

eDEP Transaction Copy

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Username: MICHAELC68

Transaction ID: 1210786

Document: AQ Source Registration Package (SR)

Size of File: 4471.73K

Status of Transaction: Submitted

Date and Time Created: 3/29/2023:2:40:20 PM

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YEAR OF RECORD

1190564

FACILTY AQ Identifier

Source Registration (SR) or SR and Greenhouse Gas (GHG) Overview

The "?" icons will reveal information about a particular portion of the form or question such as definitions, instructions, sources of assistance or information. Additional information about filling out these forms is available at the Source Registration and Greenhouse Gas Reporting Website: https://www.mass.gov/guides/massdep-source-registration

A. Create a Source Registration Package (SR) or SR and Greenhouse Gas(SR/GHG) Package.

 Select existing or r Existing Facility:Ch 	eck to create a complete package for reporting Check if you added emission units or stacks since your
year 2019	last report.
Date received (DEP	if you have never before submitted an AQ Source Registration Package (SR) or (SR/GHG). use only - mm/dd/yyyy) AQ Source Registration Package (SR) or SR and Greenhouse Package.
	need to correct or add to a previously submitted SR or SR/GHG Package 2019 ,check st below to select the forms/units you wish to work on.
	·
the boxes in the list	st below to select the forms/units you wish to work on.
the boxes in the list 2.Facility Name: Our records indicate	clean Harbors of Braintree Inc

	Emission unit name	DEP#	EU Category	Last Update
V	CLEAVER BROOKS BOILER (NO.2 FUEL OIL, 0.3S)	3	FUEL BURNING DEVICE	2018
V	CUMMINS GENERATOR #2 (NT855G2, DIESEL)	50	FUEL BURNING DEVICE	2018
V	CATERPILLAR GENERATOR #1	55	FUEL BURNING DEVICE	2018
V	2 LENNOX FURNACES SR 20Q5-140/154	64	FUEL BURNING DEVICE	2018
V	INDUSTRIAL OIL FURNACE LG14-225	67	FUEL BURNING DEVICE	2018
V	2 DRUM CRUSHING LINES	5	PROCESS	2018
V	AG TANK A3-9,800 GAL	8	TANK	2018
V	HURST, 2.091 MMBTU/HR, NO. 2 FUEL OIL-0.3 S	2	FUEL BURNING DEVICE	2018
V	AG TANK A6- 9,500 GAL WASTE STREAM A-31	11	TANK	2018
V	AG TANK A8 - 10,000 GAL TANK	13	TANK	2018
V	AG TANK A9- 10,000 GAL	14	TANK	2018
V	AG TANK A17B - 750 GAL	18	TANK	2018
V	AG TANK A22 (2,400 GAL)	23	TANK	2018
V	AG TANK A23 (2,400 GAL)	24	TANK	2018
V	AG TANK A24 (2,400 GAL)	25	TANK	2018
V	AG TANK A25 (1,000 GAL)	26	TANK	2018

Bureau of Air and Waste

Source Registration (SR) or SR and Greenhouse Gas (GHG) Overview

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	AG TANK A13 (4,000 GAL), DIESEL LOW SULF	51	TANK	2018
V	AG TANK A12 (6,300 GAL), NO. 2 FUEL OIL	52	TANK	2018
	AG TANK B1- POLYOLEFIN WASTEWATER NO VOCS	53	TANK	2018
	AG TANK B2- POLYOLEFIN TANK WASTEWATER NO VOCS	54	TANK	2018
V	AG TANK B4- POLYOLEFIN H WASTEWATER NO VOCS	57	TANK	2018
	AG TANK B7- POLYOLEFIN TANKS WASTEWATER NO VOCS	60	TANK	2018
	AG TANK A7 - 9,500 GAL.	68	TANK	2018
	STACK #2- HURST BOILER, NO. 2 FUEL OIL	2	STACK	2018
	1 STACK - BOILER #1-CLEAVER BROOKS, NO 2 FUEL OIL	3	STACK	2018
	2 DRUM CRUSHING LINES	5	STACK	2018
	1 STACK GENERATOR (2)- CUMMINS AND CATERPILLAR	7	STACK	2018
	1 STACK-2 FURNACES - LENNOX	9	STACK	2018
	CUT OFF ROOM	10	STACK	2018
V	STACK #1- INCINERATOR #1-VENT-O-MATIC	1	STACK	2018



Facility Information

Year of Record	
	rd
1190564	

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Δ	Facility	Intorm	ation:
<i>,</i>	. aciiity	🗸	MLI VIII

a. Facility Name			
1 HILL AVE			
b. Facility Street Address Line 1			
c. Facility Street Address Line 2			
BRAINTREE	MA		021840000
d. City/Town	e. State		f. ZIP Code
7813807100		7813807193	
g. Facility Phone Number		h. Facility Fax Nu	mber
Mailing address: (check all that apply)	same address	as facility address	
· · · · · · · · · · · · · · · · · · ·			
1 HILL AVE			
1 HILL AVE a. Facility Mailing Address / PO Box Line 1			
a. Facility Mailing Address / PO Box Line 1			
a. Facility Mailing Address / PO Box Line 1 b. Facility Mailing Address / PO Box Line 2			
a. Facility Mailing Address / PO Box Line 1 b. Facility Mailing Address / PO Box Line 2 BRAINTREE	MA		021840000
a. Facility Mailing Address / PO Box Line 1 b. Facility Mailing Address / PO Box Line 2 BRAINTREE	MA d. State		021840000 e. ZIP Code
a. Facility Mailing Address / PO Box Line 1 b. Facility Mailing Address / PO Box Line 2	•		
a. Facility Mailing Address / PO Box Line 1 b. Facility Mailing Address / PO Box Line 2 BRAINTREE c. City/Town	d. State		
a. Facility Mailing Address / PO Box Line 1 b. Facility Mailing Address / PO Box Line 2 BRAINTREE c. City/Town Facility type - check one:	d. State	Ĉ State	e. ZIP Code
a. Facility Mailing Address / PO Box Line 1 b. Facility Mailing Address / PO Box Line 2 BRAINTREE c. City/Town Facility type - check one:	d. State		e. ZIP Code
a. Facility Mailing Address / PO Box Line 1 b. Facility Mailing Address / PO Box Line 2 BRAINTREE c. City/Town Facility type - check one: C Utility Private C Triba ORIS Facility Code - for large electrical util	d. State		e. ZIP Code
a. Facility Mailing Address / PO Box Line 1 b. Facility Mailing Address / PO Box Line 2 BRAINTREE c. City/Town Facility type - check one: C Utility Private C Triba ORIS Facility Code - for large electrical util ID Numbers:	d. State I Federal ities only:	ORIS Facility Co	e. ZIP Code
a. Facility Mailing Address / PO Box Line 1 b. Facility Mailing Address / PO Box Line 2 BRAINTREE c. City/Town Facility type - check one: C Utility Private C Triba ORIS Facility Code - for large electrical util ID Numbers:	d. State I Federal ities only:	ORIS Facility Co	e. ZIP Code © Local Government de
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a. Facility Mailing Address / PO Box Line 1 b. Facility Mailing Address / PO Box Line 2 BRAINTREE c. City/Town Facility type - check one: C Utility Private C Triba ORIS Facility Code - for large electrical util ID Numbers:	d. State I Federal ities only:	ORIS Facility Co	e. ZIP Code © Local Government de
a. Facility Mailing Address / PO Box Line 1 b. Facility Mailing Address / PO Box Line 2 BRAINTREE c. City/Town Facility type - check one: C Utility Private Triba ORIS Facility Code - for large electrical util ID Numbers: 84839 b. DEP Account Number / FMF Facility #	d. State I Federal ities only:	ORIS Facility Co	e. ZIP Code © Local Government de

Facility Information

2019

Year of Record

1190564

	 	t this facility - update as needed):
CLEAN HARBORS OF BRAINTREE INC. IS A HAZARDOUS WASTI NO PRODUCTION AT THIS FACILITY.	ETSDF.	
. Facility's normal hours of operation:		
12:00 AM 12:00 AM	▼	✓ c. Continuous - 24 X 7 X 52
a. Start Time b. End Time		
d. Which days is the facility open?	Гм Гт	DW DT DF DS
0. Number of Employees: 16		
Facility Owner: same address as facilit	tv mailing address (will	I copy address into fields below)
Please contact your MassDEP Regional Office if the own	nership of this facility	has changed.
CLEAN HARBORS OF BRAINTREE INC		
a. Owner or Corporation Name		
1 HILL AVE		
b. Mailing Address Line 1 (for owner or corporation)		
ATTN: GENERAL MANAGER c. Mailing Address Line 2		
C. Mailing Address Line 2		
BRAINTREE	MA	021840000
d. City/Town	e. State	f. Zip Code
US ▼	042507498	
g. Country	h. Owner TIN	
	7134	7813807193
7813807100		

Facility Information

2019

Year of Record

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Facility contact information:	same	address as facility address	
	same	address as facility mailing address	
DAVID		MEDINA	
. Facility Contact First Name		Contact Last Nam	ne
HILL AVE			
. Mailing Address Line 1			
. Mailing Address Line 2			
BRAINTREE		MA	021840000
. City/Town		e. State	f. Zip Code
US .	_ In	nedinad@cleanharbors.com	
. Country	h.	E-mail Address	
803807100			7813807193
		j. Extension	k. Fax Number
Phone Number			
Phone Number S. Air emissions information contains	ct:	same name and address as facility	contact name and address
s. Air emissions information conta	ct:	same address as facility address	contact name and address
s. Air emissions information conta JAMES R.		same address as facility address	
JAMES R. a. Air emissions information conta	e	same address as facility address	
JAMES R. a. Air emissions information conta James R. b. Air emissions contact First Nam	e	same address as facility address	
JAMES R. a. Air emissions information conta	e	same address as facility address	
JAMES R. a. Air emissions information conta James R. b. Air emissions contact First Nam	e	same address as facility address	
JAMES R. a. Air emissions information conta a. Air emissions contact First Nam 26137 SOUTH RIDGELAND AVEN b. Mailing Address Line 1	e	same address as facility address LAUBSTED Air emissions conta	act Last Name
JAMES R. a. Air emissions information contains a. Air emissions contact First Nam 26137 SOUTH RIDGELAND AVEN b. Mailing Address Line 1	e	same address as facility address	
JAMES R. a. Air emissions information conta JAMES R. a. Air emissions contact First Nam 26137 SOUTH RIDGELAND AVEN b. Mailing Address Line 1 c. Mailing Address Line 2 MONEE	e UE	LAUBSTED Air emissions conta	act Last Name
JAMES R. a. Air emissions information contains JAMES R. a. Air emissions contact First Name 26137 SOUTH RIDGELAND AVEN b. Mailing Address Line 1 c. Mailing Address Line 2 MONEE d. City/Town	e UE	LAUBSTED Air emissions conta	act Last Name
JAMES R. a. Air emissions information conta JAMES R. a. Air emissions contact First Nam 26137 SOUTH RIDGELAND AVEN b. Mailing Address Line 1 c. Mailing Address Line 2 MONEE d. City/Town	e UE	LAUBSTED Air emissions conta	act Last Name

Facility Information

2019

Year of Record

1190564

Facility AQ identifier

B. Preparer

Contact information for the preparer of this submittal:	same name and	d address as air emissions contact name and address as facility contact name and address as facility address
MICHAEL	COMEAU	
a. Preparer First Name	Preparer Last Nan	ne
CLEAN HARBORS ENVIRONMENTAL SERVICES		
b. Mailing Address Line 1		
42 LONGWATER DRIVE		
c. Mailing Address Line 2		
NORWELL	MA	020610000
d. City/Town	e. State	f. Zip Code
US	comeau.michaeld	@cleanharbors.com
g. Country	h. E-mail Address	
7817925174		7817921030
i. Phone Number	j. Extension	k. Fax Number

