Waste Treatment Units
a.	Is this chemical used to treat waste or control pollution?
	Yes No* *If your answer is No, 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.

FormS\_319\_2009 • rev. 2/10 page 1 of 3

to treat waste or control pollution).



# **Toxics Use Report - Form S**

Chemical Use Facility-Wide and by Production Units

2014	
Reporting	Year
<b>CLEAN</b>	HARBORS OF BR
Facility Na	ame
34839	
DEP Facil	ity ID Number
1-METH	IYL-2-PYRROLIDO

**Chemical Name** 

#### **Section 4: Toxics Use by Production Unit**

	36	Clion 4. Toxics use by F	roduction onit			
<b>003</b> a. Production Unit #	b.	Quantity of Chemical Code:				
Use		1. ≤ 5,000 lbs.	2. > 5,000 ≤ <sup>2</sup>	10,000 lbs. 🔽	3. > 10,000 lbs.	≤ 100,000 lbs.
		4. > 100,000 lbs. ≤ 500,00	0 lbs. 5. > 500,000 l	lbs.		
	C.	Did the use of this chemical in compared with the previous re				
		✓ Yes  No* *If you	ur answer is No, skip ah	lead to g. below		
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique Co		n order of importance
		<b>GG-03</b> d.1.	<b>D</b> 2.	<b>80</b> 3a.	3b.	3c.
		u. i.	2.	Ja.	OD.	
		e.1.	2.	3a.	3b.	3c.
		f.1.	2.	3a.	3b.	3c.
Byproduct	g.	Was byproduct generated for □  Yes* ✓ No *If you	tnis cnemical less tnan f	•	·	n unit?
	h.	Did the byproduct generated for percent or more compared with reduction?				
		☐ Yes ✓ No*	*If your answer is No, sl	kip ahead to m.	on Page 3.	
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique Co		n order of importance)
		i.1.	2.	3a.	3b.	3c.
		j.1.	2.	3a.	3b.	3c.
		k.1.	2.	3a.	3b.	3c.
	I.	Are there more production unit	s that use this chemical	?	Yes	<b>✓</b> No



# **Toxics Use Report - Form S**

Chemical Use Facility-Wide and by Production Units

_	_		
7	n	1	
_	v	ш	4

Reporting Year

CLEAN HARBORS OF BR

Facility Name

34839

DEP Facility ID Number

1-METHYL-2-PYRROLIDO

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).

FROM YEAR TO YEAR BASED ON OUR CUSTOMER DISPOSAL NEEDS.
THOM TEAN TO TEAN BAGED ON GOT GOT OWEN DIGITORAL NEEDS.

314.doc • rev. 1/07 Form S • Page 3 of 3



When filling out forms on the computer, use

only the tab key

to move your cursor - do not

use the return

#### Massachusetts Department of Environmental Protection Bureau of Waste Prevention – Toxics Use Reduction Report

### Form S

Chemical Use Facility-Wide and by Production Units

2014
Reporting Year
<b>CLEAN HARBORS OF BR</b>
Facility Name
34839
DEP Facility ID Number
MERCURY
Chemical Name

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

conon in admity	That obt of Eloted Giletinear
7439976	MERCURY
a. MA DEP CAS #	b. Chemical Name (Dioxin should be in grams, decimal points may be used)

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

0	180
c. Manufactured	d. Processed
95.00	0
e. Otherwise Used	f. Generated as Byproduct
0	0
g. Shipped In Or As Product	h. Production Ratio

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

c.2 Yes ✓ No

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-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
275	0
c. Chemical Was Held In Inventory	d. Chemical Is a Compound
0	
e. Other	

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

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.
--	------	---	----	---	------------

Se	ction 3: Chemicals Used in Waste Treatment Units
a.	Is this chemical used to treat waste or control pollution?
	Yes No* *If your answer is No, 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.

FormS\_319\_2009 • rev. 2/10 page 1 of 3

to treat waste or control pollution).