Facility Information

2019

Year of Record

1190564

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D. Certification		
	Responsible official - complete all fields below.	
m familiar with the information contained in this report nd all attachments and that, based on my inquiry of those	Responsible official - complete all fields below. MICHAEL	
m familiar with the information contained in this report all attachments and that, based on my inquiry of those adividuals immediately responsible for obtaining the		
m familiar with the information contained in this report nd all attachments and that, based on my inquiry of those adviduals immediately responsible for obtaining the aformation; I believe that the information is true, accurate,	MICHAEL a. First Name	
m familiar with the information contained in this report and all attachments and that, based on my inquiry of those adviduals immediately responsible for obtaining the aformation; I believe that the information is true, accurate, and complete. I am aware that there are signification	MICHAEL a. First Name COMEAU	
m familiar with the information contained in this report and all attachments and that, based on my inquiry of those advividuals immediately responsible for obtaining the aformation; I believe that the information is true, accurate, and complete. I am aware that there are signification enalties for submitting false information, including	MICHAEL a. First Name	
In familiar with the information contained in this report and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information; I believe that the information is true, accurate, and complete. I am aware that there are signification renalties for submitting false information, including incossible fines and imprisonment."	MICHAEL a. First Name COMEAU b. Last Name	
m familiar with the information contained in this report and all attachments and that, based on my inquiry of those adviduals immediately responsible for obtaining the aformation; I believe that the information is true, accurate, and complete. I am aware that there are signification enalties for submitting false information, including ossible fines and imprisonment."	MICHAEL a. First Name COMEAU b. Last Name COMPLIANCE MANAGER	
m familiar with the information contained in this report and all attachments and that, based on my inquiry of those adividuals immediately responsible for obtaining the aformation; I believe that the information is true, accurate, and complete. I am aware that there are signification enalties for submitting false information, including ossible fines and imprisonment." The responsible official for the facility must provide the electronic signature. The signature and date are inserted.	MICHAEL a. First Name COMEAU b. Last Name	
m familiar with the information contained in this report and all attachments and that, based on my inquiry of those adviduals immediately responsible for obtaining the information; I believe that the information is true, accurate, and complete. I am aware that there are signification enalties for submitting false information, including ossible fines and imprisonment." The responsible official for the facility must provide the lectronic signature. The signature and date are inserted elow by eDEP during the signature Step.	MICHAEL a. First Name COMEAU b. Last Name COMPLIANCE MANAGER	
m familiar with the information contained in this report and all attachments and that, based on my inquiry of those dividuals immediately responsible for obtaining the formation; I believe that the information is true, accurate, and complete. I am aware that there are signification enalties for submitting false information, including possible fines and imprisonment." The responsible official for the facility must provide the ectronic signature. The signature and date are inserted allow by eDEP during the signature Step.	MICHAEL a. First Name COMEAU b. Last Name COMPLIANCE MANAGER c. Title	
m familiar with the information contained in this report and all attachments and that, based on my inquiry of those adividuals immediately responsible for obtaining the aformation; I believe that the information is true, accurate, and complete. I am aware that there are signification enalties for submitting false information, including cossible fines and imprisonment." The responsible official for the facility must provide the electronic signature. The signature and date are inserted the elow by eDEP during the signature Step.	MICHAEL a. First Name COMEAU b. Last Name COMPLIANCE MANAGER c. Title	
In familiar with the information contained in this report and all attachments and that, based on my inquiry of those adividuals immediately responsible for obtaining the aformation; I believe that the information is true, accurate, and complete. I am aware that there are signification enalties for submitting false information, including ossible fines and imprisonment." I responsible official for the facility must provide the electronic signature. The signature and date are inserted elow by eDEP during the signature Step. Signed under the pains and penalties of perjury:	MICHAEL a. First Name COMEAU b. Last Name COMPLIANCE MANAGER c. Title	
In familiar with the information contained in this report and all attachments and that, based on my inquiry of those dividuals immediately responsible for obtaining the formation; I believe that the information is true, accurate, and complete. I am aware that there are signification enalties for submitting false information, including possible fines and imprisonment." The responsible official for the facility must provide the ectronic signature. The signature and date are inserted allow by eDEP during the signature Step.	MICHAEL a. First Name COMEAU b. Last Name COMPLIANCE MANAGER c. Title 7817925174 d. Phone Number	
m familiar with the information contained in this report and all attachments and that, based on my inquiry of those adividuals immediately responsible for obtaining the afformation; I believe that the information is true, accurate, and complete. I am aware that there are signification enalties for submitting false information, including possible fines and imprisonment." The responsible official for the facility must provide the electronic signature. The signature and date are inserted allow by eDEP during the signature Step. Signed under the pains and penalties of perjury:	MICHAEL a. First Name COMEAU b. Last Name COMPLIANCE MANAGER c. Title 7817925174 d. Phone Number comeau.michaeld@cleanharbors.com	
decrify that I have personally examined the foregoing and m familiar with the information contained in this report and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information; I believe that the information is true, accurate, and complete. I am aware that there are signification invention in the information, including inventions and imprisonment." A responsible official for the facility must provide the electronic signature. The signature and date are inserted inventionally electronic signature and penalties of perjury: Signed under the pains and penalties of perjury: Signature of Responsible Official Date	MICHAEL a. First Name COMEAU b. Last Name COMPLIANCE MANAGER c. Title 7817925174 d. Phone Number comeau.michaeld@cleanharbors.com	

Facility Information

2019

Year of Record

1190564



TES - Transaction #1210786

Print

Exit



Massachusetts Department of Environmental Protection Bureau of Air and Waste

BWP AQ AP - TES

Total Emissions Statement & Hazardous Air Pollutant List

2019

YEAR OF RECORD

1190564

Facility AQ Identifier

A . Annual Total Emissions Statement

1. Facility Identifiers:

CLEAN HARBORS OF BRAINTREE INC

a. Facility Name

34839

1190564

b. DEP Account Number

c. Facility AQ Identifier

2. Total Emissions:

This form calculates your facility's actual and potential emissions by adding the emissions you entered in forms for each unit. The results are displayed in the table below. You must error check each emission unit's forms before the results below can be complete.

Pollutant:	PM 10-FIL	PM 2.5-FIL	PM-CON	SO2
Actual for previous	.0246	.0157		.2466
year:	Tons	Tons	Tons	Tons
Actual for year of	0.0415	0.0270	0	0.3982
record:	Tons	Tons	Tons	Tons
Potential emissions	9.4880	9.3526	0	11.9580
oteritiai erriissioris	Tons	Tons	Tons	Tons
Max allowed				
emissions-annual:	Tons	Tons	Tons	Tons
Max allowed				
emissions-short term:	Pounds	Pounds	Pounds	Pounds
Short term Period	<u> </u>	_		
Basis DEP Approval				
number or regulation:				

Pollutant:	РВ	voc	NH3	со
Actual for previous		.0171	0	.0986
year:	Tons	Tons	Tons	Tons
Actual for year of	0	0.0296	0	0.1642
record:	Tons	Tons	Tons	Tons
Potential emissions	0	22.8354	0	29.3023
T Otoritial Cirilodiono	Tons	Tons	Tons	Tons
Max allowed		36.2		
emissions-annual:	Tons	Tons	Tons	Tons
Max allowed		23600		
emissions-short term:	Pounds	Pounds	Pounds	Pounds
Short term Period		Month _		

Bureau of Air and Waste

BWP AQ AP - TES

Total Emissions Statement & Hazardous Air Pollutant List

2019

YEAR OF RECORD

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Facility AQ Identifier

Basis DEP Ap	pproval			MBR-95-RES-047					
number or rec	gulation:			WBR-95-RE5-047					
Polluta	ant:	NO2				нос	·		
Actual for pr	revious	.4676	_				_		
year:		Tons				Tons			
Actual for ye		0.7777				0	_		
record:		Tons				Tons			
		136.2320	_			0	_		
Potential em		Tons				Tons			
Max allowed	d	17.3	_				_		
emissions-a	nnual:	Tons				Tons			
Max allowed	d	9400	_				_		
emissions-s	hort	Pounds				Pounds			
term:									
Short term P	Period	Month							
Basis DEP A	Approval		_				7		
number or regulation:		MBR-95-RES-047							
-5									
3.If you hav	ve facilit	y-wide fuel, raw mater	ial, or	product restriction	ns, eit	ther by plan approval or re	egulation co	mp	lete the following for
each									
a. 🕞	XEMPT		12	5411		GALLONS		_1	voor 🔻
<u></u>		val # (most recent)	_	ount of Restriction	[Restriction Units		▼	year Per Unit Time
5.	ш аррго	vai ii (moot rooont)	7 411			Councilor Office			T CI OTHE THING
NO. 2 FUEL OIL 0.3 PERCENT SULFUR									
	Descripti	on of fuel, raw material o	r produ	ct restricted					
b. M	IDD 00 00	204.04		•		LIOLID		_1	
IVI	IBR-89-CO	val # (most recent)	30 Am	ount of Restriction		HOUR Postriction Units	<u></u>	▼	year <u>▼</u> Per Unit Time
Di	сг аррго	vai # (most recent)	AIII	ount of Restriction	r	Restriction Units			Per Offic Time
	NO. 2 FU	EL OIL 0.3 PERCENT SULI	FUR						
	Descripti	on of fuel, raw material o	r produ	ict restricted					
C.	4DD 00 0	700 400	07000		1 0		=1		
_	MBR-86-C		37668	nt of Restriction	-	ALLONS triction Units	<u>.</u>		ear <u>V</u>
	льт аррго	ovai # (illost recent)	Amour	it of restriction	Res	triction Units		rei	r Unit Time
	NO. 2 FU	JEL OIL 0.3 PERCENT SUI	FUR						
	Descrip	tion of fuel, raw material	or prod	uct restricted					
B. Hazardo	ous Air F	Pollutant Emissions							
a Daar #	for all the st	hove the material to	mit /DT	FF) 40 tama -f -:	ا - سام	lo liotod Hammedous Air D	Mutart (LIAS	210	
		nave the potential to e	IIII (P	i =) To tons of any	sing	le listed Hazardous Air Po	mutant (HAF	-)!	
C Yes C	/ NO								

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

Bureau of Air and Waste

BWP AQ AP - TES

Total Emissions Statement & Hazardous Air Pollutant List

2019

YEAR OF RECORD

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es the facility have a restriction on total HAPS? Yes No	
e you required to report HAP emissions here for any other reason? (e. Yes No	g., a permit condition)
azardous Air Pollutant List	
AP	
TOLUENE	108883
a. HAP Name	b. CAS # for individual HAPs
c. Check if this is your single largest HAP emission.	
.023	0.0
d. Actual for previous year	e. Actual for year of record
	18.6
12.8	g. Max allowed emissions –
f. Potential Emissions	annual(Tons)
5000	
h. Max allowed emissions – short term(Pounds)	i. Short term period
MBR-95-RES-047	
j. Basis DEP Approval number or regulation	
AP	
AP	
ETIM FNE OLVOOL	407244
a. HAP Name	b. CAS # for individual HAPs
	b. CAS # 101 Individual FIAF S
c. Check if this is your single largest HAP emission.	
.109	0.052
d. Actual for previous year	e. Actual for year of record
12.8	18.6
f. Potential Emissions	g. Max allowed emissions –
	annual(Tons)
5000	<u></u>
h. Max allowed emissions – short term(Pounds)	i. Short term period
MBR-95-RES-047	

Bureau of Air and Waste

BWP AQ AP - TES

Total Emissions Statement & Hazardous Air Pollutant List

2019

YEAR OF RECORD

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Facility AQ Identifier

Actual for previous year: Tons Actual for year of record: Tons Potential at max capacity uncontrolled: ns Max allowed emissions – annual: Tons Max allowed emissions – short term: unds Short term period: Basis for max allowed emissions: MBR-95-RES-047 DEP approval # or regulation	METHYL ALCOHOL		₹	67561
d. Actual for previous year 12.8 f. Potential Emissions f. Potential Emissions f. Potential Emissions f. Potential Emissions mBR-95-RES-047 j. Basis DEP Approval number or regulation 18.6 g. Max allowed emissions – annual(Tons) i. Short term period ii. Short term period 18.6 g. Max allowed emissions – annual(Tons) ii. Short term period 5014 HAP Emissions Actual for previous year: Tons Actual for year of record: Tons Potential at max capacity uncontrolled: as a short term: as a short term: as a short term: as a short term: as a short term below. Max allowed emissions – annual: Tons S5.8 Facility-wide restriction only Facility-wide restriction only Basis for max allowed emissions: MBR-95-RES-047 DEP approval # or regulation	a. HAP Name			b. CAS # for individual HAPs
d. Actual for previous year 12.8 f. Potential Emissions 5000 h. Max allowed emissions – short term(Pounds) MBR-95-RES-047 j. Basis DEP Approval number or regulation Total HAP Emissions . Actual for previous year: Tons . Actual for previous year: Tons . Actual for year of record: Tons . Potential at max capacity uncontrolled: ons . Max allowed emissions – annual: Tons . Max allowed emissions – annual: Tons 55.8 Facility-wide restriction only Facility-wide restriction only Short term period: Month	c. Check if this is your single	largest HAP emission.		
f. Potential Emissions f. Potential Emissions f. Potential Emissions f. Potential Emissions f. Max allowed emissions – annual(Tons) i. Short term period i. Short term period Total HAP Emissions Actual for previous year: Tons Actual for year of record: Tons Potential at max capacity uncontrolled: ons Max allowed emissions – annual: Tons 55.8 Facility-wide restriction only Facility-wide restriction only Short term period: Month Basis for max allowed emissions: MBR-95-RES-047 DEP approval # or regulation	.036			0.137
f. Potential Emissions f. Potential Emissions f. Potential Emissions f. Max allowed emissions – short term(Pounds) mbr. 95-RES-047 j. Basis DEP Approval number or regulation Total HAP Emissions Actual for previous year: Tons Actual for year of record: Tons Potential at max capacity uncontrolled: ons Max allowed emissions – annual: Tons Max allowed emissions – short term: 10600 Short term period: month Month DEP approval # or regulation otes and Attachments	d. Actual for previous year			e. Actual for year of record
annual(Tons) 5000 h. Max allowed emissions – short term(Pounds) MBR-95-RES-047 j. Basis DEP Approval number or regulation Total HAP Emissions Actual for previous year: Tons Actual for previous year: Tons Potential at max capacity uncontrolled: ons Max allowed emissions – annual: Tons Max allowed emissions – short term: 10600 Max allowed emissions – short term: 10600 Short term period: Month Basis for max allowed emissions: MBR-95-RES-047 DEP approval # or regulation	12.8			
h. Max allowed emissions – short term(Pounds) MBR-95-RES-047 j. Basis DEP Approval number or regulation Total HAP Emissions . Actual for previous year: Tons . Actual for year of record: Tons . Potential at max capacity uncontrolled: ons . Max allowed emissions – annual: Tons . Max allowed emissions – short term: 10600 . Max allowed emissions – short term: 10600 . Short term period: . Basis for max allowed emissions: MBR-95-RES-047 DEP approval # or regulation	f. Potential Emissions			
h. Max allowed emissions – short term(Pounds) MBR-95-RES-047 j. Basis DEP Approval number or regulation Total HAP Emissions . Actual for previous year: Tons . 168 . Actual for year of record: Tons . Potential at max capacity uncontrolled: 38.4 ons . Max allowed emissions – annual: Tons . Max allowed emissions – short term: 10600 Taxing the striction only Facility-wide restriction only Facility-wide restriction only Facility-wide restriction only Short term period: Month Basis for max allowed emissions: MBR-95-RES-047 DEP approval # or regulation	5000			allitual(10115)
MBR-95-RES-047 j. Basis DEP Approval number or regulation Total HAP Emissions Actual for previous year: Tons Actual for year of record: Tons Potential at max capacity uncontrolled: ons Max allowed emissions – annual: Tons Max allowed emissions – short term: 10600 Short term period: Month Basis for max allowed emissions: MBR-95-RES-047 DEP approval # or regulation		rt term(Pounds)		i Short term period
j. Basis DEP Approval number or regulation Total HAP Emissions Actual for previous year: Tons Actual for year of record: Tons Potential at max capacity uncontrolled: ons Max allowed emissions – annual: Tons Max allowed emissions – short term: 10600 Facility-wide restriction only facility-wide restriction only ounds Short term period: Month Mer.95-Res-047 DEP approval # or regulation otes and Attachments				i. Onore term period
Total HAP Emissions Actual for previous year: Tons Actual for year of record: Tons Potential at max capacity uncontrolled: ons Max allowed emissions – annual: Tons Max allowed emissions – short term: ounds Short term period: Basis for max allowed emissions: MBR-95-RES-047 DEP approval # or regulation	l.	r regulation		
Actual for previous year: Tons Actual for year of record: Tons Potential at max capacity uncontrolled: ons Max allowed emissions – annual: Tons Max allowed emissions – short term: ounds Short term period: Basis for max allowed emissions: MBR-95-RES-047 MBR-95-RES-047 MBR-95-RES-047 DEP approval # or regulation				
Actual for previous year: Tons Actual for year of record: Tons Potential at max capacity uncontrolled: ons Max allowed emissions – annual: Tons Max allowed emissions – short term: ounds Short term period: Basis for max allowed emissions: MBR-95-RES-047 MBR-95-RES-047 MBR-95-RES-047 DEP approval # or regulation				
Actual for year of record: Tons Potential at max capacity uncontrolled: Ons Max allowed emissions – annual: Tons Max allowed emissions – short term: Ounds Short term period: Basis for max allowed emissions: MBR-95-RES-047 DEP approval # or regulation otes and Attachments			ı	
. Potential at max capacity uncontrolled: ons . Max allowed emissions – annual: Tons . Max allowed emissions – short term: ounds Short term period: . Basis for max allowed emissions: MBR-95-RES-047 DEP approval # or regulation		.168		
Max allowed emissions – annual: Tons Max allowed emissions – short term: Ounds Month Month DEP approval # or regulation otes and Attachments				
. Max allowed emissions – short term : 10600 Facility-wide restriction only Short term period: . Basis for max allowed emissions: MBR-95-RES-047 DEP approval # or regulation otes and Attachments		38.4		
Short term period: Basis for max allowed emissions: MBR-95-RES-047 MBR-95-RES-047 MBR-95-RES-047 MBR-95-RES-047 MBR-95-RES-047 MBR-95-RES-047	. Max allowed emissions – annual: Tons	55.8	Facility-wide restric	ction only
Basis for max allowed emissions: MBR-95-RES-047 DEP approval # or regulation otes and Attachments		10600	Facility-wide restric	ction only
otes and Attachments	Short term period:	Month 💌		
	. Basis for max allowed emissions:	MBR-95-RES-047	DEP approval # or	regulation
		ow any additional informat	ion that will help DEP ur	derstand your submission.
		ow any additional informat	ion that will help DEP ur	derstand your submission.
		ow any additional informat	ion that will help DEP ur	derstand your submission.
		ow any additional informat	ion that will help DEP ur	derstand your submission.
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		ow any additional informat	ion that will help DEP ur	derstand your submission.
		ow any additional informat	ion that will help DEP ur	derstand your submission.

where you will attach electronic files to your submittal. For attachments that cannot be sent electronically, please list all such attachments in the notes

field above and deliver them to DEP with a paper copy of this form.

	Massachusetts Department of Environmental Protection Bureau of Air and Waste BWP AQ AP - TES Total Emissions Statement & Hazardous Air Pollutant List	YEAR OF RECORD 1190564 Facility AQ Identifier
[4]		



AP1 Sec A - Transaction #1210786

Exit



Massachusetts Department of Environmental Protection Bureau of Air and Waste

Fuel Burning Device Emission Unit

2019 Year of Record DEP EU# 1190564 Facility AQ Identifier

. Faciltity Identifiers:	
CLEAN HARBORS OF BRAINTREE INC	
a. Facility Name	
34839	1190564
b. DEP Account Number	c. Facility AQ Identifier
. Emission Unit Identifiers:	
COLUMBIA, 2.091 MMBTU/HR, NO. 2 FUEL OIL-0.3 S	
a. Facility's choice of emission unit name - edit as needed	
2	2
b. Facility's emission unit number / code - edit as needed	c. DEP emission unit #
d. ORIS ID # – for large electrical utilities only	e. Combined Units – enter number of individual units
. Emission unit installation and decommission dates:	
11/17/2018	
a.Installation Date - estimate if unknown (mm/dd/yyyy)	b. Decommission Date (mm/dd/yyyy) - if applicable
a.Installation Date - estimate if unknown (mm/dd/yyyy)	b. Decommission Date (mm/dd/yyyy) - if applicable Complete only if the unit was shut down permanently or replace since the last report.
	Complete only if the unit was shut down permanently or replace
	Complete only if the unit was shut down permanently or replace
. Emission Unit Replacement a. Is this unit, replacing another emission unit?	Complete only if the unit was shut down permanently or replace since the last report.
. Emission Unit Replacement	Complete only if the unit was shut down permanently or replace since the last report.
. Emission Unit Replacement a. Is this unit, replacing another emission unit? No C Yes - Enter DEP's emissions unit number and name f	Complete only if the unit was shut down permanently or replace since the last report. For the unit being replaced from the drop-down list below:
. Emission Unit Replacement a. Is this unit, replacing another emission unit?	Complete only if the unit was shut down permanently or replace since the last report. For the unit being replaced from the drop-down list below:
. Emission Unit Replacement a. Is this unit, replacing another emission unit? No C Yes - Enter DEP's emissions unit number and name for the second of the	Complete only if the unit was shut down permanently or replace since the last report. For the unit being replaced from the drop-down list below:
. Emission Unit Replacement a. Is this unit, replacing another emission unit? No C Yes - Enter DEP's emissions unit number and name for the properties of	Complete only if the unit was shut down permanently or replace since the last report. For the unit being replaced from the drop-down list below:
. Emission Unit Replacement a. Is this unit, replacing another emission unit? • No • Yes - Enter DEP's emissions unit number and name for the properties of the properties o	Complete only if the unit was shut down permanently or replace since the last report. For the unit being replaced from the drop-down list below:
. Emission Unit Replacement a. Is this unit, replacing another emission unit? No C Yes - Enter DEP's emissions unit number and name for the second of the	Complete only if the unit was shut down permanently or replace since the last report. For the unit being replaced from the drop-down list below: it name
. Emission Unit Replacement a. Is this unit, replacing another emission unit? No O Yes - Enter DEP's emissions unit number and name f b. DEP's Emission Unit Number and facility's emission unit Equipment a. Equipment Type	Complete only if the unit was shut down permanently or replace since the last report. For the unit being replaced from the drop-down list below: it name
. Emission Unit Replacement a. Is this unit, replacing another emission unit? • No • Yes - Enter DEP's emissions unit number and name for the properties of the properties o	Complete only if the unit was shut down permanently or replace since the last report. For the unit being replaced from the drop-down list below: it name
. Emission Unit Replacement a. Is this unit, replacing another emission unit? No Yes - Enter DEP's emissions unit number and name f b. DEP's Emission Unit Number and facility's emission unit Equipment a. Equipment Type EPA Unit type code BOILER If engine, is this an emergency generator?	Complete only if the unit was shut down permanently or replace since the last report. For the unit being replaced from the drop-down list below: BOILER BOILER

Massachusetts Department of Environmental Protection 2019 Bureau of Air and Waste Year of Record **Fuel Burning Device** 2 DEP EU# **Emission Unit** 1190564 Non Emergency Use(hours) Maintenance and Readiness Testing(hours) 4VT-50BHP COLUMBIA b. Manufacturer c. Model number 2.0910 d. Max Input Rating MMBtu/hr (must be greater than 0) e. Number of burners (enter "0" if not applicable) f. Types of burner - check one: rotary mech. atomizer steam atomizer air atomizer traveling grate C hand fired C Other Specify "other" burner type COLUMBIA 163970 g. Burner Manufacturer h. Burner Model number 11/17/2018 i.Burner Installation Date (mm/dd/yyyy) 6. DEP approvals - leave blank if not applicable: a. Most recent approval number b. DEP approval date (mm/dd/yyyy) 7. Is this unit exempt under 310 CMR 7.02 Plan Approvals? 8. If exempt from Plan Approval, indicate the reason for the exemption, from the drop-down list below. (e.g., cite a specific DEP regulation): below thresholds in 310 CMR 7.02 (2)(b) 7 and 15 9. Additional State Reporting Requirements: a. Are there other routine air quality reporting requirements for this emissions unit? Yes - Specify reporting frequency below No - Skip to question 9c b. Reporting frequency - check all that apply: **▼** RES Quarterly Semi-annual (include Operating Permit and Plan Approval reports, but not exceedance reporting) c. Is this unit subject to (check all that apply): ✓ NESHAP □ NSPS MACT 10. Hours of operation for the emission unit: a. check if continuously operated - 24 X 7 X 52 24 17

Massachusetts Department of Environmental Protection 2019 Bureau of Air and Waste Year of Record **Fuel Burning Device** 2 DEP EU# **Emission Unit** 1190564 b. Number of hours per day c. Number of days per week d. Number of weeks per year e. Percent of total annual operation that occurs in each calendar quarter(0 or 0.1 - 100): 28.0 0.0 0.0 72.0 Sum of Q1+Q2+Q3+Q4 must = 100% or 0 if the unit was not operated for any quarter Q1 Q2 Q4 Q3 11. Ozone season schedule - May 1 through September 30: a. Ozone season hours per day b. Ozone season days per week c. Weeks operated in ozone season 12. Emission Release Point - select one: Engines click here for instructions: Non-Stack Release Points: Physical Stacks: C fugitive vertical stack norizontal vent vertical with rain cap/sleeve C engine exhaust C downward facing vent vertical stack/vent less than 10ft 13. Link this unit to a physical stack (if applicable) - pick from the list below: 2 STACK #2- HURST BOILER, NO. 2 FUEL OIL Facility's stack identifier from STACK form - to change stack name use the STACK form If the stack for this unit is not listed, save and exit this form now and complete a new Stack form before returning to this form. 14. Is there an air pollution control device/s on this emissions unit? C Yes - answer a through i No - skip to question 15 Air pollution control device Click the button below to add a new control device **Add New control device** 15. Is there monitoring equipment on this emissions unit or its related control devices: Tes - answer a through I No - skip to section B **Monitor 1 Monitor 2 Monitor 3** CEMs CEMs CEMs a. Monitor type: Opacity Opacity Opacity C other C other C other Describe Describe Describe b. Manufacturer:

Facility's Designation

Facility's Designation

c. Model Number:

Facility's Designation

d. Monitor ID #:

Bureau of Air and Waste

Fuel Burning Device

Emission Unit

2019
Year of Record

2
DEP EU#

1190564

					1170301
(mm/dd/yyyy	')	(mm/dd/yyyy	/)	(mm/dd/yyy	y)
mm/dd/yyyy	<i>'</i>)	(mm/dd/yyy	/)	(mm/dd/yyy	y)
(mm/dd/yyyy	′)	(mm/dd/yyy)	/)	(mm/dd/yyy	y)
🧖 yes	© no	C yes	C no	C yes	© no
C yes	◯ no	C yes	◯ no	C yes	C no
🧖 yes	◯ no	C yes	C no	🧖 yes	C no
☐ PM 10		☐ PM 10		□ PM 10	
☐ PM 2.5		☐ PM 2.5		PM 2.5	
		-			
I Other		l_ Other		l Other	
	_▼			▼	▼
Describe Emica	siono	Describe		Describe	
	SIONS				
tics:		BOILE	R #2-COLUMBIA	#30 - #2 OIL-0.3 SU	ILFUR
		Fuel N	lame		
		1			
		DEP F	uel#		
box if you nee	d to add a fuel that you	did Delet	e this fuel: check	box if you stopped u	sing this fuel in this unit
will add a blan	k Sect. B form to your	permane	ntly. You must sti	Il report for this year	of record even if amount is
		"0" - the	fuel will be remove	ved from the unit in the	ne next report cycle.
de (SCC):		10200!	501		
, ,				: will not validate)	
	(mm/dd/yyyyy (mm/dd/yyyyy C yes C yes C yes C yes PM 10 PM 2.5 SO2 CO VOC NO2 NH3 Mercury CO2 H2S HCL Opacity Other Describe Emiss tics:	C yes C no C yes C no PM 10 PM 2.5 SO2 CO VOC NO2 NH3 Mercury Oxygen CO2 H2S HCL Opacity Other Describe Emissions tics:	(mm/dd/yyyy) (mm/dd/yyyy) (mm/dd/yyyy) (yes	(mm/dd/yyyy) (mm/dd/yyyy) (mm/dd/yyyy) (yes	(mm/dd/yyyy) (mm/dd/yyyy) (mm/dd/yyyy) (mm/dd/yyyy) C yes C no C yes C no C yes C yes C no C yes C no C yes C yes C no C yes C no C yes C yes C no C yes C no C yes C yes C no C yes C no C yes C yes C no C yes C no C yes C yes C no C yes C no C yes C yes C no C yes C no C yes C yes C no C yes C no C yes C yes C yes C no C yes C no C yes C

GRADES 1 AND 2 - BOILER

Bureau of Air and Waste

Fuel Burning Device

Emission Unit

2019
Year of Record
2
DEP EU#
1190564

	SCC Description - filled by eDEP upon error check.
b. Type of fuel	FUEL NO.2
	Fuel Description - filled by eDEP upon error check.
c. Sulfur content for oils and coal (0-2.2%):	.138
	Percent by weight
d. Ash content for oils and coal(0- 10.0%):	0
	Percent by weight
e. Maximum hourly fuel rate for all firing burners:(enter "0"if unit	0.0155 1000 GALLONS ▼
decommissioned prior to this year of record):	Amount Units per hour
f. Do you have fuel or usage restrictions?	⊙ yes ○ no - skip to question 2
g. DEP approval number for fuel restrictions:	EXEMPT
	Most recent for this fuel
h. Annual usage restriction (for this fuel):(amount or hours)	111252 GALLONS ▼
	Quantity Units
i. Short term use restriction (for this fuel):(amount or hours)	9271 GALLONS ▼
	Quantity Units
	Per G C C
	month week day hour
Total actual fuel used for year of record:	25.8000 1000 GALLONS ▼
(check your amount vs units and enter "0" if not used in the year	ar of a. Amount - year of record b. Units
record)	2.03 1000 GALLONS
	c. Total annual, usage for prior year of record