# **Toxics Use Report - Form S**

Chemical Use Facility-Wide and by Production Units

2014
Reporting Year
CLEAN HARBORS OF BR
Facility Name
34839
DEP Facility ID Number
MERCURY
Chemical Name

	Se	ection 4: Toxics Use by P	roduction Unit			
<b>003</b> a. Production Unit #	b.	Quantity of Chemical Code:				
Use		✓ 1. ≤ 5,000 lbs.	2. > 5,000 ≤ °	10,000 lbs.	3. > 10,000 lbs.	≤ 100,000 lbs.
		4. > 100,000 lbs. ≤ 500,00	0 lbs. 5. > 500,000	lbs.		
	C.	Did the use of this chemical in compared with the previous re				
		☐Yes ✓ No* *If you	ur answer is No, skip ah	nead to g. below.		
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique Co		n order of importance
		d.1.	2.	3a.	3b.	3c.
		e.1.	2.	3a.	3b.	3c.
		f.1.	2.	3a.	3b.	3c.
Byproduct	g.	Was byproduct generated for t  ☐ Yes* ✓ No *If you	this chemical less than a	•	·	n unit?
	h.	Did the byproduct generated for percent or more compared with reduction?				
		☐ Yes ✓ No*	*If your answer is No, s	kip ahead to m. c	on Page 3.	
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique Co		order of importance
		i.1.	2.	3a.	3b.	3c.
		j.1.	2.	3a.	3b.	3c.
		k.1.	2.	3a.	3b.	3c.
				_		
	I.	Are there more production unit	s that use this chemical	<b> </b> ?	Yes	<b>✓</b> No



# **Toxics Use Report - Form S**

Chemical Use Facility-Wide and by Production Units

2014	
Reporting	Year
<b>CLEAN</b>	HARBORS OF BR
Facility Na	ame
34839	
DEP Facil	ity ID Number
MERCU	RY

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).

FROM YEAR TO YEAR BASED ON OUR CUSTOMER DISPOSAL NEEDS.	

314.doc • rev. 1/07 Form S • Page 3 of 3



### Form S

Chemical Use Facility-Wide and by Production Units

2014
Reporting Year
<b>CLEAN HARBORS OF BR</b>
Facility Name
34839
DEP Facility ID Number
LEAD
Chemical Name

Important:	
When filling	(

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





Section '	1:	<b>Facility</b>	/-Wide	Use	of	Listed	Chemical
-----------	----	-----------------	--------	-----	----	--------	----------

				Chemical Name
Se	ction 1: Facility-\	Nide Use of	f Listed Ch	nemical
	7439921	LEAD		
	a. MA DEP CAS #		Name (Dioxin sh	ould be in grams, decimal points may be used)
				ter the total amount (in POUNDS, except for dioxin)
				ed as byproduct' (item f.) means all waste containing
	refer to the reporting			transferred, treated, recycled or released. Please
	refer to the reporting	instructions b	erore comple	eurig this section.
	0		2093	
	c. Manufactured		d. Processed	1
	29413.5		0	
	e. Otherwise Used		f. Generated	as Byproduct
	0		0.38	
	g. Shipped In Or As Produ	uct	h. Production	Ratio
_				
Se	ction 2: Materials			
				tion 1 are added together, the sum will in many cases
				e-g will often form a "materials balance." If lines
				tion to explain why. Indicate all the unds on the appropriate line below (e.g., 4,000
	Chemical was held in		number of po	unds on the appropriate line below (e.g., 4,000
	0			0
	a. Chemical Was Recycle	d On Site		b. Chemical Was Consumed Or Transformed
	31506.5			0
	c. Chemical Was Held In I	nventory		d. Chemical Is a Compound
	0			
	e. Other			
f.				our facility during the reporting year that affected the e, and/or if the Prod. Ratio is <0.2 or >10.
	✓ Yes*   ☐ No	*If your an	swer is Yes,	you may explain in Section 4.m. on Page 3.
	-4: 0. Ob:	la lla a dia l	Masta Tus	-4
<b>5</b> e	ction 3: Chemica	is Usea in '	waste ire	atment Units
a.	Is this chemical use	d to treat wast	e or control p	ollution?
	☐Yes ☑ No*	*If your an	sewer ie No. s	skip ahead to Section 4.
		ii youi aii	iswei is ivo, s	nip arieau to dection 4.
b.	Enter the amount of	the chemical (	in pounds) us	sed to treat waste or control pollution.
~.				7
	Pounds			
_		hamiaal fara		t or nellution control increase or decrease by 10
C.	percent or more com			t or pollution control increase or decrease by 10 porting year?
	c.1 Yes* V	*If your an	swer is Yes,	you may explain in Section 4.m. on Page 3.
	c.2 Yes V		more chemic aste or contro	als to report? (Use ONLY if ALL chemicals are used l pollution).