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

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

Pollutant:	PM10-FIL	PM25-FIL	PM-CON	□ SO2
Actual for previous	0.0010	0.0003		0.0199
year:	Tons	Tons	Tons	Tons
Actual for year of	0.0129	0.0032		0.2528
record:	Tons	Tons	Tons	Tons
Potential emissions	0.0679	0.0170		1.3304
Totoritial officienc	Tons	Tons	Tons	Tons
Emission Factor	1	0.25		142
in pounds per unit	1000 GALLONS	1000 GALLONS	<u> </u>	1000 GALLONS
Calculation Method	USEPA Emission Factor (🔽			
Max allowed				

Bureau of Air and Waste

Fuel Burning Device

Emission Unit

2019
Year of Record
2
DEP EU#
1190564

				,
emissions-annual:	Tons	Tons	Tons	Tons
Max allowed				
emissions-short term:	Pounds	Pounds	Pounds	Pounds
Short term Period				
Basis DEP Approval				
number or regulation:				
Pollutant:	□ PB	Voc	NH3	Γω
Actual for previous		0.0002		0.0051
year:	Tons	Tons	Tons	Tons
Actual for year of		0.0026		0.0645
record:	Tons	Tons	Tons	Tons
Potential emissions		0.0136		0.3395
T Otoritial Cirilodiono	Tons	Tons	Tons	Tons
Emission Factor		0.20		5
in pounds per unit	V	1000 GALLONS ▼	✓	1000 GALLONS
Calculation Method	USEPA Emission Factor (💌	USEPA Emission Factor (💌	USEPA Emission Factor (💌	USEPA Emission Factor (
Max allowed				
emissions-annual:	Tons	Tons	Tons	Tons
Max allowed				
emissions-short term:	Pounds	Pounds	Pounds	Pounds
Short term Period				
Basis DEP Approval				
number or regulation:				
Pollutant:	NO2	specify other pollutant		▼
Actual for previous	0.0244			
year:	Tons	Tons		
Actual for year of	0.3096			
record:	Tons	Tons		
Potential emissions	1.6294			
	Tons	Tons		
Emission Factor	24			
in pounds per unit	1000 GALLONS			
Calculation Method	USEPA Emission Factor (🔽	USEPA Emission Factor (🔻		
Max allowed				
emissions-annual:	Tons	Tons		
Max allowed				
emissions-short		17		
	Pounds	Pounds		
term:				
	Pounds	Pounds		

Bureau of Air and Waste Year of Record **Fuel Burning Device** 2 DEP EU# **Emission Unit** 1190564 number or regulation: 4. Ozone season emissions - May 1 through September 30 a. Typical day VOC emissions - pounds per day b. Typical day NOx emissions - pounds per day check to enter your own values check to enter your own values NOTE: The form will estimate the ozone season emissions for you. However, you may enter your own values by checking the boxes above. C. Notes and Attachments 1. Notes: please include any additional information that will help DEP understand your submission. 2. Attachments: Check here to submit attachments to this form (e.g., calculations) -add a note in the field above indicating what is attached. This will create a new step on your Transaction Overview Page where you will attach electronic files to your submittal. For attachments that cannot be sent electronically, please list all such attachments above and deliver them to DEP with a paper copy of this form.

Massachusetts Department of Environmental Protection

2019



AP1 Sec A - Transaction #1210786

Exit



Massachusetts Department of Environmental Protection Bureau of Air and Waste

Fuel Burning Device Emission Unit

2019	-
Year of Record	
3	
DEP EU#	
1190564	
Facility AQ Identifier	

CLEAN HARBORS OF BRAINTREE INC			
a. Facility Name			
34839	1190564		
b. DEP Account Number	c. Facility AQ Identifier		
2. Emission Unit Identifiers:			
CLEAVER BROOKS BOILER (NO.2 FUEL OIL, 0.3S)			
a. Facility's choice of emission unit name - edit as needed	1		
3	3		
b. Facility's emission unit number / code - edit as needed	c. DEP emission unit #		
d. ORIS ID # – for large electrical utilities only	e. Combined Units – enter number of individual units		
B. Emission unit installation and decommission dates:			
09/01/1986			
a.Installation Date - estimate if unknown (mm/dd/yyyy)	b. Decommission Date (mm/dd/yyyy) - if applicable		
	Complete only if the unit was shut down permanently or replace		
	since the last report.		
. Emission Unit Replacement			
Emission Unit Replacement a. Is this unit, replacing another emission unit?			
a. Is this unit, replacing another emission unit?	since the last report.		
·	since the last report.		
a. Is this unit, replacing another emission unit? No O Yes - Enter DEP's emissions unit number and name	since the last report. for the unit being replaced from the drop-down list below:		
a. Is this unit, replacing another emission unit?	since the last report. for the unit being replaced from the drop-down list below:		
a. Is this unit, replacing another emission unit? No O Yes - Enter DEP's emissions unit number and name	since the last report. for the unit being replaced from the drop-down list below:		
a. Is this unit, replacing another emission unit? No O Yes - Enter DEP's emissions unit number and name b. DEP's Emission Unit Number and facility's emission units. Equipment	since the last report. for the unit being replaced from the drop-down list below:		
 a. Is this unit, replacing another emission unit? No O Yes - Enter DEP's emissions unit number and name b. DEP's Emission Unit Number and facility's emission unit 	since the last report. for the unit being replaced from the drop-down list below:		
a. Is this unit, replacing another emission unit? No Yes - Enter DEP's emissions unit number and name b. DEP's Emission Unit Number and facility's emission unit. Equipment a. Equipment Type EPA Unit type code	for the unit being replaced from the drop-down list below: nit name		
a. Is this unit, replacing another emission unit? No O Yes - Enter DEP's emissions unit number and name b. DEP's Emission Unit Number and facility's emission units. Equipment a. Equipment Type	for the unit being replaced from the drop-down list below: nit name		
a. Is this unit, replacing another emission unit? No Yes - Enter DEP's emissions unit number and name b. DEP's Emission Unit Number and facility's emission unit. Equipment a. Equipment Type EPA Unit type code	for the unit being replaced from the drop-down list below: nit name		
a. Is this unit, replacing another emission unit? No O Yes - Enter DEP's emissions unit number and name b. DEP's Emission Unit Number and facility's emission units. Equipment a. Equipment Type EPA Unit type code BOILER If engine, is this an emergency generator?	for the unit being replaced from the drop-down list below: nit name BOILER		

Massachusetts Department of Environmental Protection 2019 Bureau of Air and Waste Year of Record **Fuel Burning Device** 3 DEP EU# **Emission Unit** 1190564 Non Emergency Use(hours) Maintenance and Readiness Testing(hours) CB800-150 **CLEAVER BROOKS** b. Manufacturer c. Model number 2.80 e. Number of burners (enter "0" if not applicable) d. Max Input Rating MMBtu/hr (must be greater than 0) f. Types of burner - check one: rotary mech. atomizer steam atomizer air atomizer traveling grate C hand fired C Other Specify "other" burner type **CL BROOKS** CB800-150-150 g. Burner Manufacturer h. Burner Model number 09/01/1986 i.Burner Installation Date (mm/dd/yyyy) 6. DEP approvals - leave blank if not applicable: MBR-86-COM-027 09/11/1986 a. Most recent approval number b. DEP approval date (mm/dd/yyyy) 7. Is this unit exempt under 310 CMR 7.02 Plan Approvals? C Yes O No 8. If exempt from Plan Approval, indicate the reason for the exemption, from the drop-down list below. (e.g., cite a specific DEP regulation): 9. Additional State Reporting Requirements: a. Are there other routine air quality reporting requirements for this emissions unit? Yes - Specify reporting frequency below No - Skip to question 9c b. Reporting frequency - check all that apply: **▼** RES Quarterly Semi-annual (include Operating Permit and Plan Approval reports, but not exceedance reporting) c. Is this unit subject to (check all that apply): ✓ NESHAP □ NSPS MACT 10. Hours of operation for the emission unit: a. check if continuously operated - 24 X 7 X 52 24 5 15

Massachusetts Department of Environmental Protection 2019 Bureau of Air and Waste Year of Record **Fuel Burning Device** 3 DEP EU# **Emission Unit** 1190564 b. Number of hours per day c. Number of days per week d. Number of weeks per year e. Percent of total annual operation that occurs in each calendar quarter(0 or 0.1 - 100): 62.0 33.0 0.0 5.0 Sum of Q1+Q2+Q3+Q4 must = 100% or 0 if the unit was not operated for any quarter Q1 Q2 Q4 Q3 11. Ozone season schedule - May 1 through September 30: a. Ozone season hours per day b. Ozone season days per week c. Weeks operated in ozone season 12. Emission Release Point - select one: Engines click here for instructions: Non-Stack Release Points: Physical Stacks: C fugitive vertical stack norizontal vent vertical with rain cap/sleeve cengine exhaust C downward facing vent vertical stack/vent less than 10ft 13. Link this unit to a physical stack (if applicable) - pick from the list below: 3 1 STACK - BOILER #1-CLEAVER BROOKS, NO 2 FUEL OIL Facility's stack identifier from STACK form - to change stack name use the STACK form If the stack for this unit is not listed, save and exit this form now and complete a new Stack form before returning to this form. 14. Is there an air pollution control device/s on this emissions unit? C Yes - answer a through i No - skip to question 15 Air pollution control device Click the button below to add a new control device **Add New control device** 15. Is there monitoring equipment on this emissions unit or its related control devices: Tes - answer a through I No - skip to section B **Monitor 1 Monitor 2 Monitor 3** CEMs CEMs CEMs a. Monitor type: Opacity Opacity Opacity C other C other C other Describe Describe Describe b. Manufacturer: c. Model Number:

Facility's Designation

Facility's Designation

d. Monitor ID #:

Facility's Designation

Bureau of Air and Waste

Fuel Burning Device

Emission Unit

Year of Record

3

DEP EU#

						1190564
e. Installation Date:	(mm/dd/yyyy)	(mm/dd/yyyy	<i>(</i>)	(mm/dd/yyyy	<i>(</i>)
f DED Approval #	(,	1		(
f. DEP Approval #:						
g. DEP Approval Date:						
	(mm/dd/yyyy)	(mm/dd/yyyy	')	(mm/dd/yyyy	/)
h. Decommission Date:						
	(mm/dd/yyyy)	(mm/dd/yyyy	/)	(mm/dd/yyyy	/)
i. Recorder?	Cyes	○ no	🧖 yes	C no	C yes	C no
j. Audible Alarm?	C yes	Ĉ no	C yes	C no	C yes	◯ no
k. Data System?	C yes	C no	C yes	C no	C yes	C no
I. Monitored Pollutants -	☐ PM 10		☐ PM 10		☐ PM 10	
check all that apply:	PM 2.5		PM 2.5		☐ PM 2.5	
	□ SO2		□ SO2		□ SO2	
	$\Gamma \infty$		$\Gamma \infty$		$\Gamma \infty$	
	□voc		□ voc		□voc	
	□ NO2		NO2		□ NO2	
	□ NH3		□ NH3		□ NH3	
	Mercury		Mercury		Mercury	
	Oxygen		Oxygen		Oxygen	
	CO2		CO2			
	□ H2S		H2S		□ H2S	
	□ HCL		□ HCL		□ HCL	
	Opacity					
			Opacity		Opacity	
	Other	1	Other		Other	-1
		_▼				
3. Fuels and	Describe Emiss	sions	Describe		Describe	
Fuel Name / Characterist	tics:		BOILER	R#1-CLEAVER BRO	OOKS #2 OIL-0.3 PEF	RCENT SULFU
			Fuel N	ame		
			1			
			DEP F	uel#		
Add a NEW fuel: Check the	box if you need	d to add a fuel that you	did Delet	e this fuel: check b	oox if you stopped us	sing this fuel in this unit
t report on previously (eDEP	will add a blant	k Sect. B form to your	permane	ntly. You must still	report for this year	of record even if amoun
ckage). mber of Additional Fuels :			"0" – the	fuel will be remove	ed from the unit in th	e next report cycle.
Source Classification Co	de (SCC):		102005	501		
	(/-			call DEP if SCC	will not validate)	
						DIAL DISTILLATE OF
			EXIER	MAL COMBOSTION	N DOILERS - INDUST	RIAL - DISTILLATE OIL :

GRADES 1 AND 2 - BOILER

Bureau of Air and Waste

Fuel Burning Device

Emission Unit

2019
Year of Record
3
DEP EU#
1190564

	SCC Description - filled by eDEP upon error check.
b. Type of fuel	FUEL NO.2
	Fuel Description - filled by eDEP upon error check.
c. Sulfur content for oils and coal (0-2.2%):	.138
	Percent by weight
d. Ash content for oils and coal(0- 10.0%):	0
	Percent by weight
e. Maximum hourly fuel rate for all firing burners:(enter "0"if unit	0.02 1000 GALLONS ▼
decommissioned prior to this year of record):	Amount Units per hour
f. Do you have fuel or usage restrictions?	⊙ yes
g. DEP approval number for fuel restrictions:	MBR-95-RES-047
	Most recent for this fuel
h. Annual usage restriction (for this fuel):(amount or hours)	376680 GALLONS
	Quantity Units
i. Short term use restriction (for this fuel):(amount or hours)	31390 GALLONS ▼
	Quantity Units
	Per G C C
	month week day hour
2. Total actual fuel used for year of record:	12.4000 1000 GALLONS
(check your amount vs units and enter "0" if not used in the year	r of a. Amount - year of record b. Units
record)	21.64 1000 GALLONS
	c. Total annual usage for prior year of record

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

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

Pollutant:	PM10-FIL	PM25-FIL	PM-CON	□ SO2
Actual for previous	0.0108	0.0027		0.2120
year:	Tons	Tons	Tons	Tons
Actual for year of	0.0062	0.0016		0.1215
record:	Tons	Tons	Tons	Tons
Potential emissions	0.0876	0.0219		1.7166
1 Oteritial erriissions	Tons	Tons	Tons	Tons
Emission Factor	1	0.25		142
in pounds per unit	1000 GALLONS ▼	1000 GALLONS	<u> </u>	1000 GALLONS
Calculation Method	USEPA Emission Factor (🔽			
Max allowed				

Bureau of Air and Waste

Fuel Burning Device

Emission Unit

2019
Year of Record
3
DEP EU#
1190564

						,
emissions-annual:	Tons	-	Tons	Tons		Tons
Max allowed						
emissions-short term:	Pounds	I	Pounds	Pounds		Pounds
Short term Period	•		_			
Basis DEP Approval						
number or regulation:						
Pollutant:	□ PB		□voc	□ NH3		Γω
Actual for previous			0.0022			0.0541
year:	Tons		Tons	Tons		Tons
Actual for year of			0.0012			0.0310
record:	Tons		Tons	Tons		Tons
Potential emissions			0.0175			0.4380
oteritial errissions	Tons	-	Tons	Tons		Tons
Emission Factor			0.20			5
in pounds per unit		▼]	1000 GALLONS ▼		▼	1000 GALLONS
Calculation Method	USEPA Emission Factor (-]	USEPA Emission Factor (💌	USEPA Emission Factor (▼	USEPA Emission Factor (
Max allowed						
emissions-annual:	Tons		Tons	Tons		Tons
Max allowed						
emissions-short term:	Pounds	ļ	Pounds	Pounds		Pounds
Short term Period	▼		✓	✓		▼
Basis DEP Approval						
number or regulation:						
Pollutant:	NO2		specify other pollutant			V
Actual for previous	0.2597					
year:	Tons		Tons			
Actual for year of	0.1488					
record:	Tons		Tons			
Potential emissions	2.1024					
1 Storitar Simodistro	Tons		Tons			
Emission Factor	24					
in pounds per unit	1000 GALLONS	<u>-</u>]				
Calculation Method		_1	USEPA Emission Factor (🔻			
	USEPA Emission Factor (OSEI A EITIISSIOTTI actor (
Max allowed	USEPA Emission Factor (OSEI A EIIISSIOIT ACIOI (
Max allowed emissions-annual:	USEPA Emission Factor (Tons			
emissions-annual:						
emissions-annual: Max allowed emissions-short						
emissions-annual: Max allowed emissions-short term:	Tons		Tons			
emissions-annual: Max allowed emissions-short	Tons		Tons			

Bureau of Air and Waste Year of Record **Fuel Burning Device** 3 DEP EU# **Emission Unit** 1190564 number or regulation: 4. Ozone season emissions - May 1 through September 30 a. Typical day VOC emissions - pounds per day b. Typical day NOx emissions - pounds per day check to enter your own values check to enter your own values NOTE: The form will estimate the ozone season emissions for you. However, you may enter your own values by checking the boxes above. C. Notes and Attachments 1. Notes: please include any additional information that will help DEP understand your submission. 2. Attachments: Check here to submit attachments to this form (e.g., calculations) -add a note in the field above indicating what is attached. This will create a new step on your Transaction Overview Page where you will attach electronic files to your submittal. For attachments that cannot be sent electronically, please list all such attachments above and deliver them to DEP with a paper copy of this form.

Massachusetts Department of Environmental Protection

2019



AP1 Sec A - Transaction #1210786

Exit



Massachusetts Department of Environmental Protection Bureau of Air and Waste

Fuel Burning Device Emission Unit

2019
Year of Record
50
DEP EU#
1190564
Facility AQ Identifier

Equipment Description

CLEAN HARBORS OF BRAINTREE INC			
a. Facility Name			
	14400004		
b. DEP Account Number	c. Facility AQ Identifier		
	C. I admity Active miller		
2. Emission Unit Identifiers:			
CUMMINS GENERATOR #2 (NT855G2, DIESEL)			
a. Facility's choice of emission unit name - edit as needed	i		
50	50		
b. Facility's emission unit number / code - edit as needed	c. DEP emission unit #		
d. ORIS ID # – for large electrical utilities only	e. Combined Units – enter number of individual units		
3. Emission unit installation and decommission dates:			
08/01/1999			
a.Installation Date - estimate if unknown (mm/dd/yyyy)	b. Decommission Date (mm/dd/yyyy) - if applicable		
	Complete only if the unit was shut down permanently or replac		
	since the last report.		
4. Emission Unit Replacement	since the last report.		
	since the last report.		
a. Is this unit, replacing another emission unit?			
a. Is this unit, replacing another emission unit?			
a. Is this unit, replacing another emission unit?	for the unit being replaced from the drop-down list below:		
a. Is this unit, replacing another emission unit? No C Yes - Enter DEP's emissions unit number and name b. DEP's Emission Unit Number and facility's emission unit	for the unit being replaced from the drop-down list below:		
a. Is this unit, replacing another emission unit? No OYes - Enter DEP's emissions unit number and name b. DEP's Emission Unit Number and facility's emission ur Equipment	for the unit being replaced from the drop-down list below:		
a. Is this unit, replacing another emission unit? No O Yes - Enter DEP's emissions unit number and name b. DEP's Emission Unit Number and facility's emission ur Equipment a. Equipment Type	for the unit being replaced from the drop-down list below: nit name		
a. Is this unit, replacing another emission unit? No C Yes - Enter DEP's emissions unit number and name b. DEP's Emission Unit Number and facility's emission ur Equipment	for the unit being replaced from the drop-down list below:		
a. Is this unit, replacing another emission unit? No O Yes - Enter DEP's emissions unit number and name b. DEP's Emission Unit Number and facility's emission ur Equipment a. Equipment Type	for the unit being replaced from the drop-down list below: nit name		
a. Is this unit, replacing another emission unit? No Yes - Enter DEP's emissions unit number and name b. DEP's Emission Unit Number and facility's emission ur Equipment a. Equipment Type EPA Unit type code	for the unit being replaced from the drop-down list below: nit name		
a. Is this unit, replacing another emission unit? O No O Yes - Enter DEP's emissions unit number and name b. DEP's Emission Unit Number and facility's emission units. Equipment a. Equipment Type EPA Unit type code ENGINE If engine, is this an emergency generator?	for the unit being replaced from the drop-down list below: nit name RECIPROCATING IC ENGINE		

Massachusetts Department of Environmental Protection 2019 Bureau of Air and Waste Year of Record **Fuel Burning Device** 50 DEP EU# **Emission Unit** 1190564 Non Emergency Use(hours) Maintenance and Readiness Testing(hours) **CUMMINS** 125-DGEA b. Manufacturer c. Model number 1.6880 d. Max Input Rating MMBtu/hr (must be greater than 0) e. Number of burners (enter "0" if not applicable) f. Types of burner - check one: rotary mech. atomizer steam atomizer air atomizer traveling grate C hand fired C Other Specify "other" burner type g. Burner Manufacturer h. Burner Model number i.Burner Installation Date (mm/dd/yyyy) 6. DEP approvals - leave blank if not applicable: 05/04/1989 a. Most recent approval number b. DEP approval date (mm/dd/yyyy) 7. Is this unit exempt under 310 CMR 7.02 Plan Approvals? 8. If exempt from Plan Approval, indicate the reason for the exemption, from the drop-down list below. (e.g., cite a specific DEP regulation): below thresholds in 310 CMR 7.02 (2)(b) 7 and 15 9. Additional State Reporting Requirements: a. Are there other routine air quality reporting requirements for this emissions unit? No - Skip to question 9c Yes - Specify reporting frequency below b. Reporting frequency - check all that apply: RES Quarterly Semi-annual (include Operating Permit and Plan Approval reports, but not exceedance reporting) c. Is this unit subject to (check all that apply): □ NESHAP □ NSPS MACT 10. Hours of operation for the emission unit: a. check if continuously operated - 24 X 7 X 52

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Massachusetts Department of Environmental Protection 2019 Bureau of Air and Waste Year of Record **Fuel Burning Device** 50 DEP EU# **Emission Unit** 1190564 b. Number of hours per day c. Number of days per week d. Number of weeks per year e. Percent of total annual operation that occurs in each calendar quarter(0 or 0.1 - 100): 9.0 55.0 27.0 9.0 Sum of Q1+Q2+Q3+Q4 must = 100% or 0 if the unit was not operated for any quarter Q1 Q2 Q4 Q3 11. Ozone season schedule - May 1 through September 30: a. Ozone season hours per day b. Ozone season days per week c. Weeks operated in ozone season 12. Emission Release Point - select one: Engines click here for instructions: Non-Stack Release Points: Physical Stacks: C fugitive vertical stack norizontal vent vertical with rain cap/sleeve cengine exhaust C downward facing vent vertical stack/vent less than 10ft 13. Link this unit to a physical stack (if applicable) - pick from the list below: 7 1 STACK GENERATOR (2)- CUMMINS AND CATERPILLAR Facility's stack identifier from STACK form - to change stack name use the STACK form If the stack for this unit is not listed, save and exit this form now and complete a new Stack form before returning to this form. 14. Is there an air pollution control device/s on this emissions unit? C Yes - answer a through i No - skip to question 15 Air pollution control device Click the button below to add a new control device **Add New control device** 15. Is there monitoring equipment on this emissions unit or its related control devices: Tes - answer a through I No - skip to section B **Monitor 1 Monitor 2 Monitor 3**

CEMs CEMs CEMs a. Monitor type: Opacity Opacity Opacity C other C other C other Describe Describe Describe b. Manufacturer: c. Model Number: d. Monitor ID #: Facility's Designation Facility's Designation Facility's Designation

Bureau of Air and Waste

Fuel Burning Device

Emission Unit

2019
Year of Record
50
DEP EU#

						1190564
e. Installation Date:	(mm/dd/yyyy	·)	mm/dd/yyy	/)	(mm/dd/yy	уу)
f. DEP Approval #:		,				
g. DEP Approval Date:						
5 11 2 2 2 2 2	(mm/dd/yyyy	·)	mm/dd/yyy	/)	(mm/dd/yy	уу)
h. Decommission Date:						
	(mm/dd/yyyy	()	(mm/dd/yyy	/)	(mm/dd/yy	уу)
i. Recorder?	🧖 yes	Ĉ no	🧖 yes	C no	C yes	C no
j. Audible Alarm?	C yes	© no	C yes	◯ no	C yes	C no
k. Data System?	C yes	© no	C yes	C no	C yes	C no
I. Monitored Pollutants -	☐ PM 10		☐ PM 10		□ PM 10	
check all that apply:	PM 2.5		☐ PM 2.5		□ PM 2.5	
	□ SO2		□ SO2		□ SO2	
	$\Gamma \infty$		$\Gamma \infty$		$\Gamma \infty$	
	□voc		□voc		□ voc	
	□ NO2		NO2		□ NO2	
	□ NH3		□ NH3		□ NH3	
	Mercury		Mercury		Mercury	
	Oxygen		Oxygen		☐ Oxygen	
	CO2					
	□ H2S		□ H2S		□ H2S	
	□ HCL		HCL		□ HCL	
	Opacity		Opacity		Opacity	
	Other		Other		Other	
	Other		Other			
						▼
3. Fuels and	Describe Emiss	sions	Describe		Describe	
Fuel Name / Characterist	tics:		GENE	RATOR #2-CUMMI	INS #NT855G2- #2 C	DIL 0.3 PER.S
			Fuel N	lame		
			1			
			DEP F	uel #		
Add a NEW fuel: Check the	box if you nee	d to add a fuel that you	did Delet	e this fuel: check	box if you stopped	using this fuel in this unit
t report on previously (eDEP	will add a blan	k Sect. B form to your	permane	ntly. You must stil	Il report for this year	r of record even if amount i
ckage).			"0" - the	fuel will be remov	ved from the unit in	the next report cycle.
mber of Additional Fuels :						
Source Classification Co	de (SCC):		20200	102		
	,				will not validate)	
			INIER	AUF COMIDOS LIOL	A FINGUALO - UNDOO	TRIAL - DISTILLATE OIL

(DIESEL) - RECIPROCATING

Bureau of Air and Waste

Fuel Burning Device

Emission Unit

2019	
Year of Record	
50	
DEP EU#	
1190564	

	SCC Description - filled by eDEP upon error check.
b. Type of fuel	DIESEL
	Fuel Description - filled by eDEP upon error check.
c. Sulfur content for oils and coal (0-2.2%):	.138
	Percent by weight
d. Ash content for oils and coal(0- 10.0%):	0
	Percent by weight
e. Maximum hourly fuel rate for all firing burners:(enter "0"if unit	0.0120 1000 GALLONS ▼
decommissioned prior to this year of record):	Amount Units per hour
f. Do you have fuel or usage restrictions?	
g. DEP approval number for fuel restrictions:	EXEMPT 7.02
	Most recent for this fuel
h. Annual usage restriction (for this fuel):(amount or hours)	300 EACH-YEAR ▼
	Quantity Units
i. Short term use restriction (for this fuel):(amount or hours)	24 DAY ▼
	Quantity Units
	Per C C C
	month week day hour
2. Total actual fuel used for year of record:	0.1320 1000 GALLONS ▼
(check your amount vs units and enter "0" if not used in the year	of a. Amount - year of record b. Units
record)	.14 1000 GALLONS
	c. Total annual usage for prior year of record

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

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

Pollutant:	PM10-FIL	PM25-FIL	PM-CON	□ SO2
Actual for previous	0.0030	0.0030		0.0028
year:	Tons	Tons	Tons	Tons
Actual for year of	0.0028	0.0028		0.0026
record:	Tons	Tons	Tons	Tons
Potential emissions	2.2338	2.2338		2.0866
oterital emissions	Tons	Tons	Tons	Tons
Emission Factor	42.50	42.50		39.70
in pounds per unit	1000 GALLONS	1000 GALLONS		1000 GALLONS
Calculation Method	USEPA Emission Factor (💌	USEPA Emission Factor (🔽	USEPA Emission Factor (🔽	USEPA Emission Factor (🔽
Max allowed				