FormS\_319\_2009 • rev. 2/10 page 1 of 3



# **Toxics Use Report - Form S**

Chemical Use Facility-Wide and by Production Units

2014
Reporting Year
<b>CLEAN HARBORS OF BR</b>
Facility Name
34839
DEP Facility ID Number
LEAD
Chemical Name

	Se	ction 4: Toxics Use by P	roduction Unit			
<b>002</b> a. Production Unit #	b.	Quantity of Chemical Code:				
Use		✓ 1. ≤ 5,000 lbs.	_ 2. > 5,000 ≤	10,000 lbs.	3. > 10,000 lbs.	≤ 100,000 lbs.
		4. > 100,000 lbs. ≤ 500,00	0 lbs. 5. > 500,000	lbs.		
	C.	Did the use of this chemical in compared with the previous re				
		✓ Yes  No* *If you	ur answer is No, skip ah	nead to g. below		
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique Co (up to three per p		n order of importance
		GG-03	D	80	Ol-	0
		d.1.	2.	3a.	3b.	3c.
		e.1.	2.	3a.	3b.	3c.
		f.1.	2.	3a.	3b.	3c.
Byproduct	g.	Was byproduct generated for to the Yes* ✓ No *If you	this chemical less than ur answer is Yes, skip a		-	on unit?
	h.	Did the byproduct generated for percent or more compared with reduction?				
		☐ Yes ✓ No*	*If your answer is No, s	kip ahead to m.	on Page 3.	
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique Co (up to three per p		n order of importance
				0-	Ol-	
		i.1.	2.	3a.	3b.	3c.
		j.1.	2.	3a.	3b.	3c.
		k.1.	2.	3a.	3b.	3c.
					_	
	l.	Are there more production unit	s that use this chemical	l?	<b>✓</b> Yes	No

313.doc • rev. 1/07 Form S • Page 2 of 3



## **Toxics Use Report - Form S**

Chemical Use Facility-Wide and by Production Units

2014	
Reporting	Year
CLEAN	HARBORS OF BR
Facility Na	ame
34839	
DEP Facili	ity 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).