Bureau of Air and Waste

Fuel Burning Device

Emission Unit

2019
Year of Record
50
DEP EU#
1190564

emissions-annual:	Tons	Tons	Tons	Tons
Max allowed				
emissions-short term:	Pounds	Pounds	Pounds	Pounds
Short term Period	<u> </u>	✓	✓	_
Basis DEP Approval				
number or regulation:				
Pollutant:	□ PB	VOC	NH3	Γω
Actual for previous		0.0035		0.0091
year:	Tons	Tons	Tons	Tons
Actual for year of		0.0033		0.0086
record:	Tons	Tons	Tons	Tons
Determini emissione		2.5912		6.8328
Potential emissions	Tons	Tons	Tons	Tons
Emission Factor		49.30		130
in pounds per unit	<u></u>	1000 GALLONS		1000 GALLONS
Calculation Method	USEPA Emission Factor (🔻	USEPA Emission Factor (🔽	USEPA Emission Factor (🔻	USEPA Emission Factor (
Max allowed				
emissions-annual:	Tons	Tons	Tons	Tons
Max allowed				
emissions-short term:	Pounds	Pounds	Pounds	Pounds
Short term Period	✓		▼	
Basis DEP Approval				
number or regulation:				
Pollutant:	NO2	specify other pollutant		✓
Actual for previous	0.0423			
year:	Tons	Tons		
Actual for year of	0.0399			
record:	Tons	Tons		
Potential emissions	31.7462			
	Tons	Tons		
Emission Factor	604			
in pounds per unit	1000 GALLONS			
Calculation Method	USEPA Emission Factor (🔽	USEPA Emission Factor (🔻		
Max allowed				
emissions-annual:	Tons	Tons		
Max allowed				
emissions-short	Pounds	Pounds		
term: Short term Period		<u> </u>		
Basis DEP Approval				
Dasis DEP Approval				

Massachusetts Department of Environmental Protection Bureau of Air and Waste Fuel Burning Device Emission Unit DEP EU# 1190564

nber or regulation:	
Ozone season emissions - May 1 through September 30	
0.8356	10.1027
a. Typical day VOC emissions - pounds per day	b. Typical day NOx emissions - pounds per day
check to enter your own values	check to enter your own values
NOTE: The form will estimate the ozone season emission	ns for you. However, you may enter your own values by checking the
boxes above.	
C. Notes and Attachments	
3. Notes and Attachments	
. Notes: please include any additional information that will h	elp DEP understand your submission.
Attachments:	
Check here to submit attachments to this form (e.g., calculations)	-add a note in the field above indicating what is attached. This will create a
	electronic files to your submittal. For attachments that cannot be sent
lectronically, please list all such attachments above and deliver them	n to DEP with a paper copy of this form.



AP1 Sec A - Transaction #1210786

Exit



Massachusetts Department of Environmental Protection Bureau of Air and Waste

Fuel Burning Device Emission Unit

2019 Year of Record DEP EU# 1190564 Facility AQ Identifier

. Faciltity Identifiers:			
CLEAN HARBORS OF BRAINTREE INC			
a. Facility Name			
34839	1190564		
b. DEP Account Number	c. Facility AQ Identifier		
. Emission Unit Identifiers:			
CATERPILLAR GENERATOR #1			
a. Facility's choice of emission unit name - edit as needed			
55	55		
b. Facility's emission unit number / code - edit as needed	c. DEP emission unit #		
d. ORIS ID # – for large electrical utilities only	e. Combined Units – enter number of individual units		
. Emission unit installation and decommission dates:			
05/04/1989			
a.Installation Date - estimate if unknown (mm/dd/yyyy)	b. Decommission Date (mm/dd/yyyy) - if applicable		
	Complete only if the unit was shut down permanently or replace since the last report.		
. Emission Unit Replacement			
. Emission Unit Replacement a. Is this unit, replacing another emission unit?			
a. Is this unit, replacing another emission unit?	since the last report.		
·	since the last report.		
No	since the last report. For the unit being replaced from the drop-down list below:		
a. Is this unit, replacing another emission unit?	since the last report. For the unit being replaced from the drop-down list below:		
a. Is this unit, replacing another emission unit? No O Yes - Enter DEP's emissions unit number and name to b. DEP's Emission Unit Number and facility's emission unit	since the last report. For the unit being replaced from the drop-down list below:		
a. Is this unit, replacing another emission unit? No C Yes - Enter DEP's emissions unit number and name to b. DEP's Emission Unit Number and facility's emission unit. Equipment	since the last report. For the unit being replaced from the drop-down list below:		
a. Is this unit, replacing another emission unit? No Yes - Enter DEP's emissions unit number and name for the second sec	since the last report. for the unit being replaced from the drop-down list below: it name		
a. Is this unit, replacing another emission unit? No C Yes - Enter DEP's emissions unit number and name to b. DEP's Emission Unit Number and facility's emission unit. Equipment	since the last report. For the unit being replaced from the drop-down list below:		
a. Is this unit, replacing another emission unit? No Yes - Enter DEP's emissions unit number and name for the second sec	since the last report. for the unit being replaced from the drop-down list below: it name		
a. Is this unit, replacing another emission unit? No C Yes - Enter DEP's emissions unit number and name to b. DEP's Emission Unit Number and facility's emission unit. Equipment Equipment Type EPA Unit type code	since the last report. for the unit being replaced from the drop-down list below: it name		
a. Is this unit, replacing another emission unit? No Yes - Enter DEP's emissions unit number and name for the property of the	it name RECIPROCATING IC ENGINE		

Massachusetts Department of Environmental Protection 2019 Bureau of Air and Waste Year of Record **Fuel Burning Device** 55 DEP EU# **Emission Unit** 1190564 Non Emergency Use(hours) Maintenance and Readiness Testing(hours) CATERPILLAR 3412DIT b. Manufacturer c. Model number 5.3480 e. Number of burners (enter "0" if not applicable) d. Max Input Rating MMBtu/hr (must be greater than 0) f. Types of burner - check one: rotary mech. atomizer steam atomizer air atomizer traveling grate C hand fired C Other Specify "other" burner type CATERPILLR N/A g. Burner Manufacturer h. Burner Model number 06/01/1989 i.Burner Installation Date (mm/dd/yyyy) 6. DEP approvals - leave blank if not applicable: MBR-89-COM-31 05/04/1989 a. Most recent approval number b. DEP approval date (mm/dd/yyyy) 7. Is this unit exempt under 310 CMR 7.02 Plan Approvals? C Yes No 8. If exempt from Plan Approval, indicate the reason for the exemption, from the drop-down list below. (e.g., cite a specific DEP regulation): 9. Additional State Reporting Requirements: a. Are there other routine air quality reporting requirements for this emissions unit? Yes - Specify reporting frequency below No - Skip to question 9c b. Reporting frequency - check all that apply: **▼** RES Quarterly Semi-annual (include Operating Permit and Plan Approval reports, but not exceedance reporting) c. Is this unit subject to (check all that apply): □ NESHAP □ NSPS MACT 10. Hours of operation for the emission unit: a. check if continuously operated - 24 X 7 X 52

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Massachusetts Department of Environmental Protection 2019 Bureau of Air and Waste Year of Record **Fuel Burning Device** 55 DEP EU# **Emission Unit** 1190564 b. Number of hours per day c. Number of days per week d. Number of weeks per year e. Percent of total annual operation that occurs in each calendar quarter(0 or 0.1 - 100): 3 17.0 13.0 67.0 Sum of Q1+Q2+Q3+Q4 must = 100% or 0 if the unit was not operated for any quarter Q1 Q2 Q4 Q3 11. Ozone season schedule - May 1 through September 30: a. Ozone season hours per day b. Ozone season days per week c. Weeks operated in ozone season 12. Emission Release Point - select one: Engines click here for instructions: Non-Stack Release Points: Physical Stacks: C fugitive vertical stack norizontal vent vertical with rain cap/sleeve C engine exhaust C downward facing vent vertical stack/vent less than 10ft 13. Link this unit to a physical stack (if applicable) - pick from the list below: 7 1 STACK GENERATOR (2)- CUMMINS AND CATERPILLAR Facility's stack identifier from STACK form - to change stack name use the STACK form If the stack for this unit is not listed, save and exit this form now and complete a new Stack form before returning to this form. 14. Is there an air pollution control device/s on this emissions unit? C Yes - answer a through i No - skip to question 15 Air pollution control device Click the button below to add a new control device **Add New control device** 15. Is there monitoring equipment on this emissions unit or its related control devices: Yes - answer a through I No - skip to section B **Monitor 1 Monitor 2 Monitor 3** CEMs CEMs CEMs a. Monitor type: Opacity Opacity Opacity C other C other C other

Describe

Facility's Designation

Describe

Facility's Designation

Describe

Facility's Designation

b. Manufacturer:

c. Model Number:

d. Monitor ID #:

Bureau of Air and Waste

Fuel Burning Device

Emission Unit

2019
Year of Record
55
DEP EU#

						1190564
e. Installation Date:	mm/dd/yyyy	')	(mm/dd/yyyy	/)	(mm/dd/yyy	y)
f. DEP Approval #:						
g. DEP Approval Date:						
	(mm/dd/yyyy	')	(mm/dd/yyy	/)	(mm/dd/yyy	y)
h. Decommission Date:						
	(mm/dd/yyyy	")	(mm/dd/yyyy	/)	(mm/dd/yyy	y)
i. Recorder?	Oyes	C no	C yes	C no	C yes	C no
j. Audible Alarm?	C yes	C no	C yes	C no	C yes	C no
k. Data System?	🧖 yes	C no	🧖 yes	◯ no	C yes	Ĉ no
I. Monitored Pollutants -	☐ PM 10		☐ PM 10		☐ PM 10	
check all that apply:	PM 2.5		PM 2.5		☐ PM 2.5	
	SO2		SO2		SO2	
	$\Box \infty$		$\square \infty$		$\square \infty$	
	□ voc		□ voc		□ voc	
	NO2		NO2		NO2	
	□ NH3		□ NH3		□ NH3	
	Mercury		Mercury		Mercury	
	Oxygen		Oxygen		Oxygen	
	CO2		CO2		CO2	
	□ H2S		☐ H2S		□ H2S	
	☐ HCL		HCL		HCL	
	Opacity		Opacity		Opacity	
	Other		Other		Other	
		▼] [<u> </u>	_
	Describe		Describe		Describe	
B. Fuels and	Emiss	sions				
Fuel Name / Characterist	ics:		GENE	RATOR #1-CATE	RPILLAR 558.5 KW	#2 OIL-0.3 S
			Fuel N	ame		
			1			
			DEP F	uel #		
Add a NEW fuel: Check the	box if you nee	d to add a fuel that yo	u did Delet	e this fuel: check	box if you stopped u	sing this fuel in this unit
t report on previously (eDEP	will add a blan	k Sect. B form to your				of record even if amount is
ckage). umber of Additional Fuels:			"0" – the	fuel will be remo	ved from the unit in t	he next report cycle.
Source Classification Cod	de (SCC):		20200	102		
					C will not validate)	
						RIAL - DISTILLATE OIL

(DIESEL) - RECIPROCATING

Bureau of Air and Waste

Fuel Burning Device

Emission Unit

2019	
Year of Record	
55	
DEP EU#	
1190564	

	SCC Description - fille	ed by eDEP upon error check.			
b. Type of fuel	DIESEL				
		ed by eDEP upon error check.			
c. Sulfur content for oils and coal (0-2.2%):	0.404				
c. Sulful content for one and coal (0-2.2%).	.0401				
	Percent by weight				
d. Ash content for oils and coal(0- 10.0%):	0				
	Percent by weight				
e. Maximum hourly fuel rate for all firing burners:(enter "0"if unit	0.0380	1000 GALLONS ▼			
decommissioned prior to this year of record):	Amount	Units per hour			
f. Do you have fuel or usage restrictions?	⊙ yes	p to question 2			
g. DEP approval number for fuel restrictions:	MBR-89-COM-31				
	Most recent for this fu	el			
h. Annual usage restriction (for this fuel):(amount or hours)	300	EACH-YEAR ▼			
	Quantity	Units			
. Short term use restriction (for this fuel):(amount or hours)	24	DAY ▼			
	Quantity	Units			
	,	Per C G G			
		month week day hour			
2. Total actual fuel used for year of record:	0.9120	1000 GALLONS			
(check your amount vs units and enter "0" if not used in the year	of a. Amount - year of red	cord b. Units			
record)	.456 1000 G	ALLONS			
	c. Total annual usage for prior year of record				

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

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

Pollutant:	PM10-FIL	PM25-FIL	PM-CON	SO2
Actual for previous	0.0097	0.0097		0.0091
year:	Tons	Tons	Tons	Tons
Actual for year of	0.0194	0.0194		0.0181
record:	Tons	Tons	Tons	Tons
Potential emissions	7.0737	7.0737		6.6077
	Tons	Tons	Tons	Tons
Emission Factor	42.50	42.50		39.70
in pounds per unit	1000 GALLONS ▼	1000 GALLONS		1000 GALLONS
Calculation Method	USEPA Emission Factor (🔽			
Max allowed				

Bureau of Air and Waste

Fuel Burning Device

Emission Unit

2019
Year of Record

55
DEP EU#

1190564

emissions-annual:	Tons	-	Tons	Tons		Tons
Max allowed					1	
emissions-short term:	Pounds		Pounds	Pounds		Pounds
Short term Period	_			<u></u>		<u> </u>
Basis DEP Approval						
number or regulation:						
Pollutant:	□ PB		VOC	NH3		$\square \infty$
				I NI D	1	
Actual for previous year:	Tons		0.0112 Tons	Tono		0.0296 Tons
Actual for year of	TOIS		0.0225	Tons	1	0.0593
record:	Tons		10.0225 Tons	Tons		Tons
	Total	-	8.2055	TOID	1	21.6372
Potential emissions	Tons		Tons	Tons		Tons
Emission Factor	Total	\rightarrow	49.30		1	130
	,	-1			11	
in pounds per unit			1000 GALLONS ▼		<u> </u>	1000 GALLONS
Calculation Method	USEPA Emission Factor (USEPA Emission Factor (💌	USEPA Emission Factor (~	USEPA Emission Factor (
Max allowed						
emissions-annual:	Tons		Tons	Tons		Tons
Max allowed						
emissions-short term:	Pounds		Pounds	Pounds		Pounds
Short term Period	✓			▼		
Basis DEP Approval						
number or regulation:						
Pollutant:	NO2		specify other pollutant			<u> </u>
Actual for previous	0.1377					
year:	Tons		Tons			
Actual for year of	0.2754					
record:	Tons		Tons			
Potential emissions	100.5298					
	Tons		Tons			
Emission Factor	604					
in pounds per unit	1000 GALLONS		✓			
Calculation Method	USEPA Emission Factor (USEPA Emission Factor (💌			
Max allowed						
emissions-annual:	Tons		Tons			
Max allowed						
emissions-short	Pounds		Pounds			
term:						
Short term Period			<u> </u>			
Basis DEP Approval						