FROM YEAR TO YEAR BASED ON OUR CUSTOMER DISPOSAL NEEDS.	RY

314.doc • rev. 1/07 Form S • Page 3 of 3



# **Toxics Use Report - Form S**

Chemical Use Facility-Wide and by Production Units

2014
Reporting Year
<b>CLEAN HARBORS OF BR</b>
Facility Name
34839
DEP Facility ID Number
LEAD
Chemical Name

#### **Section 4: Toxics Use by Production Unit**

<ul> <li>4. &gt; 100,000 lbs. ≤ 500,000 lbs.</li> <li>5. &gt; 500,000 lbs.</li> <li>Did the use of this chemical in this production unit increase or decrease by 10 compared with the previous reporting year and/or did you implement toxics use.</li> <li>Yes No* *If your answer is No, skip ahead to g. below.</li> <li>Process code(s) where most Type of Change Technique Code(s)</li> </ul>	
<ul> <li>4. &gt; 100,000 lbs. ≤ 500,000 lbs.</li> <li>5. &gt; 500,000 lbs.</li> <li></li></ul>	
c. Did the use of this chemical in this production unit increase or decrease by 10 compared with the previous reporting year and/or did you implement toxics use.  Yes No* *If your answer is No, skip ahead to g. below.  Process code(s) where most significant changes occurred (up to three in descending order)  GG-03  Technique Code(s) (up to three per process of the control of the	),000 lbs. ≤ 100,000 lbs.
compared with the previous reporting year and/or did you implement toxics use.  Yes No* *If your answer is No, skip ahead to g. below.  Process code(s) where most significant changes occurred (up to three in descending order)  GG-03  Technique Code(s) (up to three per process of the control	
Process code(s) where most significant changes occurred (up to three in descending order)  GG-03  Type of Change (Enter "I" for Increase, "D" for Decrease)  Technique Code(s) (up to three per process of the control o	
significant changes occurred (up to three in descending order)  (Enter "I" for Increase, "D" for Decrease)  (up to three per process of the per pr	
	ode, enter in order of importance
d.1. 2. 3a. 3b.	
	3c.
e.1. 2. 3a. 3b.	3c.
f.1. 2. 3a. 3b.	
f.1. 2. 3a. 3b. <b>Byproduct</b> g. Was byproduct generated for this chemical less than 1 percent of use in this	3c.
Byproduct g. Was byproduct generated for this chemical less than 1 percent of use in this  ☐ Yes* ✓ No *If your answer is Yes, skip ahead to m. on Page 3.	•
h. Did the byproduct generated for this chemical in this production unit increase percent or more compared with the previous reporting year and/or did you im reduction?	
☐ Yes ✓ No* *If your answer is No, skip ahead to m. on Pag	e 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 Code(s) (up to three per process of the control of the c	ode, enter in order of importance
i.1. 2. 3a. 3b.	3c.
	36.
j.1. 2. 3a. 3b.	3c.
k.1. 2. 3a. 3b.	3c.
Are there more production units that use this chemical?	Yes No



Important: When filling out forms on the computer, use

only the tab key

to move your cursor - do not

use the return

f.

## Massachusetts Department of Environmental Protection Bureau of Waste Prevention – Toxics Use Reduction Report

### Form S

Chemical Use Facility-Wide and by Production Units

00	4.4
20	14
	porting Year
CL	EAN HARBORS OF BR
Fac	cility Name
34	839
DE	P Facility ID Number
PC	DLYCHLORINATED BIPH

Chemical Name

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

colloir i. racility	ction 1.1 denity-viae ose of Elsted Offernical				
1336363	POLYCHLORINATED BIPHENYLS				
a. MA DEP CAS #	b Chemical Name (Dioxin should be in grams, decimal points may be used)				

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

0	51
c. Manufactured	d. Processed
43808.5	0
e. Otherwise Used	f. Generated as Byproduct
0	0.51
g. Shipped In Or As Product	h. Production Ratio

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

c.2 Yes 🔽 No

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				
43859.5	0				
c. Chemical Was Held In Inventory	d. Chemical Is a Compound				
0					
e. Other					
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*					
ction 3: Chemicals Used in Waste Trea	atment Units				

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

Se	ction 3: Chemicals Used in Waste Treatment Units
a.	Is this chemical used to treat waste or control pollution?
	Yes No* *If your answer is No, 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.

FormS\_319\_2009 • rev. 2/10 page 1 of 3

to treat waste or control pollution).