1.8165	22.2340
a. Typical day VOC emissions - pounds per day	b. Typical day NOx emissions - pounds per day
check to enter your own values	check to enter your own values
NOTE: The form will estimate the ozone season emiss boxes above.	ions for you. However, you may enter your own values by checking the
Notes and Attachments	
otes: please include any additional information that wil	ll help DEP understand vour submission.
tachments:	
heck here to submit attachments to this form (e.g., calculation	ns) -add a note in the field above indicating what is attached. This will create a



AP1 Sec A - Transaction #1210786

Exit



Massachusetts Department of Environmental Protection Bureau of Air and Waste

Fuel Burning Device Emission Unit

2019 Year of Record DEP EU# 1190564 Facility AQ Identifier

. Faciltity Identifiers:	
CLEAN HARBORS OF BRAINTREE INC	
a. Facility Name	
34839	1190564
b. DEP Account Number	c. Facility AQ Identifier
. Emission Unit Identifiers:	
2 LENNOX FURNACES SR 20Q5-140/154	
a. Facility's choice of emission unit name - edit as needed	
64	64
b. Facility's emission unit number / code - edit as needed	c. DEP emission unit #
d. ORIS ID # – for large electrical utilities only	e. Combined Units – enter number of individual units
Emission unit installation and decommission dates:	
06/01/1994	
a.Installation Date - estimate if unknown (mm/dd/yyyy)	b. Decommission Date (mm/dd/yyyy) - if applicableComplete only if the unit was shut down permanently or replace
a.Installation Date - estimate if unknown (mm/dd/yyyy) . Emission Unit Replacement	Complete only if the unit was shut down permanently or replace
Emission Unit Replacement	Complete only if the unit was shut down permanently or replace
Emission Unit Replacement	Complete only if the unit was shut down permanently or replace since the last report.
. Emission Unit Replacement a. Is this unit, replacing another emission unit?	Complete only if the unit was shut down permanently or replace since the last report.
. Emission Unit Replacement a. Is this unit, replacing another emission unit? No © Yes - Enter DEP's emissions unit number and name	Complete only if the unit was shut down permanently or replace since the last report. for the unit being replaced from the drop-down list below:
Emission Unit Replacement a. Is this unit, replacing another emission unit? No © Yes - Enter DEP's emissions unit number and name	Complete only if the unit was shut down permanently or replace since the last report. for the unit being replaced from the drop-down list below:
. Emission Unit Replacement a. Is this unit, replacing another emission unit?	Complete only if the unit was shut down permanently or replace since the last report. for the unit being replaced from the drop-down list below:
. Emission Unit Replacement a. Is this unit, replacing another emission unit? No Yes - Enter DEP's emissions unit number and name b. DEP's Emission Unit Number and facility's emission un	Complete only if the unit was shut down permanently or replace since the last report. for the unit being replaced from the drop-down list below:
Emission Unit Replacement a. Is this unit, replacing another emission unit? No CYes - Enter DEP's emissions unit number and name b. DEP's Emission Unit Number and facility's emission un Equipment	Complete only if the unit was shut down permanently or replace since the last report. for the unit being replaced from the drop-down list below:
Emission Unit Replacement a. Is this unit, replacing another emission unit? No CYes - Enter DEP's emissions unit number and name b. DEP's Emission Unit Number and facility's emission un Equipment Equipment Type EPA Unit type code	Complete only if the unit was shut down permanently or replace since the last report. for the unit being replaced from the drop-down list below: it name
Emission Unit Replacement a. Is this unit, replacing another emission unit? No Yes - Enter DEP's emissions unit number and name b. DEP's Emission Unit Number and facility's emission un Equipment a. Equipment Type EPA Unit type code	Complete only if the unit was shut down permanently or replace since the last report. for the unit being replaced from the drop-down list below: it name
Emission Unit Replacement a. Is this unit, replacing another emission unit? No C Yes - Enter DEP's emissions unit number and name b. DEP's Emission Unit Number and facility's emission un Equipment a. Equipment Type EPA Unit type code	Complete only if the unit was shut down permanently or replace since the last report. for the unit being replaced from the drop-down list below: it name
Emission Unit Replacement a. Is this unit, replacing another emission unit? No C Yes - Enter DEP's emissions unit number and name in the property of the pro	Complete only if the unit was shut down permanently or replace since the last report. for the unit being replaced from the drop-down list below: it name

Massachusetts Department of Environmental Protection 2019 Bureau of Air and Waste Year of Record **Fuel Burning Device** 64 DEP EU# **Emission Unit** 1190564 Non Emergency Use(hours) Maintenance and Readiness Testing(hours) SR20Q5-140 LENNOX b. Manufacturer c. Model number 0.3070 d. Max Input Rating MMBtu/hr (must be greater than 0) e. Number of burners (enter "0" if not applicable) f. Types of burner - check one: rotary mech. atomizer steam atomizer air atomizer traveling grate C hand fired C Other Specify "other" burner type BECKETT AFG g. Burner Manufacturer h. Burner Model number 06/01/1995 i.Burner Installation Date (mm/dd/yyyy) 6. DEP approvals - leave blank if not applicable: a. Most recent approval number b. DEP approval date (mm/dd/yyyy) 7. Is this unit exempt under 310 CMR 7.02 Plan Approvals? 8. If exempt from Plan Approval, indicate the reason for the exemption, from the drop-down list below. (e.g., cite a specific DEP regulation): below thresholds in 310 CMR 7.02 (2)(b) 7 and 15 9. Additional State Reporting Requirements: a. Are there other routine air quality reporting requirements for this emissions unit? No - Skip to question 9c Yes - Specify reporting frequency below b. Reporting frequency - check all that apply: **▼** RES Quarterly Semi-annual (include Operating Permit and Plan Approval reports, but not exceedance reporting) c. Is this unit subject to (check all that apply): □ NESHAP □ NSPS MACT 10. Hours of operation for the emission unit: a. check if continuously operated - 24 X 7 X 52 0

Massachusetts Department of Environmental Protection 2019 Bureau of Air and Waste Year of Record **Fuel Burning Device** 64 DEP EU# **Emission Unit** 1190564 b. Number of hours per day c. Number of days per week d. Number of weeks per year e. Percent of total annual operation that occurs in each calendar quarter(0 or 0.1 - 100): 0.0 0.0 0.0 0.0 Sum of Q1+Q2+Q3+Q4 must = 100% or 0 if the unit was not operated for any quarter Q1 Q2 Q4 Q3 11. Ozone season schedule - May 1 through September 30: a. Ozone season hours per day b. Ozone season days per week c. Weeks operated in ozone season 12. Emission Release Point - select one: Engines click here for instructions: Non-Stack Release Points: Physical Stacks: C fugitive vertical stack norizontal vent vertical with rain cap/sleeve C engine exhaust C downward facing vent vertical stack/vent less than 10ft 13. Link this unit to a physical stack (if applicable) - pick from the list below: 9 1 STACK-2 FURNACES - LENNOX Facility's stack identifier from STACK form - to change stack name use the STACK form If the stack for this unit is not listed, save and exit this form now and complete a new Stack form before returning to this form. 14. Is there an air pollution control device/s on this emissions unit? C Yes - answer a through i No - skip to question 15 Air pollution control device Click the button below to add a new control device **Add New control device** 15. Is there monitoring equipment on this emissions unit or its related control devices: Tes - answer a through I No - skip to section B **Monitor 1 Monitor 2 Monitor 3** CEMs CEMs CEMs a. Monitor type: Opacity Opacity Opacity C other C other Other

Describe

Facility's Designation

Describe

Facility's Designation

Describe

Facility's Designation

b. Manufacturer:

c. Model Number:

d. Monitor ID #:

Bureau of Air and Waste

Fuel Burning Device

Emission Unit

2019
Year of Record
64
DEP EU#

						1190564
e. Installation Date:	(mm/dd/yyyy))	(mm/dd/yyyy	′)	mm/dd/yyyy	<i>(</i>)
f. DEP Approval #:						
g. DEP Approval Date:						
	(mm/dd/yyyy))	(mm/dd/yyyy	')	(mm/dd/yyyy	/)
h. Decommission Date:						
	(mm/dd/yyyy)		(mm/dd/yyyy	')	(mm/dd/yyyy	/)
i. Recorder?	C yes	◯ no	C yes	C no	🧖 yes	O no
j. Audible Alarm?	C yes	○ no	C yes	Ĉ no	🧖 yes	© no
k. Data System?	C yes	◯ no	C yes	C no	🧖 yes	O no
I. Monitored Pollutants -	☐ PM 10		□ PM 10		☐ PM 10	
check all that apply:	☐ PM 2.5		PM 2.5		☐ PM 2.5	
	□ SO2		□ SO2		□ SO2	
	$\Box \infty$		$\Gamma \infty$		$\Gamma \infty$	
	□ voc		□voc		□ voc	
	NO2		NO2		NO2	
	□ NH3		□ NH3		□ NH3	
	Mercury		Mercury		Mercury	
	Oxygen		☐ Oxygen		Oxygen	
	□ CO2		□ CO2		□ co2	
	H2S		□ H2S		□ H2S	
	□ HCL		□ HCL		□ HCL	
	Opacity		Opacity		Opacity	
	Other		Other		Other	
	Utilei		Other		41	
3. Fuels and	Describe Emiss	ions	Describe		Describe	
Fuel Name / Characterist	tics:		FURNA	ACES #1(2)-LENN	OX SR 20Q5 #2 OIL-	0.3 SULPHUR
			Fuel N	ame		
			1			
			DEP F	uel #		
Add a NEW fuel: Check the	box if you need	I to add a fuel that you				sing this fuel in this unit
report on previously (eDEP	will add a blank	Sect. B form to your				of record even if amoun
ckage).			"0" - the	fuel will be remove	ed from the unit in th	e next report cycle.
mber of Additional Fuels :						
Source Classification Co	de (SCC):		105001	05		
			SCC (call DEP if SCC	will not validate)	
					N - SPACE HEATERS	- INDUSTRIAL -
				ATE OIL		

Bureau of Air and Waste

Fuel Burning Device

Emission Unit

2019	
Year of Record	
64	
DEP EU#	
1190564	

	SCC Description - filled by eDEP upon error check.
b. Type of fuel	FUEL NO.2
	Fuel Description - filled by eDEP upon error check.
c. Sulfur content for oils and coal (0-2.2%):	.138
	Percent by weight
d. Ash content for oils and coal(0- 10.0%):	0
	Percent by weight
e. Maximum hourly fuel rate for all firing burners:(enter "0"if unit	0.0022 1000 GALLONS
decommissioned prior to this year of record):	Amount Units per hour
f. Do you have fuel or usage restrictions?	© yes
g. DEP approval number for fuel restrictions:	EXEMPT
	Most recent for this fuel
h. Annual usage restriction (for this fuel):(amount or hours)	19.2720 1000 GALLONS ▼
	Quantity Units
i. Short term use restriction (for this fuel):(amount or hours)	0.0022 1000 GALLONS ▼
	Quantity Units
	Per C C G
	month week day hour
2. Total actual fuel used for year of record:	0.0000 1000 GALLONS 🔻
(check your amount vs units and enter "0" if not used in the year	r of a. Amount - year of record b. Units
record)	0 1000 GALLONS
	c. Total annual usage for prior year of record

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

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

Pollutant:	PM10-FIL	PM25-FIL	PM-CON	□ SO2
Actual for previous	0	0		0
year:	Tons	Tons	Tons	Tons
Actual for year of	0	0		0
record:	Tons	Tons	Tons	Tons
Potential emissions	0.0237	0.0059		0.1910
Totoritial officionic	Tons	Tons	Tons	Tons
Emission Factor	2.46	0.6150		143.60
in pounds per unit	1000 GALLONS ▼	1000 GALLONS	<u> </u>	1000 GALLONS
Calculation Method	USEPA Emission Factor (🔽			
Max allowed				

Bureau of Air and Waste

Fuel Burning Device

Emission Unit

2019
Year of Record
64
DEP EU#
1190564

emissions-annual:	Tons	Tons	Tons	Tons
Max allowed	TOID		1010	TOTO
emissions-short term:	Pounds	Pounds	Pounds	Pounds
Short term Period	-	▼	▼	▼
Basis DEP Approval				
number or regulation:				
Pollutant:		Evoc		
	РВ	Voc	NH3	
Actual for previous		0		0
year:	Tons	Tons	Tons	Tons
Actual for year of record:	Tana	0	Tama	0
i coord.	Tons	Tons	Tons	Tons
Potential emissions	Tons	0.0073 Tons	Tons	0.0482 Tons
Emission Factor	TOTS	0.76	IOIS	5
in pounds per unit		1000 GALLONS		1000 GALLONS
Calculation Method	USEPA Emission Factor (🔽	USEPA Emission Factor (🔽	USEPA Emission Factor (🔽	USEPA Emission Factor (
Max allowed				
emissions-annual:	Tons	Tons	Tons	Tons
Max allowed				
emissions-short term:	Pounds	Pounds	Pounds	Pounds
Short term Period	▼		▼	
Basis DEP Approval				
number or regulation:				
Pollutant:	NO2	specify other pollutant		▼
Actual for previous	0			
year:	Tons	Tons		
Actual for year of	0			
record:	Tons	Tons		
Potential emissions	0.1927			
	Tons	Tons		
Emission Factor	20			
in pounds per unit	1000 GALLONS ▼	•		
Calculation Method	USEPA Emission Factor (🔻	USEPA Emission Factor (🔻		
Max allowed				
emissions-annual:	Tons	Tons		
Max allowed				
emissions-short term:	Pounds	Pounds		
	_1	_1		
Short term Period Basis DEP Approval		<u> </u>		
ALLERIA DED Assessed				

Massachusetts Department of Environmental Protection Bureau of Air and Waste Fuel Burning Device Emission Unit DEP EU# 1190564

0	
	0
a. Typical day VOC emissions - pounds per day	b. Typical day NOx emissions - pounds per day
check to enter your own values	check to enter your own values
NOTE: The form will estimate the ozone season emission	ons for you. However, you may enter your own values by checking the
poxes above.	
Notes and Attachments	
Notes and Attachments	
tes: please include any additional information that will	help DEP understand your submission.
UNIT WAS NOT USED IN CALENDAR YEAR 2018	
achments:	
neck here to submit attachments to this form (e.g., calculations	s) -add a note in the field above indicating what is attached. This will create a
tep on your Transaction Overview Page where you will attac	ch electronic files to your submittal. For attachments that cannot be sent
onically, please list all such attachments above and deliver the	em to DEP with a paper copy of this form.