# **Toxics Use Report - Form S**

Chemical Use Facility-Wide and by Production Units

2014
Reporting Year
CLEAN HARBORS OF BR
Facility Name
34839
DEP Facility ID Number
POLYCHLORINATED BIPH

**Chemical Name** 

	Se	ction 4: Toxics Use by P	roduction Unit			_
<b>002</b> a. Production Unit #	b.	Quantity of Chemical Code:				
Use		<b>✓</b> 1. ≤ 5,000 lbs.	_ 2. > 5,000 ≤	10,000 lbs.	3. > 10,000 lbs.	≤ 100,000 lbs.
		4. > 100,000 lbs. ≤ 500,00	0 lbs. 5. > 500,000	lbs.		
	C.	Did the use of this chemical in compared with the previous re				
	Yes No* *If your answer is No, skip ahead to g. below.					
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique Co (up to three per p		n order of importance
		GG-03	D	80		
		d.1.	2.	3a.	3b.	3c.
		e.1.	2.	3a.	3b.	3c.
		f.1.	2.	3a.	3b.	3c.
	h.	Did the byproduct generated for percent or more compared with		production unit ir	ncrease or decre	
		reduction?				
		Yes V No*	*If your answer is No, s	kip ahead to m.	on Page 3.	
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique Co		n order of importance
		i.1.	2.	3a.	3b.	3c.
		j.1.	2.	3a.	3b.	3c.
		L 4	2.	20	2h	20
		k.1.	2.	3a.	3b.	3c.
	I.	Are there more production unit	s that use this chemica	l?	✓ Yes	☐ No



# **Toxics Use Report - Form S**

Chemical Use Facility-Wide and by Production Units

2	0	1	4

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).

HE FACILITY IS A TSDF AND WASTE STREAMS RECEIVED AT THE FACILITY WILL VARY ROM YEAR TO YEAR BASED ON OUR CUSTOMER DISPOSAL NEEDS.

314.doc • rev. 1/07 Form S • Page 3 of 3



# **Toxics Use Report - Form S**

Chemical Use Facility-Wide and by Production Units

2014	
Reporting	
CLEAN	HARBORS OF BR
Facility Na	ame
34839	
DEP Facil	ity ID Number
POLYC	HLORINATED BIPH

**Chemical Name** 

#### **Section 4: Toxics Use by Production Unit**

	36	Clion 4. Toxics use by F	roduction onit			
<b>003</b> a. Production Unit #	b.	Quantity of Chemical Code:				
Use		1. ≤ 5,000 lbs.	2. > 5,000 ≤ <sup>2</sup>	10,000 lbs. 🔽	3. > 10,000 lbs.	≤ 100,000 lbs.
		4. > 100,000 lbs. ≤ 500,00	0 lbs. 5. > 500,000 l	lbs.		
	C.	Did the use of this chemical in compared with the previous re				
	✓ Yes  No* *If your answer is No, skip ahead to g. below.					
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique Co		n order of importance
		<b>GG-03</b> d.1.	<b>D</b> 2.	<b>80</b> 3a.	3b.	3c.
		u. i.	2.	Ja.	OD.	
		e.1.	2.	3a.	3b.	3c.
		f.1.	2.	3a.	3b.	3c.
Byproduct	g.	Was byproduct generated for □  Yes* ✓ No *If you	tnis cnemical less tnan f	•	·	n unit?
	h. Did the byproduct generated for this chemical in this production unit increase or decreated percent or more compared with the previous reporting year and/or did you implement to reduction?					
		☐ Yes ✓ No*	*If your answer is No, sl	kip ahead to m.	on Page 3.	
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique Co		n order of importance)
		i.1.	2.	3a.	3b.	3c.
		j.1.	2.	3a.	3b.	3c.
		k.1.	2.	3a.	3b.	3c.
	I.	Are there more production unit	s that use this chemical	?	Yes	<b>✓</b> No



Important: When filling out forms on the computer, use

only the tab key

to move your cursor - do not

use the return

f.

#### Massachusetts Department of Environmental Protection Bureau of Waste Prevention – Toxics Use Reduction Report

### Form S

Chemical Use Facility-Wide and by Production Units

2014	
Reporting Year	
<b>CLEAN HARBORS OF BR</b>	2
Facility Name	
34839	
DEP Facility ID Number	
ETHYLENE GLYCOL	

**Chemical Name** 

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

<b>3</b> E	bection 1. I acmity-wide use of Listed Chemical				
	107211	ETHYLENE GLYCOL			
	a. MA DEP CAS #	b. Chemical Name (Dioxin should be in grams, decimal points may be used)			

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

0	334793.5		
c. Manufactured	d. Processed		
335799	0		
e. Otherwise Used	f. Generated as Byproduct		
0	1.87		
g. Shipped In Or As Product	h. Production Ratio		

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

c.2 ☐ Yes 🔽 No

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-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			
670592.5	0			
c. Chemical Was Held In Inventory	d. Chemical Is a Compound			
0				
e. Other				
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*	you may explain in Section 4.m. on Page 3.			

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

Se	ction 3: Chemicals Used in Waste Treatment Units
a.	Is this chemical used to treat waste or control pollution?
	Yes No* *If your answer is No, 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.

to treat waste or control pollution).



# **Toxics Use Report - Form S**

Chemical Use Facility-Wide and by Production Units

2014					
Reporting '	Year				
CLEAN HARBORS OF BR					
Facility Name					
34839					
DEP Facili	ty ID Number				
FTHYI F	NE GLYCOL				

**Chemical Name** 

#### **Section 4: Toxics Use by Production Unit**

	<u> </u>	ction 4. Toxics use by F	roduction ont			
3 a. Production Unit #	b.	Quantity of Chemical Code:				
Use		1. ≤ 5,000 lbs.	2. > 5,000 ≤ 1	10,000 lbs.	3. > 10,000 lbs.	≤ 100,000 lbs.
		✓ 4. > 100,000 lbs. ≤ 500,000 lbs.				
	C.	Did the use of this chemical in compared with the previous re				
		✓ Yes	ur answer is No, skip ah	ead to g. below.		
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique Coo		n order of importance
		<b>GG-03</b> d.1.	2.	<b>80</b> 3a.	3b.	3c.
		e.1.	2.	3a.	3b.	3c.
		f.1.	2.	3a.	3b.	3c.
Byproduct	g.	Was byproduct generated for to the Yes* ✓ No *If you	ur answer is Yes, skip a	•	·	ii uiit?
	h.	Did the byproduct generated for percent or more compared with reduction?				
		☐ Yes ✓ No*	*lf your answer is No, sl	kip ahead to m. c	on Page 3.	
		Process code(s) where most significant changes occurred (up to three in descending order)	Type of Change (Enter "I" for Increase, "D" for Decrease)	Technique Coc (up to three per pr		n order of importance)
		i.1.	2.	3a.	3b.	3c.
		j.1.	2.	3a.	3b.	3c.
		k.1.	2.	3a.	3b.	3c.
	1	Are there more production unit	s that use this chemical	?	Yes	✓ No
	٠	and the second second				



## **Toxics Use Report - Form S**

Chemical Use Facility-Wide and by Production Units

2014				
Reporting `	′ear			
CLEAN	HAF	RBOR	S OF	BR
Facility Na	ne			
34839				
DEP Facili	y ID	Numbe	er	
<b>ETHYLE</b>	NE	GLY	COL	

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 2014 WAS RECEIVED FROM GENERATORS FROM OFF-SITE WERE REPACKAGED AND SENT TO FCC ENVIRONMENTAL LLI IN ROCKVILLE VA. FOR RECYCLE. THE REMAINING ETHYLENE GLYCOL THAT WAS NOT RECYCLED WAS SENT FOR DISPOSAL.

314.doc • rev. 1/07 Form S • Page 3 of 3



#### Toxics Use Fee Worksheet and Invoice

2014	
Repor	ting Year
CLE	AN HARBORS OF B
Facility	y Name
3483	9

**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 BRAINTREE 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 **2014** 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 hi hazard chemicals:	5	
h. Enter # of Form Ss you are filing for high hazar	0	
i. Enter # of Form Ss you are filing for low hazard	0	
j. ADD LINES g and h and multiply the result by \$	5500	
k. Add LINES f and LINE j.	7350	
I. Enter the amount from LINE i or from the 3rd co (Maximum Fee) WHICHEVER IS LESS	olumn 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 21I will be sent.