AP1 Sec A - Transaction #1210786

Exit



Massachusetts Department of Environmental Protection Bureau of Air and Waste

Fuel Burning Device Emission Unit

2019 Year of Record DEP EU# 1190564 Facility AQ Identifier

CLEAN HARBORS OF BRAINTREE INC			
a. Facility Name			
34839	1190564		
b. DEP Account Number	c. Facility AQ Identifier		
2. Emission Unit Identifiers:			
INDUSTRIAL OIL FURNACE LG14-225			
a. Facility's choice of emission unit name - edit as needed			
LG14	67		
b. Facility's emission unit number / code - edit as needed	c. DEP emission unit #		
	64		
d. ORIS ID # – for large electrical utilities only	e. Combined Units – enter number of individual units		
3. Emission unit installation and decommission dates:			
11/15/2015			
a.Installation Date - estimate if unknown (mm/dd/yyyy)	b. Decommission Date (mm/dd/yyyy) - if applicable		
	Complete only if the unit was shut down permanently or repla- since the last report.		
I. Emission Unit Replacement			
•			
a. Is this unit, replacing another emission unit?	since the last report.		
•	since the last report.		
a. Is this unit, replacing another emission unit? No O Yes - Enter DEP's emissions unit number and name f	since the last report. or the unit being replaced from the drop-down list below:		
a. Is this unit, replacing another emission unit?	since the last report. or the unit being replaced from the drop-down list below:		
a. Is this unit, replacing another emission unit? No O Yes - Enter DEP's emissions unit number and name f	since the last report. or the unit being replaced from the drop-down list below:		
a. Is this unit, replacing another emission unit? No C Yes - Enter DEP's emissions unit number and name f b. DEP's Emission Unit Number and facility's emission unit	since the last report. or the unit being replaced from the drop-down list below:		
a. Is this unit, replacing another emission unit? No CYes - Enter DEP's emissions unit number and name f b. DEP's Emission Unit Number and facility's emission unit Equipment	since the last report. or the unit being replaced from the drop-down list below:		
a. Is this unit, replacing another emission unit? No CYes - Enter DEP's emissions unit number and name f b. DEP's Emission Unit Number and facility's emission unit Equipment a. Equipment Type EPA Unit type code	since the last report. or the unit being replaced from the drop-down list below: It name		
a. Is this unit, replacing another emission unit? O No O Yes - Enter DEP's emissions unit number and name for the property of	or the unit being replaced from the drop-down list below: It name		
a. Is this unit, replacing another emission unit? No CYes - Enter DEP's emissions unit number and name f b. DEP's Emission Unit Number and facility's emission unit Equipment a. Equipment Type EPA Unit type code	since the last report. or the unit being replaced from the drop-down list below: It name		
a. Is this unit, replacing another emission unit? O No O Yes - Enter DEP's emissions unit number and name for the property of	or the unit being replaced from the drop-down list below: It name		

Massachusetts Department of Environmental Protection 2019 Bureau of Air and Waste Year of Record **Fuel Burning Device** 67 DEP EU# **Emission Unit** 1190564 Non Emergency Use(hours) Maintenance and Readiness Testing(hours) LG-14-225/275B40 ALLIED AIR ENTERPRISES LLC (A LENNOX COMPANY) b. Manufacturer c. Model number 0.28 d. Max Input Rating MMBtu/hr (must be greater than 0) e. Number of burners (enter "0" if not applicable) f. Types of burner - check one: rotary mech. atomizer steam atomizer air atomizer traveling grate C hand fired C Other Specify "other" burner type BECKETT 230V-1-60 g. Burner Manufacturer h. Burner Model number 11/15/2015 i.Burner Installation Date (mm/dd/yyyy) 6. DEP approvals - leave blank if not applicable: a. Most recent approval number b. DEP approval date (mm/dd/yyyy) 7. Is this unit exempt under 310 CMR 7.02 Plan Approvals? 8. If exempt from Plan Approval, indicate the reason for the exemption, from the drop-down list below. (e.g., cite a specific DEP regulation): below thresholds in 310 CMR 7.02 (2)(b) 7 and 15 9. Additional State Reporting Requirements: a. Are there other routine air quality reporting requirements for this emissions unit? No - Skip to question 9c Yes - Specify reporting frequency below b. Reporting frequency - check all that apply: **▼** RES Quarterly Semi-annual (include Operating Permit and Plan Approval reports, but not exceedance reporting) c. Is this unit subject to (check all that apply): □ NESHAP □ NSPS MACT 10. Hours of operation for the emission unit: a. check if continuously operated - 24 X 7 X 52 10

Massachusetts Department of Environmental Protection 2019 Bureau of Air and Waste Year of Record **Fuel Burning Device** 67 DEP EU# **Emission Unit** 1190564 b. Number of hours per day c. Number of days per week d. Number of weeks per year e. Percent of total annual operation that occurs in each calendar quarter(0 or 0.1 - 100): 56.0 0.0 0.0 44.0 Sum of Q1+Q2+Q3+Q4 must = 100% or 0 if the unit was not operated for any quarter Q1 Q2 Q4 Q3 11. Ozone season schedule - May 1 through September 30: a. Ozone season hours per day b. Ozone season days per week c. Weeks operated in ozone season 12. Emission Release Point - select one: Engines click here for instructions: Non-Stack Release Points: Physical Stacks: C fugitive vertical stack norizontal vent vertical with rain cap/sleeve C engine exhaust C downward facing vent vertical stack/vent less than 10ft 13. Link this unit to a physical stack (if applicable) - pick from the list below: 9 1 STACK-2 FURNACES - LENNOX Facility's stack identifier from STACK form - to change stack name use the STACK form If the stack for this unit is not listed, save and exit this form now and complete a new Stack form before returning to this form. 14. Is there an air pollution control device/s on this emissions unit?

No - skip to question 15

No - skip to section B

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

Monitor 1

CEMs

Opacity

C other

Describe

Facility's Designation

Click the button below to add a new control device

Add New control device

Monitor 2

CEMs

Opacity

Other

Describe

Facility's Designation

Monitor 3

CEMs

Opacity

C other

Describe

Facility's Designation

C Yes - answer a through i

Air pollution control device

Tes - answer a through I

a. Monitor type:

b. Manufacturer:

c. Model Number:

d. Monitor ID #:

Bureau of Air and Waste

Fuel Burning Device

Emission Unit

2019
Year of Record
67
DEP EU#

						1190564
e. Installation Date:	(mm/dd/yyyy)		(mm/dd/yyyy	·)	(mm/dd/yyy	()
f. DEP Approval #:						
g. DEP Approval Date:						
	(mm/dd/yyyy)		(mm/dd/yyyy)	(mm/dd/yyy	/)
h. Decommission Date:	((() ()			,		`
i. Recorder?	(mm/dd/yyyy)	© no	(mm/dd/yyyy	no ((mm/dd/yyy	() © no
	-		🧖 yes		C yes	
j. Audible Alarm?	🧖 yes	© no	C yes	no no	🧖 yes	Ĉ no
k. Data System?	C yes	○ no	C yes	Ĉ no	C yes	O no
I. Monitored Pollutants -	☐ PM 10		☐ PM 10		☐ PM 10	
check all that apply:	☐ PM 2.5		PM 2.5		PM 2.5	
	□ SO2		SO2		□ SO2	
	$\Box \infty$		$\square \infty$		$\square \infty$	
	□ voc		□ voc		□ voc	
	□ NO2		NO2		□ NO2	
	□ NH3		□ NH3		□ NH3	
	Mercury		Mercury		Mercury	
	Oxygen		Oxygen		Oxygen	
	CO2		CO2		CO2	
	H2S		☐ H2S		H2S	
	☐ HCL		HCL		HCL	
	C Opacity		Opacity		C Opacity	
	Other		Other		Other	
		_	1		▼ 1	▼ 1
	Describe	<u> </u>	Describe		Describe	
3. Fuels and		ions	<u> </u>			
Fuel Name / Characterist	ics.		NO. 2 C	OIL.		
			Fuel N	ame		
			1			
			DEP F	uel #		
Add a NEW fuel: Check the	box if you need	to add a fuel that you	u did Delete	e this fuel: check	box if you stopped us	sing this fuel in this unit
report on previously (eDEP	will add a blank	Sect. B form to your	permaner	ntly. You must sti	Il report for this year	of record even if amount i
ckage).			"0" - the	fuel will be remov	ved from the unit in th	e next report cycle.
mber of Additional Fuels :						
_	de (SCC):		102005	01		
mber of Additional Fuels : Source Classification Co	de (SCC):				C will not validate)	

Bureau of Air and Waste

Fuel Burning Device

Emission Unit

2019
Year of Record
67
DEP EU#
1190564

	SCC Description - filled by eDEP upon error check.
	SCC Description - filled by eDEF upon entil check.
b. Type of fuel	FUEL NO.2
	Fuel Description - filled by eDEP upon error check.
c. Sulfur content for oils and coal (0-2.2%):	.138
	Percent by weight
d. Ash content for oils and coal(0- 10.0%):	0
	Percent by weight
e. Maximum hourly fuel rate for all firing burners:(enter "0"if unit	0.0003 1000 GALLONS
decommissioned prior to this year of record):	Amount Units per hour
f. Do you have fuel or usage restrictions?	C yes • no - skip to question 2
g. DEP approval number for fuel restrictions:	
	Most recent for this fuel
h. Annual usage restriction (for this fuel):(amount or hours)	_
	Quantity Units
i. Short term use restriction (for this fuel):(amount or hours)	▼
•	Quantity Units
	Per C C C
	month week day hour
Total actual fuel used for year of record:	0.3300 1000 GALLONS ▼
(check your amount vs units and enter "0" if not used in the year	or of a. Amount - year of record b. Units
record)	.29 1000 GALLONS
	c. Total annual usage for prior year of record

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

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

Pollutant:	PM10-FIL	PM25-FIL	PM-CON	□ SO2
Actual for previous	0.0001	0		0.0028
year:	Tons	Tons	Tons	Tons
Actual for year of	0.0002	0		0.0032
record:	Tons	Tons	Tons	Tons
Potential emissions	0.0013	0.0003		0.0257
Toteritial errissions	Tons	Tons	Tons	Tons
Emission Factor	1	0.25		142
in pounds per unit	1000 GALLONS ▼	1000 GALLONS	<u> </u>	1000 GALLONS
Calculation Method	USEPA Emission Factor (USEPA Emission Factor (🔽	USEPA Emission Factor (🔽	USEPA Emission Factor (🔽
Max allowed				

Bureau of Air and Waste

Fuel Burning Device

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emissions-annual:	Tons	Tons	Tons	Tons
Max allowed				
emissions-short term:	Pounds	Pounds	Pounds	Pounds
Short term Period				<u> </u>
Basis DEP Approval				
number or regulation:				
Pollutant:	□ PB	Voc	NH3	
Actual for previous		0		0.0007
year:	Tons	Tons	Tons	Tons
Actual for year of	TOID	0	10.0	0.0008
record:	Tons	Tons	Tons	Tons
		0.0003		0.0066
Potential emissions	Tons	Tons	Tons	Tons
Emission Factor		0.20		5
in nounda par unit	▼	4		1000 GALLONS
in pounds per unit			_	
Calculation Method	USEPA Emission Factor (🔻	USEPA Emission Factor (🔻	USEPA Emission Factor (🔻	USEPA Emission Factor (
Max allowed				
emissions-annual:	Tons	Tons	Tons	Tons
Max allowed				
emissions-short term:		Pounds	Pounds	Pounds
Short term Period				
Basis DEP Approval				
number or regulation:				
Pollutant:	NO2	specify other pollutant		. ▼¹
Actual for previous	0.0035			
year:	Tons	Tons		
Actual for year of	0.0040			
record:	Tons	Tons		
Potential emissions	0.0315			
	Tons	Tons		
Emission Factor	24			
in pounds per unit	1000 GALLONS	V		
Calculation Method	USEPA Emission Factor (🔻	USEPA Emission Factor (🔻		
Max allowed				
emissions-annual:	Tons	Tons		
Max allowed				
emissions-short	Pounds	Pounds		
term:	i ourius	Tourius		
Short term Period		-		

Massachusetts Department of Environmental Protection Bureau of Air and Waste Fuel Burning Device Emission Unit DEP EU# 1190564 1. Ozone season emissions - May 1 through September 30

0	0			
a. Typical day VOC emissions - pounds per day	b. Typical day NOx emissions - pounds per day			
check to enter your own values	check to enter your own values			
NOTE: The form will estimate the ozone season emission ooxes above. Notes and Attachments	ons for you. However, you may enter your own values by checking the			
otes: please include any additional information that will	help DEP understand your submission.			
,	, , , , , , , , , , , , , , , , , , ,			
tachments:				
heck here to submit attachments to this form (e.g., calculation	s) -add a note in the field above indicating what is attached. This will create a			